

TREATING INTERNALIZED SELF-ABUSE & SELF-NEGLECT

This paper describes the role of relational psychotherapy in remediating key developmental traumas and arrests in DTD [Developmental Trauma Disorder] and CPTSD [Complex Post Traumatic Stress Disorder]. My long experience as a trauma therapist convinces me that the most destructive childhood traumas are relational.

Here are two of the most damaging. Firstly, children of traumatizing caretakers are raised with overwhelming amounts of contempt and neglect which robs them of their birthright to be copiously loved and supported, and suffocates them in an abandonment depression of shame, fear and hopelessness.

Secondly, such children respond to being continuously traumatized by learning to relate to themselves with the same constant abuse and neglect as their parents. They develop a self-traumatizing relationship with themselves.

The way out is to be therapeutically guided into reawakening and restoring their developmentally arrested instincts of self-compassion and self-protection in a safe relationship that models caring and support.

DTD [Developmental Trauma Disorder] is another name for *CPTSD [Complex PTSD]* with an emphasis on childhood traumatization. It was coined by Bessel van der Kolk to get CPTSD reconsidered for acceptance in the DSM via a new name. Although it was rejected, CPTSD is now listed in the ICD-11, the Global standard for diagnostic health information.]

DTD highlights the severe developmental trauma that results when a child's caregiving system is rife with physical, emotional, and educational maltreatment and neglect. Herein, these two labels will be used together interchangeably, because in my experience, CPTSD is basically what DTD invariably morphs into after childhood.

TRAUMA BLOCKED SELF-COMPASSION AND SELF-PROTECTION

Dysfunctional parents traumatize children with their ongoing abusive and neglectful parenting practices. Such treatment induces DTD/CPTSD, as traumatizing parents so thoroughly decimate the instincts of self-compassion and self-protection in their children, that adult survivors of it remain hamstrung by anxiety, excruciating shame, debilitating depression and troublesome relationships with themselves and others. These developmental aberrations can endure until their dying days if they are not helped to recover from these effects.

The fundamental cause of DTD/CPTSD is the lack of a supportive and loving relationship with any caretaker. When this occurs, continuously abused/neglected children fail to develop a caring and supportive relationship with themselves. This in turn robs them of their ability to access and develop the innate self-esteem that they possess at birth.

Moreover, their *self-compassion*, their innate capacity to feel empathy for themselves during difficult times, quickly dwindles and disappears when they never receive sympathy from their caretakers. This is especially so when they are also punished and shamed for crying and feeling sorry [sorrow] for themselves.

The same is true for *self-protection*, the healthy instinct innate in every child to angrily say “no” to abuse and neglect. Dysfunctional parents typically punish children harshly for angrily crying or complaining about unfairness. Over time, children’s self-protective reflexes are traumatically repressed and lost to the unconscious.

Even worse, when such children are not allowed to protect themselves against injustice, they soon lose their ability to defend themselves in all their relationships. They unprotestingly allow others to treat them as poorly as their original caretakers. They come to implicitly believe that abuse and/or neglect are part of the price tag of belonging.

To the degree that their instincts of self-compassion and self-protection become inoperable, DTD/CPTSD survivors unconsciously forfeit their rights

and needs to be treated fairly in current and future relationships. They never learn to form boundaries or set limits with antagonistic others, and become ripe targets for relational exploitation.

THE INSTALLMENT OF THE TOXIC INNER CRITIC

Children instinctively mimic their parents. They learn to stymie and punish themselves just as their parents do. They become excessively judgmental of themselves because in their families there is no such thing as a harmless mistake, a faux pas or “small potatoes” miscue. A mispronounced word, a fleeting facial expression or a less than happy mood can regularly trigger verbal, emotional or physical punishment and rejection.

In copying their parents, traumatized children become preoccupied with their shortcomings. They strive to become absolutely mistake-free, eventually only able to see what is imperfect or lacking in themselves. Before long, they can only *negatively-notice* themselves.

Over time, negative self-noticing grows into a toxic inner critic ... a perversion of the superego ... which goes viral in their psyches and leaves little or no room for the development of a healthy, user-friendly self-supportive ego...a self-compassionate and self-protective ego.

Even worse, their toxic inner critic finally coopts their creativity, and invents erroneous, and often paradoxical self-criticisms that can last a lifetime. I have too often witnessed workaholic clients trashing themselves as lazy, prodigies branding themselves as stupid, beauties declaring themselves ugly, codependents judging themselves selfish, and empaths bemoaning their cold-heartedness.

Perpetual parental negative-noticing causes them to constantly attack, shame and scare themselves, which in turn, as teens and adults, often makes them brand themselves as “crazy”, and plagues them with suicidal ideation.

The toxic inner critic typically becomes an inner bully. It relentlessly uses a multimodal attack of extreme perfectionism to blame the child for not being perfect. It also enforces this perfectionism with frightening endangerment visualizations of an overwhelmingly hostile and rejecting future. [In Chapter 9 of my book: *Complex PTSD: From Surviving to Thriving*, I describe the inner critic's 14 most common habitual, life-narrowing processes of perfectionism and

endangerment. I also include thought- and perspective-changing responses to combat these attacks.]

Children eventually grow up and leave home, but the inner bully goes with them. It systematically punishes any behavior, thought, body-flaw, feeling, healthy aspiration, etc., that is less than perfect, and like the parents that created it routinely scorns any kind of approval that comes their way. Whenever they are not at 100%, they frequently spiral down, deeper and deeper into excruciating fear and self-disgust.

Compounding this, adult survivors are also often unconsciously attracted to other bullies in the wider society who further traumatize them via what Freud called *repetition compulsion*. Survivors automatically accept their bad behavior because their childhoods taught them that it is too dangerous to protest unfairness.

In the worst cases, some untreated survivors can end up being captured by narcissistic bullies who psychologically enslave them. Others amass a history of failed persecutory relations that morph their inner critics into a posse of invisible bully-ghosts led by their internalized scornful parental sheriffs. Still others retreat into self-isolation to avoid the frightening threat of relationships altogether. And most tragically, some model on their narcissistic caretakers and become bullies themselves, making DTD and CPTSD self-generating legacies.

In almost all cases, survivors of DTD are afflicted with huge amount of social anxiety. Such survivors can spend their whole lives without the ability to let in any kind of interpersonal comfort. They suffer intense alienation, tortured by self-hate and self-disgust for failing at the impossible goal of becoming perfect. This is the tragic meaning of Alice Miller's book title: *Prisoners of Childhood*, [aka, *The Drama of the Gifted Child*].

Such is the fate that ensues from a developmental lack of parental kindness, and from parental taboos against normal, healthy complaining [aka, self-protection]. Thus, psychotherapy for CPTSD requires an approach that teaches and models self-compassionate and self-protective relating to oneself.

{It is important to note here that this work does not aim to eliminate *healthy* self-criticism, which is a positive function of a superego that

develops healthily. To the degree that toxic self-criticism is diminished, then to that same degree does healthy self-criticism become a kind and gentle voice of self-questioning and self-improvement.

REVIVING SELF-COMPASSION AND SELF-PROTECTION

Reawakening and nurturing the human instinct to care for and protect oneself through thick and thin is therefore a crucial goal in treatment. Life is incredibly difficult when someone cannot access their instincts of self-compassion and self-protection. Moreover, these instincts rarely become reactivated without the aid of a therapeutic relationship. This is perhaps the most tragic developmental trauma in DTD

Therapists can help survivors to reawaken their instincts to kind and, when necessary, fierce allies for themselves.

Reviving these key elements of self-support usually begins with psychoeducation about their destruction in childhood. A relational and reparenting perspective is most effective in this, and helps to gradually abate the terribly fearful, loveless and shame-saturated state of the survivor's psyche.

I use my enhancements of the reparenting perspectives and techniques of John Bradshaw to address these issues. My aim is to generously and appropriately meet crucial unmet parenting needs. These include positively noticing clients, treating them kindly, emphasizing that they are essentially worthy, and helping them to learn how to recognize and defend themselves from toxic relationships...including the punishing relationship with themselves that was enculturated by their traumatizing parents.

REAWAKENING DEVELOPMENTALLY ARRESTED SELF-COMPASSION

Every human being is born with an instinct for self-compassion. Thriving depends on having empathy for oneself during life's inevitable difficult times, and on treating oneself graciously during life's unavoidable emotional ups and downs.

The Therapeutic Power of Grieving

At its most powerful, self-compassion is a “good cry”. An egosyntonic cry is the ultimate anxiety-releaser. Tears can release body tension and fear, and shift a person into a relaxed parasympathetic state. Metabolizing physical or emotional pain through crying comes naturally to us all, unless or until it is interfered with.

Crying should be at the top of every list of stress-releasing techniques for working through any type of past or present suffering; and crying is especially effective when it is interspersed with angering about current or past unfairness. Angry crying is our earliest language. Picture and hear the signals coming from a distressed infant calling out for help.

On innumerable occasions, I have witnessed clients verbally agonizing about endless recirculating worries until my empathic interjections elicited them into having a good cry; so often, their obsessive catastrophizing then evaporated with their tears.

On one occasion, a client told me as her tears subsided: “I can’t believe I was just so suicidal; and now I’m looking at that gorgeous painting on your wall, feeling dazzled by its beauty! Where did all that pain go?”

I say: “It seems to me that crying released your painful feelings of fear. Without the *emotional* release of tears, your fear wafts up into your left brain and becomes cognitive, creating fearful processes like drasticizing and hypochondriasizing. I think tears release fear -- the emotional fuel of fearful thinking, and allows us to reconnect with our abilities to cope with our problems.”

I have had a number of stints as a suicide hotline counselor and trainer, and invariably, when I empathized enough with a caller’s pain, the caller cried deeply and their suicidality resolved along with the release of their tears; so too with innumerable clients in session voiding their abject hopelessness along with their tears.

While self-compassion is innate, children need to experience consistent parental compassion when they cry to ensure that their self-empathy matures and remains automatic. A caretaker’s compassion also helps children to internalize a kind way of treating themselves.

Children born in CPTSD-inducing families never or rarely receive empathy. Consistently critical and/or unresponsive parenting replaces fledgling self-compassion with toxic shame. Traumatologist John Bradshaw coined the term *toxic shame* to describe the soul- and spirit-deadening processes that traumatizing parents use to obliterate their children's self-supportive reflexes, typically to make them easier to control. Toxic shame is the excruciating emotional byproduct of the pathologizing inner critic.

Inner Critic, Perfectionism and Toxic Shame

Neglect alone can install toxic shame as deeply as abuse. Neglect [verbal, spiritual and emotional] occurs when parents fail to interact positively in any way with their children, when they never notice anything good about them, when they turn a blind eye toward their accomplishments, when they never show delight in the daily miracles of their developing self-expression and intelligence, and when they don't regularly interact with them in a loving and light-hearted way.

Extended neglect, like abuse, drives most children to automatically embrace perfectionism. Over time, they consciously or unconsciously adopt such tenets as: "If only I don't mess up, need anything, complain, interrupt them...then, maybe they'll pay attention to me...maybe they'll like me...maybe they'll stop wishing they didn't have me!"

Consequently, such children only attend to themselves negatively. They increasingly obsess about lacking any value, about not being good enough, about being fatally flawed. They soon learn that showing disappointment, sadness, and normal mood-shifts invites parental attack or shunning; and showing anger about being hurt or treated unfairly is especially dangerous and typically greeted with the most intense punishment or abandonment.

This forces children to embrace emotional perfectionism. When they cannot pump up any happiness, they flounder for long periods in the alienated agony of toxic shame and self-hate. They come to believe that emotional pain is their fatal flaw. Over time, they often become compulsive in their attempts to do anything they can to suppress, numb or distract themselves from their less-than-happy feelings.

It is important to note here that addressing a client's self-pathologizing view of their dysphoric emotions is often long-term work. This is because

the most damaging emotional trauma for most survivors occurred in toddlerhood, and most people do not form memories that early in life. They typically have trouble believing that their childhood could have been traumatizing enough to cause chronic shame, fear and depression...or to give them a toxic inner critic.

Relationally Supporting Healthy Emotional Development

Effective therapy can reawaken self-compassion. To revive clients' dormant self-kindness, therapists must relate compassionately to them. They must invite and make it safe for survivors to verbally and emotionally ventilate about their pain, past and present.

Human beings instinctively feel sad and mad when they are hurt. They cannot fully metabolize their pain without crying and angering about it. Survivors need a compassionate, validating witness to release their ungrieved traumatic childhood pain. They typically need to cry and angrily protest the unfairness of it many, many times on many, many occasions to work through all the intricacies of their abuse and neglect.

A therapist can become the first person ever to help the survivor remedy these developmental arrests. The therapist can do this by allowing the survivor to discover the relief that comes from self-compassionate crying and self-protective angering.

Tragically, the therapist who does not validate and empathize with the survivor's pain may become the survivor's last unsuccessful attempt to establish trust and find reparative emotional acceptance from another human being; or they may add their name to a list of helping professionals who brought on further shame by failing to understand the client's plight of being helpless against the onslaughts of their toxic critic. For therapists who have not experienced ongoing childhood trauma, it may be very difficult to understand and sympathize with the deeply entrenched, merciless and relentless nature of the CPTSD-engendered critic.

Relationally addressing these arrests in clients helps them to discover the comfort that comes from being fully seen and accepted in all aspects of themselves. When they get enough experience of this, survivors can learn to metabolize their pain by verbally and emotionally ventilating it elsewhere

with safe enough others. They can then gradually discover that there is nothing inside them that needs to be hated, pathologized, or self-destructively avoided. Even better, they can experience the fact that intimacy can deepen to otherwise unavailable depths when two people *commiserate* about their pain.

Therapists can greatly enhance this process by modeling an acceptance of their own imperfections. They can use their own vulnerability to encourage clients to venture into the fear and shame that encrusts their less-than-perfect experiences. A common way that I do this is to normalize unhelpful therapeutic interventions on my part by compassionately apologizing for them without shame or self-contempt.

For over forty years, I have seen how a relational approach facilitates survivors to work toward becoming a loyal ally to themselves no matter what they are suffering. Over and over, I am told that my vulnerability is the thing that helped them the most to shrink their shame, to find comfort in crying, and to use anger in a way that makes them feel safer in the world and in their own skin.

“Using Vulnerable Self-Disclosure to Treat Arrested Relational Development” is my free, downloadable article on being judiciously vulnerable to therapeutically de-shame the client’s capacity to talk therapeutically about the painful aspects of their experience [www.pete-walker.com].

REVIVING DEVELOPMENTALLY ARRESTED SELF-PROTECTION

This is typically the most difficult development arrest to address, especially as so many psychological and spiritual perspectives villainize anger in an all-or-nothing way...in a way that conflates loving with never being angry. Ironically, when survivors learn how to love themselves sufficiently, the instinct to fight for themselves readily awakens.

Suppressing a child’s self-protective reflexes typically takes some doing as children instinctively complain about abuse and neglect. “No!” and “That’s not fair!” appear very early in most toddlers’ vocabularies. Most traumatizing parents, however, reserve especially intense punishment for their children’s attempts to protect themselves against their abuse. They quickly extinguish the child’s drive to stand up against injustice.

Contempt is the weapon of choice of many overcontrolling parents. Contempt is an emotional cocktail of intimidation and disgust that drowns children's self-expression in fear and shame, respectively. Such extreme rejection eventually causes children *to identify with their aggressors* [Freud] and beat their parents to the punch by automatically blaming [shaming] themselves for any parental upset, no matter how unjust and unfair.

What a huge endangering loss this is, as an angry "that's-not-fair" is an emotionally intelligent survival response to abuse or neglect at any time in life. How awful it is that this phrase is almost universally scorned by parents in our culture, even those who are not otherwise abusive!

As noted earlier, most ongoingly traumatized children adapt to toxic shaming by consciously or unconsciously embracing perfectionism as their *salvation fantasy*. Typically, this is not the clean-the-bathroom-floor-with-a-toothbrush kind of perfectionism, but rather a contentment-draining self-dissatisfaction that infects every level of their being.

Most survivors become contemptuous of their own looks, their speech, their moods, their energy levels, their actions and inactions. Everything they do or say must be absolutely beyond reproach or they spiral down into perseverating self-castigation. As the impossible goal of becoming mistake-free eludes them, they are prone to seeing themselves as nothing but one giant mistake.

Attaining Outer and Inner Safety

As Judith Herman wisely wrote, the therapist's first priority in treatment is to guide clients into breaking contact with abusers in the outer world. Once good enough safety in the outer world has been achieved, however, creating safety in the clients' own mind is essential to further CPTSD recovery.

At such a juncture, attaining *inner safety* must be prioritized because the critic, the 24/7 manager of an untreated survivor's psyche, typically becomes the foremost triggering mechanism of *emotional flashbacks*. Over and over, *emotional flashbacks are instigated by inner critic attacks* which demean and frighten survivors back into the childhood *abandonment depression*.

The critic can use any wrinkle to drive the survivor back into childhood's hellish toxic mood of fear, shame and hopelessness. Even worse, the uncontested critic, the unrelenting negative-noticer of the psyche, keeps on firing during a flashback driving survivors deeper and deeper into this abandonment mélange, often entrapping them there for the best part of days, months, years and even lifetimes if they remain untreated. [Chapter 8 of my CPTSD book expands on emotional flashbacks and contains 13 steps for managing and mitigating them.]

DTD/CPTSD survivors were inculcated with a self-sabotaging critic when they were too young and powerless to fight it. Until they learn to intensely rebuff it, most survivors rarely get much traction in rescuing themselves from its incessant belittling of them.

In this vein, the renowned developmental psychologist, Erik Erikson, offered us a powerful tool when he said: "... shame is healthy blame turned against the self." A savvy, patient therapist can turn this emotional math equation into an antidote for toxic shame, by repeatedly encouraging the survivor to blame the critic and the installers of the critic for inculcating them with a self-perpetuating mental program that constantly stokes up self-alienation and self-punishment.

When self-protective angering against the critic is practiced frequently enough over some months, it begins to morph toxic shame back into healthy and appropriate blaming of the abuse and neglect that forced the survivor as a child to become self-contemptuous.

This, however, is no fast fix; yet, when this practice is combined with the help of many self-compassionate tears, survivors gradually increase their ability to rescue themselves from getting stranded in emotional flashbacks.

For years, I got nowhere with simple cognitive thought-stopping. In fact, this failure moved me even deeper into toxic shame, as all the other therapists around me claimed that it helped them greatly. Eventually, this frustrated me so much that I started to *charge* my thought stopping with anger, and religiously fought my critic innumerable times a day for months and, lo and behold, I finally started to see that my critic was indeed gradually diminishing.

Therapists can accelerate survivors' recovery by persistently identifying inner critic attacks, and by encouraging clients to be angry about how childhood trauma turned them into persecutors of themselves. Therapists can then teach survivors how to angrily fight against inner critic messages that trigger and trap them into painful flashbacks. Clients can learn to do this in a private place, or quietly in the privacy of their own psyches, or actively out loud in sessions, or with a safe and supportive other in witnessed role plays.

Therapists can also enhance this process by sharing their own commiserative anger about all bullying, gaslighting and scapegoating, whether the target was/is the client, they themselves, or anyone being controlled by another's contempt. Ultimately, this anger can then be used to muffle and shrink the inner bully and its control over their psyches.

Shrinking the critic is most effective when survivors also anger, even rage, at the critic as the proxy of their early "care-givers". With a great deal of ongoing practice, angrily ordering the internalized parents and the toxic critic to: "Shut up", "Get out of my head", and even "F*** off", etc., progressively shrinks the critic and makes more room for the healthy self-protective ego to evolve out of its arrested development. [I give detailed practical instructions on how to safely express anger without hurting oneself or anyone else in Chapters 5 & 7 of my book: *The Tao of Fully Feeling*.]

Recovering the self-protective instinct can be increasingly accelerated by therapists sharing their own empathic anger about how clients were trained to become their own worst enemies. Therapists can do this authentically by remembering and invoking the healthy anger they feel/felt in similar situations, or on seeing someone being bullied in a movie, or on the street, or in untold videos of scapegoating politicians like Donald Trump *shame-blaming* someone else for their mistakes and deficiencies.

As someone who has had to work hard to recover a healthy sense of self-protection, I now instinctively feel angry at the abuser when I hear a client talk about being bullied. I believe it is instinctual to want to protect people we care about from cruel treatment. And, when a client tells me about their childhood abuse in a session, I often wish I could go back in time to help them by stopping the bullying.

With most clients, I work gradually towards sharing my feelings of being angry at their inner critic and at those who installed it. It may take many months...sometimes years... to help clients see how their parents' abuse/neglect turned their superegos into inner bullies, and to see that this was at the expense of the development of their healthy ego: the user-friendly manager and protector of their psyches.

Once they begin to reverberate with this, I gradually encourage them to identify and get angry about all the specific ways they were forced to only see themselves negatively. The more their natural anger about this surfaces, the more they grow in their ability to morph their shame into blame. [I have also been delighted to receive numerous emails from survivors stating that they are learning to do this for themselves via reading pages 178 to 183 of my book, *Complex PTSD: From Surviving to Thriving*]

It is important to note here that I model angering in a way that avoids self-hurt or hurting anyone else. This usually includes their parents, unless of course the parents are still being abusive, which may require them to use their anger to break contact or to protect themselves. I also generally recommend decreasing contact and/or *going no contact* with parents who are still abusive. Many survivors find encouragement for going no contact in the support group on this website: www.reddit.com/r/raisedbynarcissists

Over time, many of my clients learn to fight off their critics with as much inner heat and rage as needed. As this process gradually dethrones the critic's rulership of their psyche, clients recover an instinctual sense of self-protection and become increasingly wiser, kinder managers of their own psyches.

Combining Fighting The Inner Critic with Self-Compassion

With enough practice of feeling and emotionally expressing the instincts of self-protection and self-compassion, a powerful two-step process can be taught to the survivor...one that will then often evolve naturally in the client.

In step one, the intrusive critic is met with angry resistance until it is at least somewhat muffled, and then in step two, the survivor switches to positively-noticing and empathically expressing self-support to the traumatized self and to the inner child at various stages of development.

Here is an example of this: “I love you. I am so sorry that you have suffered so much from this toxic critic. I love you and I am on your side no matter what. I love you and I want the best for you. You are a good, worthy person, and I will always welcome your tears. They will help us to increasingly release our fear and shame...to feel safer and more supported in the world.””

With further practice, it is not uncommon for either step to spontaneously, elicit the other step. I am especially moved when the cathartic process of limit-setting with the critic leads clients quite naturally into self-compassionate crying and grieving for all the instances when they suffered helplessly from the attacks of their parents and, by extension, their critics.

Especially therapeutic sessions often involve vacillating back and forth between crying and angering. Once again, when we are hurt, it is normal and instinctive to feel both sad and mad, and we can learn to feel and express this sadness and anger in a way that is therapeutic and restorative of our ability to be unrelentingly self-supportive.

As clients increasingly reclaim their instincts of self-compassion and self-protection, we can then help them to emotionally empower the CBT techniques of thought-stopping and perspective-substitution. This is especially important, as I rarely see anyone diminish their toxic critic until they anger at it a great deal.

Similarly, recovering genuine self-compassion seems to depend on numerous experiences of feeling and crying out real sorrow about all the unjust childhood experiences that created one’s CPTSD.

As healthy anger and tears become more accessible, these self-supportive emotional responses can then be used to triage any new- or flashback-injury to their self-esteem. When I witness survivors coming to their own aid at such times, it often seems like they are cauterizing their negative noticing with the heat of their anger, and replacing it with deeply felt, often teary, affirmation of their own attributes and essential worthiness.

Over time, these processes steadily shrink the critic. Self-compassion and self-protection become ongoing, self-perpetuating developmental processes. Tears for the self morph more readily into self-empathy and

kindness; and angering at being brainwashed into self-hate and self-disgust so early in life typically morphs into self-protective qualities such as courage, assertiveness and initiative.

Concurrently, anxiety and unnecessary fear continuously abate. Toxic shame melts. Their creative self-expression is freed to grow and develop. Clients grow in their abilities to make boundaries and set limits around unfairness. And, this in turn allows them to recognize and avoid abusive people, and choose friends who are capable of mutually supportive and respectful relationships. This is especially true when they experience their therapy as genuinely safe and caring.

This also helps survivors of CPTSD to manage their emotional flashbacks more effectively. With enough practice, their instinctual anger awakens more readily to fight and protect themselves from inner critic attacks. Anger about the gross injustice of having family-inflicted DTD quickly arises as a fierce intuitive rage to reject self-abuse. When this process fully matures, triggered survivors feel outraged about the fact that their psyches were entranced to turn on a dime against them, over and over, for every faux pas, mood change, energy lull or less than perfect utterance.

[Interestingly, I have worked with quite a few Christian and Buddhist trauma survivors who initially balked at the notion of angering at the critic, dismissing it as unspiritual. For many, however, my psychoeducation gradually de-minimized their denial about the calamity of their childhoods, and eventually opened then up to angering at the critic. Sooner or later, they were quickly and happily moved to start aggressively setting limits with the toxic critic. Subsequent fighting against it then led them to progressive and substantive reclamation of their self-esteem and peace of mind. It also helped them to recognize and stop unscrupulous narcissists who used to get away with taking advantage of them.

A VIGNETTE

Maria has been seeing me weekly for a year. Her toxic inner critic, the internalized amalgam of her contemptuous parents, is extraordinarily vicious and relentless. All my psychoeducation and my occasional tempered angering at her critic are beginning to get a foothold in her psyche. Here and there she has a glimmer of finding her critic's massively pathologizing attacks annoying and inexcusable.

Today, she comes in extremely upset from a public humiliation by her boss at the office. She says: "I hate myself. I make myself sick. No wonder he picks on me. But, he really is a Jerk!"

I feel bolstered by her trusting me enough to complain about her boss. I sense that her healthy anger may be ready to reawaken. I say: "I'm sorry, Maria. I know you get tired of hearing me say this, but I just feel protective of you, and I'm mad at your parents and the critic they installed in you for making you blame yourself for someone's else's bad behavior. I can't stop thinking about how wrong it was for them to convince you that complaining is a mortal sin!"

With a hint of ire in her tone, she replies: "Yeah, I guess you're right. That was pretty bad!"

"Let me ask you a question, Maria. Can you remember another time when you felt as humiliated and anxious as your boss made you feel today?"

She startles, pauses and then says: "Yes. I'm eight years old. I'm at the dinner table in my beautiful new Easter dress, and I'm so scared I'm going to spill something on it. I hate mealtime! I mean I REALLY HATE IT! [Wow, I think! We've tapped into her anger!]

"Every morning...well actually, every meal...breakfast, lunch and super too, it was the same old thing...endless variations about what a pig I am for making a mess. I remember Dad growling at me: 'Look at that oatmeal all over your dress! You disgusting slob! There'd be less mess if we traded you in for a pig! You make me sick! I can't stand the sight of you!'

"And then Mom would chime in: 'You can't do anything right. You make me want to vomit!' She would mime gagging as she recited a bottomless list of my faults, sins and shortcomings!"

Maria's eyes start to brim with tears: "I was such a loser as a kid. She was right! I couldn't do anything right. No wonder they kept threatening to put me up for adoption. Mom loved to say: 'I'd do it tomorrow but who would take you!?'"

“God, I’m such a MESS! She should have given me away. No wonder I often see this billboard in my mind that says: ‘You never do anything right!’”

For the first time with her, I let my eyes moisten in compassion for the shame and fear she is suffering. She has therapeutically flashed back into *identifying with the aggressor* in this emblematic experience of parental gaslighting. I feel especially sad at how this has set her up in adult life for all the other narcissists who have abused her.

[Let me note that my teariness is not just my countertransference from being similarly treated as a child. It is also my emotional intelligence, my natural human empathy, for the suffering of anyone who gets scapegoated.]

So, I let my eyes brim with tears, and express my compassion for her as a child...and for her as the adult who has such a huge burden of gaslighting experiences to which she often flashes back.

I say: “I am so sorry that they treated you so heartlessly. You were a lovely, innocent child, and you should never have been treated so unfairly. No child should ever be talked to like that...especially you. I’ve known you for a year now. It’s so obvious to me that you are a kind and good and capable person.”

And how that opens her flood gates! She has a deep cathartic cry, and I can see the tension of her fear melting from her face and her neck. Her whole body softens.

When her tears subside, I shift emotional gears and say: “You know, Maria, I feel so much sorrow for the bad luck you had in getting such a bad deal from the parenting deck! And, I also feel a lot of anger at how mercilessly they beat you! They beat you with their words and their contempt! It was so wrong! Hall of Shame bad parenting!”

I pause after each sentence to allow more of her feelings to overflow. New waves of tears punctuated by her head nodding yes, and outbreaths that sound at first like a cough, and then like the muffled bark of a dog, which strikes me as embryonic anger on the verge of emerging.

I continue: "I wish I could go back in time and stop them...tie them up and gag them...call CPS to come and find you a safe and loving home." Maria nods more and adds "yeses" with a bit of a bass tone that has a hint of power in it.

"I'd like to help you get angry about their cruelty." She nods again.

"You can tell me...and/or you can imagine that they are here and tell them to their faces."

Maria suddenly meekens and answers: "Ok, Pete." She then takes a long pause, and comes out of it with increased volume and tone. "I mean YES PETE! **They were bullies and I hate them for what they did to m!!**

This seems to scare her at first, which she says, and then she suddenly starts laughing loudly. "Wow! That felt great! I wish I could go back and yell in their faces: 'Shut up! SHUT UP! **SHUT UP!** Joe and Shirley!' And then, they'd be in their best clothes and I'd throw oatmeal all over them!"

I join her in laughing, and comment: "Many survivors spontaneously laugh after they get mad at their parents the first time. It's a kind a joy of release and relief thing...of rediscovering your own healthy power to protest bad behavior."

Over the next few months, we do many more sessions of these conscious regressions in which I coach and elicit her to anger about what she has suffered. Maria reports after one very powerful catharsis in session: "I'm really making progress, Pete! Sometimes when I have a a flashback at home, I spontaneously feel really pissed off at my parents for turning my mind against me, and it gets me out of the flashback!"

In a subsequent session, she tells me: "Yesterday, when I spilled some water on myself and started feeling panicky, I suddenly felt rage at them, especially my mother. I ranted at both of them for about five minutes and capped it off with: 'You, *Mommie Dearest*, should be in the Hall of Fame of worst mothers! Now just get the hell out of my head and never come back!' And then, Pete, I had this great feeling of being stronger than I can ever remember. It made me cry and cry really sweet tears of finally feeling safer than I ever have."

I reply: "It does my heart good to see you beaming with healthy pride in yourself...to see you protecting yourself from your internalized mother."

Over the next few months, she repeatedly reports more successes of rescuing herself from emotional flashbacks caused by her inner critic "...harping on her like Joe and Shirley did".

On one occasion, she tells me: "I'm catching the critic more quickly these days, and shutting it up more thoroughly. I'm also starting to remember to contradict it by replacing it with more positive noticing of myself. Yesterday, I made myself cry...in a good way...by telling my little girl-self that she's smart, lovely and very good...and that I love her and I am very proud of her."

I affirm this with teary eyes and a big smile. I say: "I love seeing you being so kind to yourself! Well Done! Well Done!"

Some months later she says: "I can't believe how utterly I was trapped in trashing myself. I mean I was little more than my toxic critic! You know, Pete, so much really horrible stuff happened to me at the hands of my parents, but them installing this critic in me was clearly the worst! How could I get anywhere with that constant internal voice hating and shaming me!"

Delighted, I reinforce her insight with: "Well said, Maria! I'm so pleased that you've been so rewarded for your bravery, and so proud of you for sticking up for yourself so effectively."

"You know, it still always appalls me that parents can treat their children so contemptuously without seeing the pain, shame and fear in their faces while they are doing it. That kind of lack of empathy is a sure sign of narcissism. And, as we've talked about many times, narcissistic parents are ruthless about turning their kids into servile codependents."

I use many versions of this kind of emotional coaching many times in any given course of therapy. Typically, it begins when survivors are stuck in an emotional flashback, and I ask them to free associate on previous hurts that their current pain reminds them of, and they come up with a memory of irrefutable parental traumatization that needs the release of healthy angering and crying, which in turn leads to resolving the flashback.

