

Trust the Process

A group meets for a last session before a two month break. Most of them express a sense of fatigue and look forward to the break. The social talk goes on for a very long time. There are complaints about people who do not use their masks. There are plans to take vacations that are shared with each other. One member shares the problems of transporting her mother from Florida to New York. Her mother is crippled from Polio and has had problems with walking all of her life. However important the sharing, there is a sense of staying very close to the surface.

I share with the group that I feel like a little boy whose playmates are going away for the summer, and he is all alone. No one seems to hear my lament. The talk continues to be on the surface.

Finally, one of the members agrees to present a case. Her patient lives in China and is part of a psychoanalytic training program. The patient shares that she sees her therapist as having lost a leg. The therapist inside feels furious as this touches a very tender spot in her past history. She often felt like a cripple in her own family. The group wants more information but very little seems to be forthcoming. Suppose, I said, if you shared with the patient, the question "How does it feel to see a crippled therapist?" This intervention seemed to be ignored by the group. One of the members shares that she cannot talk about the relationship with a patient until she has much more of a context, such as the history. I wondered out loud "What is the problem of being in the here and now with the patient from the very beginning of contact?" The supervisee comments that I sound like a very radical therapist. I still feel largely unheard and wonder whether anyone has read my most recent essay. Another member states that she was detached and cut off from my writings. Others made no comment at all. One member finally states that maybe we as a group are feeling cut off and detached, as this is our last session before our break.

One of the members of the group stresses the importance of cultural issues but does not elaborate. I shared with the group my experience of working in China for a brief period of time. A psychiatrist shared with me the attitude of Chinese toward mental illness; "They are to be forgiven and forgotten." This fits really well in my understanding and past experience in working with the Chinese culture. I hesitate to make generalities when the culture is so vast and complex. Yet, in working with the Chief psychiatric hospital in China, I was impressed by the very pragmatic approach to the workshop. All of them wanted a very clear outline of how Art Therapy could help people. They were concrete and practical.

I am also aware of the tremendous push in China for conformity and being part of a family pressure to achieve. Anyone who does not fit into this framework encounters tremendous problems in being accepted. When the presenting patient was sharing her image of her therapist as an amputated, crippled woman with one leg cut off. I thought to myself whether she was talking about her own conflicts. Certainly, it is unusual to study to be a psychoanalyst while living in China. All these areas were at this point not explored or followed through with. As with the society at hand, we too are encountering a sense of restriction and unable to be mobile or move, unless we adhere to strict limitations. We all are somewhat crippled by the current crisis. The group left, I know, with many issues unresolved. I believe they will provide a very fertile groundwork for very provocative and meaningful dialogue in September.