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Opinions

President Trump actually is making us crazy



President Trump listens during a meeting with Japanese Prime Minister Shinzo Abe during the United Nations General Assembly. (Evan Vucci/AP)



By [Dana Milbank](#) Opinion writer September 22

President Trump is making us ill. He's also driving us crazy.

Since I wrote [last week](#) about the possibility that Trump is literally killing me (in the form of high blood pressure), the reaction has been, as the kids say, sick.

From the left came a flood of responses from people experiencing all manner of symptoms, real or imagined, of what I called Trump Hypertensive Unexplained Disorder: Disturbed sleep. Anger. Dread. Weight loss. Overeating. Headaches. Fainting. Irregular heartbeat. Chronic neck pain. Depression. Irritable bowel syndrome. Tightness in the chest. Shortness of breath. Teeth grinding. Stomach ulcer. Indigestion. Shingles. Eye twitching. Nausea. Irritability. High blood sugar. Tinnitus. Reduced immunity. Racing pulse. Shaking limbs. Hair loss. Acid reflux. Deteriorating vision. Stroke. Heart attack.

It was a veritable organ recital.

From the other side came a similar profusion of responses, in email, on Facebook and from the cesspool known as Twitter, of people wishing me dead. “Hurry up and die already! . . . DO US ALL A FAVOR AND JUST CURL UP AND DIE !!!!!!!!!!! . . . With any luck at all Milback [sic] will succumb. . . . just see a dr. You know, Dr Kevorkian.” Dozens of Trump supporters delighted in responding by making vulgar references to vaginas, and one wrote to my wife to say it gave him “endless satisfaction” to report that my death is likely.

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3 ways Trump has promoted his ‘America first’ doctrine

President Trump ran his campaign on the message of economic nationalism. What does "America first" mean? (Victoria Walker/The Washington Post)

Then there was somebody under the Twitter handle @deacongfrost: “I HAPPILY KILL YOU.”

I wrote the original piece half in jest, but the response showed something deeper: A large number of people reporting stress-induced illnesses in the Trump era, and another large number of people so consumed by political disagreement that they desire the death of someone who has different views. Clearly, Trump is causing, or at least aggravating, mental-health problems on both sides.

A timely new paper discusses this phenomenon in the Trump era and the challenge it has caused to the mental-health profession, which is moving toward giving political views a more prominent place in psychotherapy. The paper, by New York analyst Matt Aibel, will be published in January in the journal “Psychoanalytic Perspectives.” Aibel, a college friend of mine, gave me an advance copy.

“Since the start of Trump’s rise to power,” Aibel writes, analysts “have become acutely attuned to traumatic arousals” in patients from the political environment. “Several colleagues have shared that many formerly eating disordered patients were retriggered to bulimic episodes that hadn’t occurred in many years until Trump’s candidacy. . . . In the run-up to the election, mental health providers of all stripes were reporting ‘a striking number of anxious and depressed clients who are fixated on the election, primarily fearful of Trump.’ Since Election Day, such colloquialisms as Trump Slump, Trump Anxiety and Trump Affective Disorder achieved cultural and perhaps even clinical currency (in an informally diagnostic sense, of course) along with increases in reported incidents of bullying” and the like.

Those on the right might label this “Trump Derangement Syndrome,” much as I and others detected an “Obama Derangement Syndrome” previously. But the mental trauma caused by politics has reached a point, Aibel argues, where psychoanalysts must rethink how they do things.

“Freudian psychologists had little interest in the political. But the profession is coming to realize that ‘the personal’ and ‘the political’ are in reality not distinct,” as Aibel puts it. In our current us-vs.-them, zero-sum politics, “dearly held self-representations distort perceptions, alter judgment, resist disconfirming factual evidence and remain impervious to rational argument, a phenomenon well-documented in the political and social science literatures . . . and disconcertingly demonstrated by the Trump faithful’s clinging to their ‘alternative facts.’” Aibel acknowledges the unique difficulty in getting people to examine the unconscious parts of political perceptions, because of the “strong pulls of tribalism and moral certitude,” but it must be attempted.

Partisanship drives so much of our lives: where we live, who our friends and spouses are, where we worship and go to school. Mental-health professionals can’t expect to understand or help their patients if they don’t take into account the socio-political beliefs that determine so much about who we are and how we think. “The political, as unusually challenging as it may be to work with, is understood as an essential, irreducible aspect of our self-representations and an undeniably consequential factor in our difficulties in living,” Aibel writes.

I hope the new approach works, though I fear that those most likely to subject themselves to psychotherapy are not the ones who send social-media messages wishing for my death.

As the mental-health professionals sort this out, I’ll be contemplating the many suggestions helpful readers sent in for treating my own Trump-induced illness: acupuncture, Himalayan herbs, vitamin supplements, yoga, flossing, playing with puppies — and the most common suggestion, unplugging from the news. If only I could.

Twitter: @Milbank

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