

REFLECTION(S) OF/ON SUFFERING: FIELD NOTES OF A SUFFERING SPECIALIST

受苦的倒影：一個苦難工作者的田野備忘錄

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Author, counseling psychologist, and social worker Wei Ming-I has decades of experience walking side-by-side with her clients through the fires of intense suffering. This collection of entries from her case notebooks records the observations and reflections of a front-line “suffering specialist” in interaction with those in need.

The little girl displaying her self-inflicted wounds in a bid to win the sympathy of her social worker; the perpetrator of domestic violence who threatens suicide; the juvenile delinquent; the civil servant who has become numbed by the system.... each of these people suffer silently in the margins, yet the myriad tendrils of their pain touch every corner of society. And there are certain people, the “suffering specialists” – the social workers, the counselors, the police detectives, and so on – who extend a hand to pull others out of their suffering, and require special skills and training so that they themselves are not sucked into misery’s black hole in the process. Written by a counseling psychologist and social welfare supervisor, *Reflection(s) of/on Suffering* records decades of observations and reflections from the front lines of this struggle to assist those in need.

The book is composed of forty entries from the author’s case



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notebooks, providing detailed snapshots of episodes from her working life. Organized into three “sites”, the book gradually draws readers deeper into the issues confronted by suffering specialists in their work. First, the author uses real case studies to illustrate the darkness and tragedy that exist in society. Next, she broaches the unavoidable dilemma faced by suffering specialists working within a capitalist system: is it possible to retain their ideals, or are they doomed to be assimilated into a system which drives individuals to compete for recognition, position, and power? Finally, the author borrows the concept of open-ended games to encourage suffering specialists to think outside of conventional frameworks when confronted with the challenges of their profession.

Suffering specialists are critical links in the chain of social welfare services. Here, their daily encounters are vividly recounted by a counselor and social worker whose background in anthropology contributes to her objective assessment of human affairs. With her lyrical prose and strong philosophical tendencies, she guides readers through the contradictions and blind spots of the social welfare system, granting a taste of the uncertainty and confusion faced by suffering specialists, and reminding readers of the importance of preserving their optimism and ideals in the face of life’s challenges.

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REFLECTION(S) OF/ON SUFFERING: FIELD NOTES OF A SUFFERING SPECIALIST

By Wei Ming-I

Translated by Emily Lu

April 20th, 2020, noon

Location: Chain Restaurant

Event: Lunch

Re: Those Who Labor in the Margins

Today's worksite was two hundred kilometers out. Not wanting to be late, I took a much earlier train. Punctuality was one of the few habits I was willing to carry forward from my practice. It framed each of my interactions at work, as well as my personal life, constituting a clear and well-established daily rhythm, and bringing efficiency to my routine. Perhaps to the detriment of myself.

There were still two hours before work. I walked into a fusion chain restaurant opposite the station and next to the department store. In addition to my meal, I ordered a ginger soda to stay.

The restaurant offered Chinese and Western dishes, and the dining area was bright and spacious, with the tables arranged in a way that I wouldn't accidentally catch the eye of my neighbor. However, if I was attentive, I could hear adjacent conversations. The restaurant was not busy just before noon. A mother and daughter sat down at the table to my right shortly after I placed my order.

The mother asked: "What would you like? Sundae or fruit juice? How about the sundae?" I didn't hear the daughter's reply. She might've nodded.

The mother continued: "Anything else? Why don't we get the fruit juice, too. What about to eat? Spaghetti?" The sound of the mother's voice was fluid and well-polished, every phrase falling from her lips neatly.

After their server left, the mother continued: "Mommy's really busy today. Let's eat quickly, ok?" I heard the daughter mumble a reply, but it was too quiet to make out.

Customer satisfaction was this restaurant's priority, and the service was speedy. After a few moments, their set meal arrived with its side soup and sundae. "Hang on, mommy's going to take a photo."

Their conversation continued quietly through their meal, between a mother and daughter that clearly spent a lot of their time together. The child was a cherished one. A lucky one.

The mother twirled the spaghetti into her mouth while paying the bill. Then asked for the latte to be packed up. Then ordered another croissant. “For you to bring along in case you get hungry later.” She said to her daughter: “But you have to eat quickly now, or we’ll be late. Are you finished?”

In less than thirty minutes, the mother and daughter ate and left. I couldn’t help but glance up as they walked by. The little girl could have been in grade one, holding a paper take-out bag and following quickly behind her stiletto-heeled mother, who held her hand.

Not too long after, I also started packing up my notes, and drained the last of the tea from my cup. I prepared to set out to my worksite for the afternoon. There were twenty or so girls placed there for a myriad of reasons unnamed. The parents who ushered them into this life had not paused to hold their hands. Luck, it would seem, did not distribute evenly.

Delving into the backgrounds of these placement kids I found bright lights of cityscapes and the transient adults drifting through them. In 2011, I was travelling in the world of Keelung dockworkers. I examined the local culture of *gâu*, a working class male obsession with displaying capability and grit, and how through national policy and global supply chains alike it perpetuated the collective suffering of the dock men. Was something similar happening in the world outside the docks? More than a decade later, was it also a way of explaining my work ethos across the island’s districts and every scene of suffering?

June 30th, 2021, morning

Location: Placement Agency Meeting Room

Event: A One-on-one Meeting

Re: The Eternal Question

Because my previous meeting ran late by five minutes, Hsin was already waiting for me by the door. At the time, Level 3 COVID restrictions were in effect. We were both wearing masks. Hsin was no stranger to me; I’d done group supervision for many years at the placement agency where he worked. The brisk pace of those previous group supervisions broke the ice of this first one-on-one meeting; we quickly delved into the heart of Hsin’s issue. Or, perhaps the lack of cautious probing on Hsin’s part was due to what he later told me: that he was someone who trusted easily. We didn’t yet know what role that trust would play in his life, and in the lives of others.

Hsin’s suffering arose from his confusion over the myriad relationships of his teenage years. Alongside the changes in his body and appearance brought on by adolescence, his relationship to others and the world became increasingly complex, impacting his sense of self. Over time, relationships with family, friends, and even the physical space of his life became uncertain, unfamiliar. He longed to know how to definitively orient himself along these relational

axes, yet with this longing came an ever-shifting emotional landscape that had to be negotiated. Hsin, like most youth his age, was embarking on a road of many questions and uncertainties.

The questions were like waves on the sea, waning and waxing, harboring contradiction, culminating in the ultimate question: what to live for? Over the past few centuries, this eternal question has become unavoidable within highly developed societies. Yet in our modern imagination, the question has been repackaged strategically into one of futility: “What is the use in living?” We began to doubt our own productive value. Across most homes, campuses, workplaces, and every level of social relationship, this systemic deflection took place.

Eternal questions are not going to dissipate from our aversion. Rivers stagnate into cesspools. Time ferments life into an asphyxiating stench, repulsive to all, unsightly to all. No one enters and no one leaves. Under this massive inscrutable cloud, the slightest breeze is enough to knock us over in an instant. And yet, modern society, enraptured by capital and productivity, poses no reply. It cannot reply due to its role in the reproduction of collective scarcity and suffering. Rather it kicks us while we are down, proclaiming that individual weakness and disorder are the root of all suffering.

From the student counselor’s office to the psychiatric hospital, Hsin was diagnosed with severe depression. He went from consultation to hospitalization, from a regional hospital to an outpatient clinic, from eight pills per day to twelve (which he continued to take though they didn’t seem to help much), to another suicide attempt, to readmission, to another discharge... At that time, Hsin was a postsecondary student, and he had been assigned the role of patient – of being deficient – for his attempts at answering the eternal questions. Was his tortuous trajectory the direct result of illness? Or, were there other possibilities, something crucial we might have collectively overlooked?

Hsin’s trust didn’t stop with me. He also trusted the medical and pharmaceutical fields. He was a reliable patient and had strong insight into his illness. Hsin attributed the side effects of the medication, including memory issues and involuntary movements, to the progression of his illness. Even his doctors had scribbled *relapse* under the diagnostic classification heading of his medical chart. All of his life’s griefs, new and old, were viewed through the lens of symptomology and chronic illness.

The field of psychiatry relies heavily on assessing the patient’s insight into their illness. However, determining diagnosis and insight is like strengthening a safety mat to stop people from falling. If we stretch a safety net under the heavens and obscure the eternal questions, we only manage to reduce the question to one of disease and symptomology. Thus, a person becomes a social and political patient, a sufferer.

Depression isn’t an immaculate conception. Suffering and illness leave a trail. However, an individual’s alienation from relational life prematurely buries that trail. Terminal lifesaving measures in the name of rescue only propel that suffering into illness, in a vicious cycle. What circumstances had this young person met with before he encountered me? Did his predicament arise from a convergence of mistakes, or by chance? And did institutional safety nets play a role?

Metaphor is both the process and result of naming. Metaphor utilizes certain values and meanings to pin down life. From what viewpoint was “the safety net” used as a metaphor to distinguish the sufferers from the non-sufferers? What were the limitations of that viewpoint for professionals and the public?

As someone who worked within that safety net, how could I respond adequately to Hsin’s trust? Moreover, how could I address the factors outside of his control: his reoccurring suicidal ideation, the day-night reversal caused by his work schedule, his fitful sleep, the high-dose medications and their associated cognitive blunting, among numerous other uncertainties? They had stampeded over each other in such a knotted configuration as to be impossible to unravel. Could I accompany his suffering with mere patience and kind words? If yes, was that based in my expertise on the dynamics of human behavior in various settings? Or was I just regurgitating western theories without the blood and arteries of context?

Or, could it be that my offer of compassion and support only stems from my own helplessness? Was the supportive role of a therapist who has fragmentary knowledge of Humanistic Therapy and psychodynamic psychotherapy merely a sham, a cover up for a lack of expertise and skill? Compassion and support have little relevance to modern structures of collective suffering, offering only a defensive kind of equanimity. Perhaps it is nothing more than professional arrogance and mediocrity dressed up in the guise of beautiful rhetoric.

We have taken the most basic psychotherapeutic stance – empathetic support combined with probing of the patient’s developmental history – not only as a starting point; through wishful thinking, we’ve also made it the destination, and even the ceiling. What theoretical issues does this impose for those legally accredited to practice in mental health, and for those being practiced on? With support as its capstone, our field of specialization has adopted a non-confrontational stance that bypasses theoretical responsibility and reflective self-criticism. Our mediocrity has festered into real consequences for many.

Support and listening are necessary, but they should not be reduced to a presumption or a microwave dinner gimmick. The mental health worker should think: is a supportive stance crucial to this situation, or is it simply a deflection of responsibility? Is it the professional face we turn towards suffering, or a copout we don’t want to admit to?

In certain moments, people need much more than attentive listening. And in those moments, are we, as professionals, using our boundless reserves of attentive listening to bury our ignorance?

The deep questions masked by Hsin’s “symptoms” required attentive examination and honest self-reflection. Given his efforts at work, his capacity for understanding, and his keen observations during our discussions, I couldn’t squarely attribute his mental state and suicidal ideation to a diagnosis of depression. That did not appear to be the origin of his problems, nor the one path towards their resolution. The institutional response to depression might have in fact propagated a new problem cluster.

At this point, any discussion of safety interventions was too caught up in the practitioner's ego. I needed to catch up to Hsin's primary question: what do we live for? At the same time, I needed to be wary of the glut of medications landing daily in Hsin's hands, and the biological side-effects that ripped across his day-to-day life.

Hsin's complex case required attentive examination and response. Given his efforts at work, and his capacity for understanding and keen observation during our discussions, I couldn't squarely attribute his mental state and suicidal ideation to a diagnosis of depression. That did not appear to be the origin of his problems, nor the one path towards their resolution. The institutional response to depression might have in fact propagated a new problem cluster.

Insight cannot be the sole aim in treating mental illness. Shifting the focus from individual to collective care in a time of suffering and hardship could be a critical departure from how we think about mental illness. In particular, we should not naively assume that mental health systems, including medications and their recommended dosages, are a science completely divorced from big pharmaceutical interests. The crucial question then becomes: how do we live? What form does our life take, situated in what kind of life-world?

Before our session ended, I asked Hsin one last question: was he willing to consult another psychiatrist that I knew and trusted, to take a look at his medication dosages? I hoped there was still a chance to slow down these medical interventions, and allow the complexity of his essential life dilemma to resurface.

November 22nd, 2020, morning

Location: At The Door

Event: Meeting

Re: Where Life Happens

After leaving a consultation room and driving over one hundred kilometers, I arrived in the district where Hsin-hsiung lived. It was our third meeting. I had arrived an hour ahead of our appointment to learn more about how the lone survivor of a countryside parricide case was getting on in his old neighborhood.

The start and end of suffering is inextricably linked to the spaces where life is lived. Modes of living, familial relationships, the social status of relatives, local demographics, levels of education, the landscape of local politics and industries, and the land where they are situated – these are some of the threads that are woven to form the various pockets of ordinary life. They shape how residents view themselves and each other, as well as how they view the events of everyday life.

There is a social element to the mind and body. Delusions and hallucinations – medical terms – cannot be independent of the political and social axes of a person's lived life. Meaning only emerges under a local framework. We must base our actions in an understanding that avoids seemingly scientific language which only crudely approximates meaning.

The closest market and administrative center were at least ten kilometers away from Hsin-hsiung's house. Like elsewhere on the island, anything not in the city center was considered rural. I saw no bus stops along the county road on my way in. With the arrival of autumn, the western skies were already a grey haze. Traffic was sparse. Lack of overhead cover discouraged any pedestrians. The wide four-lane asphalt road seemed increasingly deserted and still. It was a road that seemed to herd visitors out.

I detoured off the asphalt road onto a narrow path. It wound through several small orchards and vacant farm lots. Eventually, I parked next to some family cars in the lot adjacent to a newer residential building. On the map, Hsin-hsiung's house was only several hundred meters away. It took about a thirty-minutes to walk to my destination.

Compared to the old bungalows that lined the county road, this neighborhood had single-family low-rise dwellings constructed in the 1990s. Out front, each family had parked their scooters, joss paper burners, various cleaning supplies, and other instruments of daily life. The two rows of houses faced each other, with a few families here and there renovating their main level into a storefront or a garage for offstreet parking. Between the front doors there was a lane about four meters across, a mixed space for residents walking by or stopping.

Semi-open, a blend of private and public space, this layout achieved a highly desirable configuration of living space. My stepping foot here was sure to stir-up some turmoil. Under watchful eyes, I was careful in my inquiries to not provoke further judgmental glares and gossip within these narrow lanes.

At the scheduled appointment time, Hsin-hsiung came out of his house. He did not invite me in. We stood outside his door chatting on the side of the four-meter-wide lane. A private meeting became an open group conversation in the span of about ten minutes, as his neighbors stopped sporadically to join in, revealing how quickly this thicket of interfamilial relationships interposed itself into individual tragedy. After the meeting, as he walked me to my car, I asked: "There aren't so many cars and people here, and it's not noisy like the city. Is this a peaceful place to live?"

Hsin-hsiung shook his head solemnly: "There's too many people."

What better life was Hsin-hsiung's family imagining when they moved into that house – at a carefully-selected, propitious hour, following many years laboring in the city – and into these quiet neighborhood streets?

Open doors and familiar streets, like other social relations, provided a form of collective care and daily reciprocity, but are also interwoven with sociocultural norms and value judgements. To start, there was the onus of familial and societal expectations piled onto the boy, along with all of the physical and mental contributions to his nurturance, encouraging heightened self-centeredness and self-indulgence from a young age, as well as the desire for a better/perfect life. At the same time, this conditioning all but guaranteed his eventual failure. This crisis was not the result of some catastrophic blow. The suffering instead was derived from the seemingly immaculate surface of everyday life. The significance of our early life experiences is not defined by any particular memory, or a "deficient" family structure. Rather, it comes from the wider

culture and society – the cumulative effect of words said aloud, furtive faces turning away, and noiseless body language reverberating again and again through our collective lives.

