

Understanding our evolutionary past can help those struggling with childhood emotional trauma - Daniela F. Sieff (2009)

Invited response to: *How Humans Became Such Other-Regarding Apes* by Sarah Blaffer Hrdy

Published online: *On the human: a project of the national humanities center*
<http://onthehuman.org/2009/08/how-humans-became-such-other-regarding-apes>

Hrdy's ideas contribute not only to our understanding of the evolution of human hyper-sociality and intersubjectivity, but they are also extremely relevant to psychotherapy. This is especially so for those who are struggling with the consequences of childhood emotional trauma. When abuse is of a physical or sexual nature, the damage is explicit and thus the cause of the child's psychological wounding is clear. Hrdy's work explains why equally profound psychological damage can result from subtle neglect and implicit emotional abuse. In our evolutionary past, in order to raise a human child, a woman needed support from allomothers. If such support was not available, maternal commitment would have been ambivalent — there was little point putting energy into a child who had a poor chance of survival (Hrdy 1999, Hrdy 2009). Thus, for much of our evolutionary history, maternal ambivalence — as expressed though a lack of emotional commitment — would have been literally life-threatening. For our ancestors, an emotionally ambivalent mother would have constituted a danger that was as profound as physical or sexual abuse.

This understanding has the potential to open the door to healing for many who are suffering from early emotional trauma. In order to heal the psychological damage caused by childhood trauma, the pain has to be validated, but when the trauma has been of an emotional and implicit nature that is hard to do. Worse, carrying pain that we can't validate leaves us no choice but to act it out through destructive and self-destructive behavior, and to try to blot it out through addictions of various kinds. We become stuck — unable to move beyond the psychological damage.

Additionally, because there was no apparent abuse, we interpret our anxiety, depression, insecurity, destructive behaviour and self-destructive compulsions to mean that there is something profoundly wrong with us. We cannot understand why we are feeling and behaving as we are, so we conclude that we must be defective as human beings. Such thinking lies at the heart of toxic shame (Kaufman 1980, Bradshaw 1988) — a deep, insidious, non-verbal sense that there is something fundamentally inadequate about who we are, as opposed to guilt which comes from feeling inadequate about what we have done. Toxic shame is psychologically poisonous — we become infected with self-hatred.

Hrdy's work helps us to find an antidote to the poison. It enables us to understand that even if we grew up in a materially comfortable home, and were not abused in an explicit way, the emotional ambivalence of our caregivers will have scarred our developing mind (Bowlby 1969, Schore 2003a, 2003b, Siegel 1999, Sieff, 2008, Sieff ms). Hrdy's thesis helps us to realize that our feelings, moods and behaviors are not proof of our fundamental inadequacy, rather they result from the beliefs and strategies that we developed in order to survive our caregiver's ambivalence (Sieff 2008). Instead of self-hatred we can begin to develop self-compassion.

However, if we simply swap the belief that we are victim to our own fundamental inadequacy for the belief that we are victim to our mother's ambivalence, there can be no healing. So long as we think of ourselves as a victim of any kind we are stuck in a dead-end. Again Hrdy's work helps — it enables us to move beyond seeing ourselves as victims to our mothers' ambivalence by encouraging us to develop compassion for our mothers. In the modern world, women rarely have a network of family and community members who can act as allomothers to their children. Although their children survive, they would not have done throughout most of our evolutionary history. Thus mothers without a supportive network are at risk of being ambivalent in their commitment to their children (Hrdy 1999, 2009). When we start to understand these dynamics, we begin to develop compassion for what our mothers (and we) were struggling with.

In short, compassion for ourselves is necessary if we are to validate our own pain, move beyond toxic shame, and stop seeing ourselves as a victim to our own supposed inadequacy. Similarly, compassion for our caregivers is necessary if we are to move beyond blaming them, and stop seeing ourselves as a victim to them. Both shifts in perspective are needed to bring about the lasting changes in deeply held attitudes and (self) destructive behaviours that constitute psychological healing. When there has been childhood abuse — explicit and/or implicit — achieving these shifts can take many years of painstaking work by both therapist and client. Although a cognitive understanding of the evolutionary underpinnings is not enough in and of itself to instigate these shifts in perspective (Schoore 2003a, 2003b, Sieff ms), it does have the potential to make a significant contribution to this process. To this end, Hrdy's work is profoundly important.

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