Bowling for Socks: Residents Are Reminded That Giving Is Receiving

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This is a story of how we, a group of psychiatry residents from Western Psychiatric Institute and Clinic (WPIC) in Pittsburgh, organized an event to benefit the people we serve in our community and the impact this experience had on our morale, sense of self, and personal and professional development.

As we walk down the street with one of the outreach workers, we hear, “Hey, do you have any socks?” We turn around and see a towering African-American man greeting us warily with his fist out as a sign he wants to give us a “pound.” He smiles. He appears so happy and grateful for the socks, deodorant, and soap we offer to him. We talk with him for a while and confirm that he has a place to stay and access to medical and psychiatric care. We ask him whether we might visit again in the future, and he says, “You’ve stepped into my office, and you’re welcome back anytime.” He makes sure to give us another pound before we leave.

As third-year psychiatry residents at WPIC, we have the opportunity to provide medical and behavioral health care to Pittsburgh’s homeless population through Operation Safety Net (OSN), a nonprofit organization sponsored by Pittsburgh Mercy Health System and the Sisters of Mercy. For a half-day a week for six months, we see individuals on “street rounds,” and we complete psychiatric evaluations for those seeking housing and support from the organization. We dress down and carry food, water, socks, toiletries, and medical supplies in backpacks. We meet people where they are and begin to build a rapport with them. Most of them recognize us and ask if they can have a pair of socks. Socks are not only an incredibly useful item to them but also a great conversation starter. Through these street interactions we are able to encourage men and women to come to our main office and meet with caseworkers, nurses, medical doctors, and ourselves for additional care.

Given the relationship that our residents have built with OSN and the direct impact we have seen of our services, we wanted to get more individuals involved in this advocacy initiative. Over a period of months, our residency program came together to develop a coalition of people and organizations committed to benefiting OSN and put on a bowling event to raise funds and awareness. We called this event “Bowling for Socks.” The support we received from our community, family, and friends was tremendous.

Bowling for Socks was a pivotal experience for us as residents. We proudly stood at our event, watching so many different groups—staff, students, community members, residents, attending psychiatrists, and service users—come together in support of our community. There was a sense of relief and belonging, something that felt familiar and true. After years of training in medical school and residency, it was almost unreal to feel that we could not only actively participate in community advocacy through a clinical rotation like OSN but that such a successful initiative could come about from a simple idea developed among our colleagues. We felt a collective sense of satisfaction that we had created something unique and positive in the face of our sacrifices in time and energy.

Bowling for Socks raised $2,197 along with multiple other donations for OSN. Since the event, the number of psychiatry residents requesting to rotate with OSN has surged such that we have developed several additional electives with OSN for fourth-year psychiatry residents. Moreover, Bowling for Socks has cemented the importance of community service for our residency program, and our house staff leadership now includes a social action committee to help promote community initiatives in the coming years.

As we worked together to coordinate the event, we heard spontaneously from family members whose loved ones had been affected by OSN. This program had been a lifeline when their brother, sister, father, mother, son, or daughter had seemed to drift away beyond the edge of the known world. We read their stories and really “heard” them. Images of men and women whom we have treated over the past several years flashed before our eyes, yet now we saw them more clearly with their fami-
ily’s additional perspective. So many lives are affected every day by medical and psychiatric maladies. Talking with their family members, we were able to see individuals behind these statistics. In our fast-paced days of clinic, research, didactics, and supervision, it is easy for residents to lose focus. Bowling for Socks and OSN brought us back to what was important and reminded us why we chose psychiatry in the first place. We often forget that there are so many community members who live beyond the traditional safety nets of society. This experience allowed us to witness raw emotions and social and medical difficulties, and it challenged us to truly listen to the people we serve and advocate on their behalf. The OSN family reaffirmed the basic lesson of connecting fully and wholly with our patients no matter what the circumstance or environment.

We were able to experience a new model of psychiatry that we always envisioned for our practice but never quite knew how to put into place. The five of us who planned this event each asked ourselves how this event had changed us. Two of us were primarily researchers whose eyes have been opened to the idea of serving the severe and persistently mentally ill. Both will be working with OSN in the coming year through volunteer work and rotations. The remaining three of us have changed career paths based on our association with OSN and our work with Bowling for Socks. One of us is chair of the Group for Advocacy in Public Service Psychiatry at WPIC, one of us is presenting a workshop on cost of medications to trainees to improve patient care and plans to pursue a career involving homeless mental health, and another is our new Social Action Committee chair. We are all looking forward to hosting the second annual Bowling for Socks, scheduled for May 2012.

Bowling for Socks and OSN opened our minds to how we will practice medicine in the future, whether through active advocacy work or more directly through how we treat, care for, listen to, and support our patients. Bowling for Socks brought us together as friends, residents, psychiatrists, physicians, and community members. We were reminded of how richly we can benefit by giving of ourselves. As we were taught as children, “to give is to receive” . . . even starting with a pair of socks.

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