

TRAUMA, TIME, TRUTH, AND TRUMP

How a President Freezes Healing and Promotes Crisis

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In the days following the November 8, 2016, election of Donald Trump as president of the United States—the most powerful leadership position in the world— many individuals, particularly those targeted by Trump’s rageful expressions of xenophobia, racism, sexism, and Islamophobia, experienced the event as traumatic, without quite knowing why. “I feel like I did after 9/ 11,” said one colleague. “I am in shock,” reported a patient. “I don’t know what to think.”

Throughout the next weeks, patients and colleagues alike told me that the very idea of a President Trump left them feeling exposed, vulnerable, and helpless. “I have four out of six identity markers Trump will target: Arab, gay, immigrant, and woman,” commented one patient. “I don’t feel safe walking around anymore.” One woman who was conflicted about whether to report her rape decided she would not. “How could it matter anymore?” she asked. “No one would believe me now.” Another survivor was more blunt: “We elected a rapist to the presidency,” referring to the accusations of sexual assault (Crockett and Nelson 2017) that several women brought against him, to no consequence. A colleague who treated New Yorkers in the months following the 9/ 11 terrorist attacks on the World Trade Center said the reactions he has seen in his patients to Trump’s election and presidency are far worse. “The difference is, the attacks of 9/ 11 were finite and enacted by an outside source,” he observed. “Trump was elected by those among us, and his aggression feels incessant and never ending.”

These reactions were also my own. I, too, was in shock; sitting with patients, I struggled to focus. I was prone to spontaneous tears. When asked, I found it difficult to summon the words to explain my distress. I recognized these responses as symptoms of traumatic shock, the possible harbingers of PTSD— posttraumatic stress disorder— which is commonly experienced by traumatized patients.

I am a psychotherapist— specifically, a trauma therapist who treats at a major hospital in New York City adult survivors of sexual assault, domestic violence, and childhood sexual abuse. My job is to have some clinical understanding of trauma and how it impacts individuals and knowing how to treat its subjugating effects. Yet, I was baffled. How could a nonviolent event such as the peaceful election of a president generate a trauma response? Whatever one’s political leanings, one could not equate Trump’s win with an actual physical attack or a natural catastrophe.

Or could one?

The American Psychological Association defines trauma as “an emotional response to a terrible event like an accident, rape, or natural disaster.” And for many people— especially, but not confined to, those in groups that Trump targeted during his campaign— his election and now his presidency are truly terrible, even disastrous, events.

Indeed, in the months since November, psychotherapists nationwide have reported an unprecedented focus on politics in their sessions, and a surge in new patients (Gold 2017) seeking help with the high anxiety and stress they feel in reaction to Trump's steady stream of extreme tweets and impulsive actions. Indeed, from the confusion and worry caused by his disastrous immigration travel ban; his irrational accusations that President Obama wiretapped Trump Tower; and his sudden military actions against Syria and North Korea, President Trump appears more concerned with drawing attention to his power through creating crises rather than resolving them.

It is inevitable that such destabilizing behavior in one who holds the most powerful leadership position in the world will heighten anxiety and fear in not only the previously traumatized, but the untraumatized as well. Media pundits and clinicians have coined terms such as post-election stress disorder (Gold 2017), post-Trump stress disorder (Pierre 2016), and headline stress disorder (Stosny 2017) to draw parallels between the anxiety reactions suffered by increasing numbers of concerned Americans and the symptoms of PTSD. If what we read about is true—and I will return to this, as Trump and his top advisers have also shaken our notions of truth and fact—PTSD-like symptoms of insomnia, lack of focus, hypervigilance, irritability, and volatility now afflict not only combat veterans, first responders, and survivors of rape, violent crime, natural disaster, torture, and abuse, but many of the rest of us as well.

Again, as a trauma therapist, I puzzle over this correlation of symptoms in greater numbers of the general American populace to PTSD, where the source of trauma is not a physical attack or a natural catastrophe, but the incessant barrage of aggressive words and daily reports of the erratic conduct of a powerful, narcissistic, and attention-seeking world leader. There is much debate over whether post-Trump stress disorder is “real” or just another example of how “snowflake liberals,” goaded on by a “hysterical” left-leaning media, overinflate their suffering. There are questions about whether this trivializes the suffering of “true” trauma survivors, who have experienced “real” attacks and harm.

From a clinical perspective, however, such debates at best distract and at worst shame us away from a more thorough consideration of the root causes of this unique phenomenon: how the election and actions of a president such as Donald Trump could cause a large swath of American citizens to feel traumatized or re-traumatized. It is important to remember that Trump's ascendance to the White House is unprecedented and incongruous. We are in uncharted territory. How a New York City real estate magnate and reality television celebrity who had no previous legal, legislative, government, or foreign policy experience could become president of the United States is a circumstance many still find difficult to comprehend. If we agree that the skills of a U.S. president are as crucial as that of a heart surgeon—whose professional judgment and expertise can mean life or death for his patients—then it is terrifying to see that the American body politic has, in Donald Trump, a cardiac surgeon who has never set foot inside an operating room. He is a doctor who has no knowledge of, and arguably no interest in, the inner workings of the American government's heart. It therefore makes sense that his lack of qualifications and his insensitivity to the complexities and impact of his role would inspire great anxiety, if not even panic, in those of us whose lives depend on his care—regardless of political affiliation or trauma history.

For those previously traumatized, however, Trump is even more triggering. Such individuals

may experience his volatile, retaliatory, and unilateral behavior as mirroring that of the abusive parent, the wanton bully, the authoritarian teacher, or the sexually aggressive boss who subjugated them in the past. Because a trauma survivor's brain often exists in a heightened state of hyperarousal, Trump's daily outrages deliver unnecessary neurobiological overstimulation, narrowing a survivor's "window of tolerance," or cognitive space for calm, linear thinking. Such individuals are thus more likely to feel more anxious or even to fall out of their "window of tolerance" into panic attacks, flashbacks, and dissociation. And when we consider who is particularly vulnerable to such heightened anxiety, the numbers of Americans who hold one form of trauma or another are greater than we may think. According to Harvard trauma expert Dr. Bessel van der Kolk (2014):

Research by the Centers for Disease Control and Prevention has shown that one in five Americans was sexually molested as a child; one in four was beat by a parent to the point of a mark being left on their body; and one in three couples engages in physical violence. A quarter of us grew up with alcoholic relatives, and one out of eight witnessed their mother being beaten or hit.

When we consider how many Americans experience, personally or intergenerationally, the traumas of slavery, immigration, war, natural disaster, and genocide, we start to understand on another level how it is that Donald Trump, a wholly unqualified president who neglects history, highlights divisions, and makes impulsive decisions, would foment unrest in us all.

Trauma, Time, Truth, and Trump

Thus, President Trump is a destabilizing force that stirs some of us to the point where we experience him as a psycho-socio-political tornado. In fact, the debate over whether post-Trump stress disorder is "real," and if it is as serious as PTSD, is itself a kind of trauma response. Queries voiced among Americans in response to Trump's election and after his first one hundred days in office—"Is this real?"; "This is not serious, or is it?"; and "I don't know what happened, but I can't move on"—mirror those asked by many of my patients after they begin treatment. They grapple with experiences that are paradoxically too upsetting to consider and too overwhelming to deny. When a U.S. president inspires such internal confusion among the citizens he has been elected to serve, this bears serious consideration. Is Donald Trump causing a trauma epidemic?

From my perspective as a trauma therapist, I highlight two key components of trauma (time and truth) to illuminate how Trump impacts so many of us in a traumatogenic way. In so doing, I aim not only to validate the trauma responses many have had to this president, but also to point out how we can minimize Trump's effect on us. If we know how trauma is constructed, we can do something with its component parts to lessen its effect. In this way, we can prevent ourselves from becoming overwhelmed and immobilized by anger or anxiety in the face of Trump's erratic and vindictive behavior.

Time and Trauma

Media ecologist and cultural studies professor Jade E. Davis (2014) considers how online digital media reflects and shapes our perceptions of historical or current events. In her breakdown of the phenomenon, Davis states that "trauma can exist only in the post-tense," after survivors have been able to find words to describe the horrific event. This is to say, our ability to consider

trauma is always contingent on time.

Davis’s assertion that trauma is “located in the narrative and accessible through testimony and witnessing” reflects a cornerstone of our work in trauma therapy. A main objective of treatment is to provide the traumatized individual with a sense of safety so she can relate her story, trusting in the fact that her therapist has the tolerance and compassion to bear witness to the survivor’s pain, fear, and shame. This relieves the deep isolation that plagues the traumatized. Van der Kolk (2014) agrees:

This is one of the most profound experiences we can have, and such resonance, in which hitherto unspoken words can be discovered, uttered, and received, is fundamental to healing the isolation of trauma. Communicating fully is the opposite of being traumatized.

In trauma therapy as in daily life, “communicating fully,” be it with oneself or another, takes skill, care, and time. Mental reflection relies on our having the space and time to take an experience in and to sift through its various parts, in order to engage in dialogue with oneself and others. This is how we orient ourselves to our experiences, our opinions, and our values; this is how we verify our realities. This is how we think.

When we are traumatized, our capacity to think and communicate can become so compromised that we need extra support. Neurobiologically, traumatic experiences silence the speech centers of the brain (van der Kolk 2014), rendering us literally speechless. When a survivor has no time or ability to find the words to tell her side of the story in a traumatic situation, Davis defines this as crisis. She describes crisis as a closed and sealed circle representing a situation inaccessible to time and witnessing—that is, a circumstance that lacks space for perspective, one that is subsequently isolated from exchange, change, and growth (Davis 2014).

The following diagram (Davis 2014) illustrates the difference between trauma and crisis:

SOCIETY AT LARGE



Illustration courtesy of Jade E. Davis

Trauma refers to a response to a disastrous event that exists in language and time. In Davis’s

illustration, it has a porous, dashed-line boundary because a traumatic narrative is a testimony that allows others to bear witness and enter the experience of the traumatized. It is open, not closed. By listening, a witness helps contain the trauma, as represented by the outer dashed-line circle. In the exchange between a traumatized patient and her witness, shifts in the traumatic narrative naturally occur, and growth results. This narrative eventually moves to a fully mourned space, freeing the patient from being controlled by heightened anxiety and triggers that prompt flashbacks and panic attacks.

By contrast, “Crises are histories that exist in closed circles ... there are no testimonies and no witnesses ... People in crisis become bounded, out of place and out of time” (Davis 2014). In Davis’s diagram, crisis is illustrated by a sealed circle. It shows that within its nonporous boundary, events are cut off from time and language, and therefore inaccessible. Without the crucial perspective that time and language afford, a disastrous experience can neither be thought about nor shared, nor mourned. Possible witnesses can only be helpless bystanders, unable to hear or respond to those imprisoned within. Individuals in crisis remain stuck in place; there can be no growth or letting go. Their internal chaos remains the same because there are no words to make sense of it. Without language, there is only mindless action and reaction, a cycle driven by fear, panic, and dissociation.

This is the state that President Trump keeps us in. He does so by flooding media outlets, both old and new, with myriad vindictive tweets, defensive press conferences, and sudden firings. Context is key; if Trump were not president of the United States, his ravings would simply be those of an arrogant, unmindful, loudmouthed reality TV celebrity who compulsively seeks attention by cultivating shock and outrage on both ends of the political spectrum. The “no press is bad press” boorishness of his actions would find traction only on reality TV and in tabloid and gossip pages that, before the 2015–2016 election cycle, were the main sites trafficking in Trump’s baldly self-promotional broadcasts. While it is beyond the scope of this essay to delve into the social, economic, political, and demographic circumstances that allowed Trump to morph from entertainment persona to leader of the free world, it is important to note aspects of our current technological climate, which combine with Trump’s now-central role as U.S. president and his narcissistically compulsive personality, to keep the American public fixated on his toxic behavior and stuck in a state of chaotic, meaningless crisis.

Our ever-increasing use of the Internet demands that we process new information at the speed of the supercomputers that drive it. As Brown University digital media scholar Wendy Chun (2016) observes, “[T]here is an unrelenting stream of updates that demand response, from ever-updating Twitter.com feeds to exploding inboxes. The lack of time to respond, brought about by the inhumanly clocked time of our computers that renders the new old, coupled with the demand for response, makes the Internet compelling.”

“I think, therefore I am,” Descartes’s Enlightenment-era definition of human existence, has become, in the twenty-first century, “I post, therefore I am.” Compelling as this is, there is a falseness to this promise. This is marked by the exhaustion we experience when we spend too much time online. For the insomnia-stricken among my trauma patients, I recommend removal of screen time at least an hour before bedtime; Web-surfing scatters attention and overstimulates the brain. Moreover, backlit screens have been proven to block the brain’s production of melatonin, a natural sleep-promoting hormone. For the traumatized, whose neurobiological

systems are already in a state of hyperarousal, heightened anxiety and sleep disturbance narrow their “windows of tolerance.” This makes finding calm even more challenging and hinders healing significantly.

We are not machines; feeding our quest for knowledge and defining our existences online delivers a synthetic fulfillment that is fleeting and unsustainable. Seeking such satisfaction via the Internet is like trying to quench thirst by sipping water from a fire hose. By drinking from the Internet’s fire hose, we not only end up still thirsty, but we may get seriously hurt in the process. Because this onslaught of information disallows us from taking the time to truly consider any of it, we open ourselves to believing dangerous and unchecked falsehoods. Both Chun and Stanford University election law scholar Nathaniel Persily (2017) warn of the alarming political consequences of our collective inability to think or verify the truth of what is broadcast online. As Chun (2016) observes, “The Internet ... has been formulated as the exact opposite of Barlow’s dream (of an unregulated space for a free marketplace of ideas): a nationalist machine that spreads rumors and lies.”

While Chun points to the Internet’s potential for fostering the seeds of nationalist propaganda, Persily asks, “Can Democracy survive the Internet?” in the very title of his recent paper. By analyzing the 2016 digital campaign for U.S. president, he orients us to what today’s Internet amplifies: social media retweets, false news shares, bot-driven articles, and troll-inspired critiques that reflect and stir reactivity rather than disseminate the truth: “What the Internet uniquely privileges above all else is the type of campaign message that appeals to outrage or otherwise grabs attention. The politics of never-ending spectacles cannot be healthy for a democracy. Nor can a porousness to outside influences that undercuts the sovereignty of a nation’s elections. Democracy depends on both the ability and the will of voters to base their political judgments on facts.”

Persily highlights the maladaptive match between Trump, a spectacle-driven reality TV persona, and our current technological age. The pairing of online media sites that rely on page views to maximize advertising dollars with Trump’s factually thin but impossible-to-ignore shock effect ravings has resulted in his effortlessly infecting media outlets primed to spread his viral-ready broadcasts. His success at capitalizing on the mass market use and influence of social media is something that social and political scientists, digital media scholars, campaign experts, journalists, and government officials are scrambling to understand. As Persily observes, “For Trump, his assets included his fame, following, and skill in navigating the new media landscape. He also figured out that incendiary language could command media attention or shift the narrative. These combined strategies allowed him to garner roughly \$ 2 billion worth of free media during the primaries, and probably a comparable amount during the general-election campaign.”

Trump’s immense talent for grabbing attention and turning it into material wealth and power, makes him, first and foremost, a master of marketing. What Chun and Persily point out is that in the Internet era, the filterless, open, and interactive nature of online media channels promotes the spread of rumors and spectacle because information traffics too quickly to favor the nuances and subtleties of truth. In a climate where the “new” becomes “old” (Chun 2016) in a matter of moments, where the mobile devices of dissemination are literally in our hands at all times, it is too easy and compelling to immediately spread what feels alarming or outrageous to our

audiences of social media “friends,” who are just a click away.

Trauma and Truth

Looking through the lens of trauma treatment, it is of particular concern that we find ourselves in a perfect storm where we have, as our U.S. president, a narcissist fixed on broadcasting his own unilateral and inconsistent versions of reality in a climate driven by Internet media channels that produce information so quickly that they privilege falsehoods over truth. It is a tenet of trauma therapy to validate our patients’ truths— that is, their experiences of their subjugation. Without it, the work of healing cannot progress. Being believed and not having one’s experience denied are crucial to anyone who has seen unspeakable horrors or who has been subjugated by another through torture, rape, or physical or sexual abuse. Such events turn one’s world upside down, and a cornerstone of our work is to help a patient stabilize herself by affirming the truth of what her experience was.

Only then can we build, with words, a narrative of the event so that the patient can make sense of and communicate to herself and others what happened. She is thus able to move out of her isolation and shame to recruit witnesses to help her bear such a painful burden. This allows the patient to move her experience from crisis, or wordless reactivity; to trauma, a narrative of pain; to history, a story about the past. With time to validate truths and make meaning out of chaos, a patient can reduce her panic attacks, flashbacks, and dissociation. Rather than being caught in a cycle of meaningless crisis, she can regain stability, increase her sense of calm, and move on with her life. Again, as trauma expert van der Kolk (2014) put it, “Communicating fully is the opposite of being traumatized.”

Thus, it is traumatizing to have, in the White House, a president and an administration intent on confounding “full communication” by manipulating the truth to serve their own ends. As Columbia University psychoanalyst Joel Whitebook points out (2017), according to Trump and his team, there is only one reality— Donald Trump’s:

Armed with the weaponized resources of social media, Trump has radicalized this strategy in a way that aims to subvert our relation to reality in general. To assert that there are “alternative facts,” as his adviser Kellyanne Conway did, is to assert that there is an alternative, delusional, reality in which those “facts” and opinions most convenient in supporting Trump’s policies and worldview hold sway. Whether we accept the reality that Trump and his supporters seek to impose on us, or reject it, it is an important and ever-present source of the specific confusion and anxiety that Trumpism evokes.

When a world leader as powerful as the president of the United States insists on there being “alternative facts” derived from a reality only he knows, this is alarming and destabilizing for us all. Democracy and the rule of law are threatened without an agreement between government and its citizens on the objectivity of truth and reality. A breakdown in this agreement puts the definition of truth and reality into the hands of those with the most social, political, and/or economic power. In history, this has supported the severe wrongdoings of institutions intent more on preserving their power than on protecting individual rights. The sexual molestation of children by priests in the Catholic Church represents a stark and long-standing example of an institution that insisted on its own truth and reality rather than those of abused innocents. To hold on to power, Catholic Church leaders permitted the ongoing sexual abuse of society’s most

vulnerable, the very individuals they had a holy mandate to protect. In trauma therapy, we see the corrosive long-term effects upon the human spirit when an individual's truth and reality are denied, particularly when those individuals grapple with traumas that take away their sense of subjectivity and self-efficacy. In his constant attempts to redefine the truth against the wrongdoings he has enacted, Donald Trump behaves like an aggressive perpetrator who fundamentally has no respect for the rights and subjectivities of those in American society who disagree with him. He shows this through his insistence on overpowering and shaming individuals who will not bend to his opinion or his will. From my stance as a trauma therapist, it is heartbreaking to see the damage Donald Trump is wreaking upon American society. It is a perpetration, creating deep wounds from which, I fear, it will already take us years to heal.

Conclusion

When the U.S. presidency, a position that already occupies the focus of global attention, is held by an extreme individual such as Donald Trump, his dramatic and inconsistent behavior captures all media attention. This constant coverage becomes a compulsive fixation for us all. For those of us who have been previously subjugated, this kind of exposure is particularly overstimulating and blocks us from recruiting the tools so necessary for healing from trauma. We are prevented from taking time to use language to validate truths and create meaning through narratives of those experiences. Without adequate time to process what shocks or destabilizes us, we cannot make sense of what happened; nor can we communicate our horrors to others. This robs all of the opportunity to humanize the subjugating effects of terror, abuse, and attack or to lift the isolation and shame that accompany them.

Moreover, the unfortunate symbiosis of our president's narcissistic, attention-hungry outrageousness with our Internet era's insatiable appetite for spectacle has resulted in a flood of incendiary news and information that none of us, whether previously traumatized or not, has the time or mental space to process. Yet, we gorge ourselves on such toxic infotainment with a niggling sense of impending doom. As New Yorker editor in chief David Remnick said of White House press secretary Sean Spicer's unusually high ratings for press briefings: "Undoubtedly, some people watch Spicer to be entertained. But there's another reason his ratings are high: we watch because we're worried" (Remnick 2017). Indeed, we are worried. Due to Trump and his administration's constant and volatile shifts in mood, communication, and representations of basic truths, far more Americans now possess narrower "windows of tolerance" in managing stress. As president, Trump has created an epidemic of heightened anxiety. By denying us access to time and calling our perceptions of truth into question, he shuts down our ability to reflect, causes us to doubt reality, and thus encourages reactivity and stress, keeping us in a difficult-to-sustain state of crisis. It is hard to predict how tenable this is for us, as individuals or as a society.

Uncertain times call for collective strength and stability, and such disempowerment is detrimental to our individual and national mental health. We can, however, use this deeper understanding of trauma, and of its elements of time and truth, to promote measured thought instead of reactive freezing, panic, or avoidance. We can be aware of the propensity for new media outlets to privilege emotionally stimulating falsehoods over measured and nuanced facts. **We can unplug ourselves and take time simply to enjoy the act of thinking freely.** It is a privilege we still enjoy in the United States, and it will be the skill we need to prevent us from careening toward crisis, as it seems Donald Trump would have us do.

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