



## **The Shit Painter grows up**

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I was recently asked by Salvador Minuchin to review *The Shit Painter* (Minuchin, Lee and Simon, 2006), the case on which I had received supervision from him, in preparation for his clinical archives, now that more than twenty years have passed. Revisiting *The Shit Painter* is also a revisit of my journey as a family therapist. I am amazed to see the kind of therapist I was then and the kind of therapist I have become.

At the beginning of my training, my therapy was mostly a series of clever conversations, creating metaphors and intellectualizing, a process that served to elevate our pain and conflict way above our heads. Seeking supervision from Sal Minuchin was a rubber stamp to make me even smarter and cleverer. Little did I know that supervision would make me clumsy and awkward.

In *The Shit Painter*, there was a clip where the big brother was coaching his younger brother who has Down's Syndrome. I joined them in my usual clever demeanour and Minuchin stopped me. He said, 'What they are doing is very nice. There is no need for elaboration, no explanation, just brother helping brother ... I want you to shake their hands. Congratulate them for doing a good job ... You are too clever. I want you to fake like you are not!'

To be less clever means I have to grapple with interpersonal relationships rather than give wise remarks. Working interpersonally! This core concept in family therapy that distinguishes the field from other forms of psychotherapy was to me the most difficult idea to grasp. I have always known that the depth of interpersonal dilemma lies in the relationship pattern among family members, the invisible string that ties one person to another. I can describe it like a scene

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from Ingmar Bergman's *Seventh Seal*, in which people are tied together like a string of beads and dancing together in the far distance. However, in actual family sessions, I can only give my observation from the outside rather than experiencing the constraints, the hidden yearning, the pain, the connectedness and interconnectedness of the family members. My journey to work interpersonally became profound only after I returned to work with Asian Chinese families.

When I was working in North America, I was a stranger in a foreign land. The irony was that when I returned to my own culture, I was also a stranger, though on familiar land. Besides, Asian Chinese is not a monolithic group, there are far more subcultures in this entity than I was aware of. It is easy to say we need to be sensitive to culture, but what exactly is the culture we are talking about? I remember working with a family from the triad group in Hong Kong. The parents opened a stall in the black market area and they were struggling with adolescent problems with their only daughter. I was thrilled to meet the family. Like an anthropologist, I was interested in exploring the life and beliefs of a triad family but, needless to say, they were only interested in talking about the daughter. I soon learned that there is no place to be clever. Language can be seen as quite useless with families that are more inclined to express themselves in action. In Hong Kong, I learned that therapy can be a Kung Fu movie, where cognition has to give way to energy and action (Lee, 2002a). I also saw a case in Taiwan in which the adult son was so enmeshed with the mother he had no life of his own. When she described her son as a sheet of white paper with nothing on it, I said to them, "That's not true, it has "mother mother" written all over it!" I may be theoretically correct but I certainly freaked out everybody present at my interview, including myself.

Not only is there no place for smart metaphors, I soon learned that there is no place for a smart therapist either.

My repertoire as a family therapist was really put to the test when I began to work in Mainland China (Lee, 2002b). I was asked to consult on a case with a depressed man who had been hospitalized for a year. His wife had stayed in the hospital with him as required by the Chinese mental health system. As I was not successful in moving the man out of his depressed mood, I sympathized with his wife and explored what it was like for a healthy person to stay in the mental hospital for a year. The wife was not particularly responsive to my enquiry but the audience was in uproar as they thought that I was bringing feminism to China. Interestingly, follow-up of the case showed that the wife left

the hospital soon after our session and the husband followed suit. From that point of view, I was effective in getting the husband to leave the hospital, which was the goal of the hospital, but from the perspective of local professionals, my approach in getting there was controversial. By ignoring the need of a sick man and highlighting the need of the healthy one in the couple liaison, did I succeed in activating the interpersonal system to speed up the healing process or did I stir up chaos unnecessarily, failing to see that the couple's subsystem was enclosed within a much larger system? Was I at risk of breaking up an otherwise well-maintained marriage or was I saving the woman from a miserable relationship that offered her little satisfaction? Is it realistic to expect individual fulfilment in a tradition that glorifies the sacrifice of individual need for the need of the others? As my lens is largely obtained from abroad, am I at fault of americanizing Chinese families?

The case that really expanded my emotional capacity was one from Beijing with a woman in her 60s suffering from severe depression. When I asked her about her illness, this was her reply, 'I think I have contracted a political illness. From idealism to illusion to disillusion, and finally all my dreams are shattered.' She went on to give an account of her forty years of political life as a communist officer. Her husband was an overseas student from Indonesia who went to China as a youth to serve the country. They were soldiers in the early communist regime and during the ten years of Cultural Revolution, they were perpetrators as well as victims. Now that they were out of the limelight, the husband had adapted well to retired life, but it seemed that the wife's energy was still consumed by past political upheavals. As she spoke, her eyes beamed with excitement but her psychiatrist became quite irritated and kept asking her to move on. It seemed that the helping professionals here were inclined to listen to patients' complaints about their illnesses, as in the case of the previous couple, but to listen to a patient's narrative of a piece of history was considered a waste of time.

The husband was concerned that she might become too excited and would not be able to sleep at night and his previous attempts to stop her from dwelling on the past only resulted in arguments. As young comrades they had been united by the same dream and inspiration, but as a retired couple they seemed to have little in common.

To bring her back to the present, I asked if they were happy with the new China; they both agreed that it had never been better. I then asked if they felt they had contributed to building this new country.

They both said yes, but she said she was now feeling useless and did not know how to use her energy.

As I was listening to this couple I felt very touched by them. I told them that although I was aware of the political struggle in China, the way she described it gave me a sense of connection. I asked if she ever thought of writing her story down and if I could write about my meeting with her. She was astounded and asked what I would be writing about. I began to elaborate, 'I would probably write something about how I met this couple in Beijing. They had, in the course of an hour, filled me in on forty years of Chinese history, an experience that I had missed in my own life. For during those years while they were fighting with their lives to rebuild our country, I was wandering in a self-imposed exile in foreign lands.'

I did not complete my story as I began to choke up. She looked at me with great amazement. As our two parallel lives crossed at this juncture, her story merged into that of my own.

It soon occurred to me that some of the audience was in tears as well. I was told later that a narrative of the Cultural Revolution had long lost its audience. In this case, it seemed that my interest in their saga had a healing effect for the woman as it gave new meaning to her old struggle. And the best feedback I have ever received came from someone in the audience who told me, 'You have the advantage of coming in as an outsider, because you can see novelty in things that we have long lost interest in.'

I gained from this experience something very dear to my heart. This encounter also provided a healing process for myself, as it gave a sense of closure to my many years of wandering abroad without a clear purpose. I began to see the importance of using myself differently; sometimes I take advantage of my role as an outsider, other times I allow myself to become part of the family drama. All this means that I have to work experientially with families of different cultures, recognizing what may be universal or what may be idiosyncratic. In my work with the young man with an eating disorder, although I was following the same four-step map as Minuchin did (Minuchin, Nichols and Lee, 2007, p.156), my process in achieving each step tends to be more obscure and with many detours. Like the different designs in Western and Eastern architecture, he aims for a direct route, and I go back and forth and sometimes in circles before I reach the destination. Perhaps this explains my view of family therapy, East and West. I believe a therapist has to obtain freedom within

the constraints of a family system while respecting its resilience in order to work with families of all cultures.

In the past twenty years, I have travelled to many places, working with families directly as a way to teach and a way to learn. Breaking many rules and tumbling into many new adventures, sometimes I purposefully put children in triangulated positions (Lee, Ng, Cheung and Yung, 2009), against all odds; other times I call for a difference among Asian couples (Lee *et al.*, 2013). I have become a therapist who is committed to the use of self. In so doing, I learned to embrace uncertainty, accept my clumsiness, and always dance in the interpersonal dilemma.

Family therapy in Asia is still developing and there are still many uncharted territories. Through sharing my growth process, I hope to add some colour to the fabric of family therapy with Asian Chinese families.

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