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WHAT MATTERS AND WHAT WE MIGHT WANT TO FORGET

We live in a world filled with language. Language imparts identity, meaning, and perspective to our human community. Just as the language of power and greed has the potential to destroy us, the language of reason and empathy has the power to save us. Writers can inspire a kinder, fairer, more beautiful world, or incite selfishness, stereotyping, and violence. Writers can unite people or divide them.

Mary Pipher, *Writing to Change the World*.

Introduction:

The "Situation and the Story" is what we call our therapy group at Second Spring, a rural, recovery-based facility in central Vermont where fourteen residents live while transitioning from the state psychiatric hospital to the community. Second Spring is alternately described as "bucolic and relaxed with a home-like atmosphere" to "boring as hell."

Our program blends the Medical Model of psychiatric care with Recovery Principles of peer support, self-determination and individuality. The "Situation and the Story" (the title is borrowed from a book by Vivian Gornick that our facilitator has used in group) is the second step of our Cognitive-Behavioral Therapy, where we as a group take our situations and see if by rewriting them, if by changing the language, we can modify our emotions and consequently influence our behavior and choices in the future. We also hope, as writers, to inspire.

Our group describes itself:

Anonymous contributors: two females, four males

Mark: currently sober forty-seven-year-old white male with PTSD and Major Depressive Disorder

Charles: forty-six-year-old Caucasian male with Schizoaffective Disorder and a few challenging behavioral issues

Wilhelm: thirty-five-year-old human being

Adelit: forty-one-year-old Recovery Worker

Dr. R: resident in Psychiatry

Nina: sixty-year-old Advanced Practice Registered Nurse and Clinical Director

Gabrielle: female Recovery Worker

Female Case Manager

The idea for this essay came from visiting the UniversalTable.org website while reading a piece that our Clinical Director, the group facilitator, had published. Both the clinicians and the residents of the facility could relate to the essay she wrote about a patient she would never forget. We talked about the emergence of 'medical narrative' and how the act of writing not only educates others but helps us to change how we feel by the act of expression. Individually we did not feel as if we were professional enough as writers but felt that as a group, with well over three hundred years between us either as clinicians or consumers, we have the expertise to address the question: "For Better or For Worse, the Doctor or Nurse We Will Never Forget."

Our process first took us to groups focused on brainstorming. The brainstorming process led us to explore a number of avenues, some painful, but all leading to the conclusion that none of us had one single person we would never forget, but a collective. We looked at the systems that have influenced our recovery, systems created by individuals and their unique interweaving into our lives. At the table in our conference room sat the residents of the facility, carrying a variety of diagnoses of major mental illness. Also present were Recovery staff with an assortment of backgrounds. One staff in particular had escaped great violence in his homeland and provides quiet proof of hope every day for those around him. Another, a case manager who began as a peer support staff bravely talked of her own experiences "on both sides of the coin." The