



## Giving Back: Creating an Informal Network of Support and Caring

BY JOSEPH F. O'DONNELL, MD, AND FREDERIC W. HAFFERTY, PhD

This year brought with it a major milestone: We turned 60. As we reached this landmark, along with many of our friends and colleagues, we sensed a different approach to life (beyond obsessing about our 401(k)s, feeling a tad obsolete at work, and trying for a better golf score—the last of which is probably impossible for Joe!). As a consequence, a few of the elders at one of our institutions, Dartmouth Medical School, began to get together and dream about how we might “give back.” After all, we are now in a place in our lives where productivity and a “bottom-line” mentality are much less important than the values of reaching out to others and “doing good work.” The several of us who are involved in medical education feel especially saddened by the disarray in our health care system, particularly how its failure has happened mostly on our watch.

### The Mandela Group Is Born

We have decided to call our group the “Mandela Group.” It is named after a township prayer by Nelson Mandela that we will paraphrase: “Please bless the elders because they have given so much to the tribe. Please bless the youth because they are our future. Please bless those in the middle because they are doing all the work.”

We wanted to develop a conversation so that we elders can be a blessing to the sick health care system. We introduced our program at a reception at Dartmouth College's Art Museum, when we brought together a group of those over 60 for wine, cheese, and conversation. We used the museum's artwork and docents to get us “noticing” and talking to each other. After discussing some of the art, we broke into small groups to brainstorm about what we might contribute to our medical school, our medical center, our profession, and ourselves. We are not sure where this Mandela Group will lead, but that first evening together was a wonderful experience nonetheless. (Unbeknownst to us when we chose our group

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name, Nelson Mandela was forming his own group of wise elders, including Mary Robinson, Desmond Tutu, and Jimmy Carter, to cogitate on some of the great issues facing the earth.)

Since that first event, some of the group has joined a lunchtime series for Dartmouth College undergraduates called “What Matters to Me and Why.” We really had fun “professing” and we believe we gave students some useful perspectives on self and medicine. We also returned to the art museum and joined fourth year medical students to explore a special exhibit by the modern abstract artist Sean Scully called “The Art of the Stripe.” We talked about the stripes in a physician's life—those vertical and horizontal times that we all experience. The fourth-year students were full of wonder and excitement about their futures and the “Mandelas” were full of perspective and reflection about their own experiences. In the near future, a college history professor whose expertise is in the history of social movements will join our group to help us learn about how our own movement might progress. We also have invited our nursing colleagues to join us for this event. More informally, we continue to talk among ourselves about productive ways we can interact with students, colleagues approaching retirement, and members of our own group to do “things that matter.”

### Societal Trends

Our quest comes on the cusp of a much larger societal trend—the first baby boomers

signing up for Social Security. Although the boomers have always bucked trends and been dedicated to “leaving the campground better than they found it,” we now are supposed to be in Erik Erikson's stage of generativity, and thus better able to get outside ourselves. One particular hero of ours in this regard is our Harvard classmate, Al Gore, who has made a second career of being a great moral voice after he lost the presidency. Over the past seven years, he has been both articulate and right about two of the defining issues of our time—the Iraq war and global warming. Freed from the wraps of politics, he has been able to speak his mind and his conscience. Boston Globe columnist Ellen Goodman, in an op-ed piece called “Second Acts,”<sup>1</sup> points to Gore as a “poster child” for what Marc Freedman calls “the encore career.” For Freedman, head of a think tank that promotes civic engagement as a second act for boomers, “Gore found himself by losing himself—literally losing—and becoming liberated from ambition, the idea that there's a particular ladder you have to scurry up and if you don't make it to the top, it's all over. Essentially, he found a different ladder.” This is what we want our Mandela group to do—build ladders and networks for change. We hope we will be provocative and helpful—while, most of all, having some fun in the process.

The group's quest also comes on the cusp of some important changes in medicine and medical education. Our Mandela Group is steeped in the understanding that relationships and social networks are for health and well-being at the individual and community levels. In this way, our group has ties to the whole relationship-centered care movement, with its emphasis not only on clinician-patient, but also on clinician-colleague, clinician-community, clinician-self, and the necessity for relationship-centered organizations.<sup>2</sup> Our Mandela Group also illustrates how faculty development can—and sometime should—take root and grow outside the walls

of the formal organization. We reflect our institutional homes, but too often good ideas become lost in administrative labyrinths. Finally, our Mandela Group is evolving within broader social concerns about health quality and the ultimate desire of all doctors to take better care of our patients. We model best when we practice what we preach within a culture of collaboration and shared values—including greater patient safety and a better health care system for our patients.

### **Start Your Own Group**

We would like to encourage all the geezers

out there to form your own Mandela-like groups. It wasn't hard to do. People came out in droves! There is a hunger within us boomers to do something meaningful, and there is something special about getting together to think about the crucible that is a career in medicine. Organize a meeting (in a nice venue with some refreshments but no set agenda), brainstorm with your friends about what you might do together (if anything), and begin to tap into the tremendous wisdom we have accumulated. The art museum was a magical place for us to start because the skilled docents

got us talking and noticing in a way that was not threatening—and at the same time fun and educational. And maybe, as elders of the tribe, we can work together to leave the campground a little better than we found it. ❖

### **References**

1. Goodman E. Second acts. *Boston Globe* Oct. 19, 2007.
2. Safran DG, Miller W, Beckman H. Organizational dimensions of relationship-centered care: theory, evidence, and practice. *J Gen Intern Med* 2006; 21(S1):S-9-S-15.