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Interview

Trauma, trust and triumph: psychiatrist Bessel van der Kolk on how to recover from our deepest pain

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When Dr Bessel van der Kolk published [The Body Keeps the Score](#) in 2014, it was a huge hit with yoga people. That is not a euphemism for “rich, underoccupied people”, it is

W just people who do yoga. Certain physical activities do something weird to your brain: ancient memories resurface, often with new feelings or perspectives attached; you start treating yourself with more compassion. It doesn't make sense until you read [Van der Kolk](#). After that, nothing has ever made more sense.

His thesis centres on trauma: the urgent work of the brain after a traumatic event is to suppress it, through forgetting or self-blame, to avoid being ostracised. But the body does not forget; physiological changes result, a "recalibration of the brain's alarm system, an increase in stress hormones, an alteration in the system that filters relevant information from irrelevant", as he says in his book. The stress is stored in the muscles and does not dissipate. This has profound ramifications for talking therapies and their limits: the rational mind cannot do the repair work on its own, since that part of you is pretending it has already been repaired.

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The Body Keeps the Score is engagingly written and plainly not a textbook. Nevertheless, it is a searching, complex account of trauma and post-traumatic stress disorder (PTSD), not pop-psychology for the general reader seeking to live their best life through Bikram. So, how do you account for **its incredible popularity**? In the seven years since its publication, it has spent 147 weeks on the New York Times bestseller list and sold more than half a million

copies in the UK alone, and nearly 2m worldwide; amid the shared trauma of the pandemic, it has become more popular than ever, spending the whole of July this year at No 1 on the nonfiction bestseller list in the US. On social media, it is ubiquitous, a psychiatric meme, the source of inspirational get-you-out-of-bed quotes and self-deprecating jokes. (If your body does keep the score, is that why you look so rough?) Is trauma really so widespread? And are people feeling particularly traumatised now?

Van der Kolk speaks to me on a video call from Boston, Massachusetts, where he has lived for the past 50 years. He still has the pronounced, reassuringly psychoanalytical western European accent of his birthplace - the Netherlands - even though he took his first degree in the 60s at the University of Hawaii and has practised in the US since. "We define 'trauma' as an event outside the normal human veins of experience," he says. "At least one-third of couples, globally, engage in physical violence. The number of kids who get abused and abandoned is just staggering. Domestic violence, staggering. Rapes, staggering. [Psychiatry](#) is completely out to lunch and just doesn't see this."

His work with people who had PTSD began at around the time the term was defined, in 1978, at a veterans' clinic in Boston, working with men who had fought in Vietnam. He picked up patterns in their symptoms and presentation: either a tendency to superimpose their traumatic experience on to everything around them or an inability to decipher what was going on around them and "very little in between". Another pattern he picked up was in his own profession. Psychiatrists would diagnose these patients with everything from alcoholism to schizophrenia and miss - almost resist noticing - the trauma.



▲ A US soldier in Vietnam ... Van der Kolk began his professional career working with men who had fought there. Photograph: Bettmann/Bettmann Archive

This became his life's work, learning in the first instance from his own patients. "I have had regular experiences, to this day, when a patient makes me realise something. I think: 'I'll pay *you* for this session, because that's an important lesson. You shouldn't be paying me.'" He explored, too, the lost or discredited work on trauma from the earliest days of psychoanalysis: Pierre Janet, writing insightfully in the 1880s, and the British psychiatric reactions to the first world war. "There's very good literature [on shellshock] from 1919 and 1920. But then there was pushback, people saying: 'You're just a bunch of cowards.' The assault on people who had been traumatised has been relentless - to this day, almost. You're not allowed to tell the truth about the horrible things that people do to each other."

He is a huge fan of John Bowlby, the inventor of [attachment theory](#). “I knew him slightly, actually. He didn’t love me - he thought I was too impulsive. But I thought he was fantastic. Most of my colleagues haven’t read Bowlby. In psychiatry, people don’t talk a lot about attachment.” In Van der Kolk’s account, he has always been an outsider in his profession, which masks the pedigree of his credentials. He was a research assistant on the 1980 edition of the prestigious Diagnostic and Statistical Manual of Mental Disorders.

At the start of his career, he was driven by curiosity and a practical urge to find out what worked. The further he delved, the more important he realised the work was, in terms of the incidence and impact of trauma, on society and the self. “The reality, of course, is that being traumatised does make you a difficult person to get along with. Because you suddenly get angry, you suddenly shut down or you space out. But more difficult is to live that life: not being able to trust yourself. And there’s always this internal pressure to step up to the plate and keep functioning. So the next piece is a profound feeling of shame about yourself and your reactions.”

It would be much too simple to say that PTSD quashes any potential for creativity or success. “It is striking how many times people carve out a piece of exceptional intelligence - exceptional creativity - that allows them to go on. Isaac Newton was one of the most abused, abandoned children ever ... And then he invented mathematics.” The question, I suppose, is what else he might have invented, had his trauma been addressed. Van der Kolk is adamant; people shouldn’t be left as walking wounded. No one should have to keep hurling themselves at the same brick wall of therapy and antidepressants if they are not working.

European and American psychiatry have an obsession with analysis and pharmaceuticals, which is partly - especially in the US - about monetisation, with research grants flowing to the most profitable and established fields. Van der Kolk is keenly aware of inequality as a factor in untreated PTSD, and no great fan of capitalism generally. “I’m not sure that the fall of the Berlin Wall was the best thing that ever happened to us,” he says, gnomically, but I get the drift. Part of the commercial imperative in psychiatry has been the drive to find one thing that works for everyone: a Fordist factory-line approach to the brain that has seen millions spent on figuring out, for instance, what works best between pharmaceuticals and talking therapies, or between one therapy and another.

Van der Kolk’s insistence that no single treatment is likely to work alone, and no combination will be exactly the same for every patient, is iconoclastic enough on its own. Yet it is his engagement with what you could loosely classify as “hippy stuff” -

eye-movement desensitisation and reprocessing, yoga, bodywork (Feldenkrais, craniosacral therapy) and touch - that shows how unperturbed he is in going beyond the realm of classic psychiatry. His thinking on the body is so succinct and simple: if the body is storing trauma in its musculature, in its hormonal pathways, then it is the body that needs “experiences that deeply and viscerally contradict the helplessness, rage or collapse that result from trauma”, as he writes in his book.

This is not to say he is totally against pharmaceuticals, which can play a useful role in shutting down inappropriate alarm reactions. But he is much more interested in psychedelics, which are gaining widespread interest in the treatment of PTSD and depression, as well as [the fear of death](#). Van der Kolk has yet to nail down how MDMA differs from ketamine, psychiatrically speaking, but he has tried both a number of times.



▲ 'You're not allowed to tell the truth about the horrible things that people do to each other.' Photograph: M. Scott Brauer/The Guardian

“Something has always really puzzled me. I was born in 1943 in the Netherlands. A very large number of kids of my generation died of starvation, and I was a very sickly child, but I’ve felt no trace of that sickly child,” he says. “The last time I took MDMA, I experienced what that child went through back then. It was very painful, actually. But the main effect was a very deep sense of self-compassion. I felt so much love for that child who I once was, who had to go through all that sickness, who had a hard time breathing, who was hungry.”

The next day, in 2017, he had a calamity in his professional life. He had set up the Trauma Center, in Brookline, Massachusetts, in 1982, while he was still a junior faculty member at Harvard medical school, and had built it into a leading research, training and clinical institution for PTSD. In the mid-2010s, while he was writing *The Body Keeps the Score*, he took a step back - during which time, the executive director, Joseph Spinazzola, was accused of mistreating female employees and was removed from his post. The head of the Justice Resource Institute, its parent organisation, [fired Van der Kolk](#). “It was a purely cynical move,” he says; one designed to shift blame. “He was trying to pin the tail of that donkey on me.”

It was resolved to Van der Kolk’s satisfaction: his key staff left with him, in protest, and they have set up a new foundation. Because it happened in the middle of his MDMA study, though, he was “in this very open, compassionate mode. So the guy said: ‘You’ve created a toxic environment and you’re fired.’ And I said: ‘You know, that’s really not a good idea. It’s going to hurt you too much if you do this, and in the end it may hurt you more than it’ll hurt me.’” Separately, he mentions in passing that it is much easier to have compassion for your spouse if you have compassion for yourself. In Van der Kolk’s telling, the idea that self-love is a precondition for loving others - so popular in motivational statements on Instagram - has very credible and practical examples. That said, he did sue the guy from the Justice Resource Institute.

Collective trauma is complicated. Taboo is a core component of PTSD. The brain buries feelings only if they can’t be spoken about, because of the risk of alienation, from a family (this is particularly relevant to abused children) or from society (this is what silences veterans). Large, shared events - 9/11, for instance - which are not suppressed, which in fact bring those affected together, do not leave the same scars.

What about the pandemic? He shrugs: “I get a lot of questions about this, people talking about our collective trauma, and my answer is: for me and most of my colleagues, the pandemic has not been traumatic. Our friendships, our careers; they’re all fine. If you’re a single mother who’s 18 years old with no income, oh God. If you’re a

nurse who has dealt with people for a year, who are choking to death, then you're traumatised." Part of taking trauma seriously is not seeing it where it is not present.

“ In every academic institution I've been involved in, my approach has been pooh-poohed by my colleagues

When *The Body Keeps the Score* was published, his editor said, perhaps because of the yoga, the drugs or the very trenchant way in which he describes trauma's primacy and psychiatry's myopia around it: "Wait until the blowback hits." He is still waiting. "I've had very little blowback. I find it strange. Because I know how the academic world functions and, in every academic institution I've been involved in, my approach has been pooh-poohed by my

colleagues.”

Maybe it is not so strange. In the end, psychiatry is simply society in a white coat, the medical end of the norm-enforcement and denial of reality that drives individuals to suppress their trauma in the first place. Van der Kolk's life in practice has been to treat traumatised patients, but his life as an author is as an emissary from the world of PTSD, confronting his profession - and the world that created it - with what is actually happening. Ultimately, psychiatry and the world that created it can cope.

The Body Keeps the Score: Mind, Brain and Body in the Transformation of Trauma by Bessel van der Kolk (Penguin, £10.99) is out now. To support the Guardian and the Observer, order your copy at guardianbookshop.com. Delivery charges may apply.