

## Don't Accept Suffering as Normal – Dr. Gabor Maté – #977

Dave Asprey:

You're listening to The Human Upgrade with Dave Asprey. Today, we're going to talk about normal and what normal means and the amount of stress that normal puts on you because I, a long time ago, decided that being normal was the same as being average and the same as being boring. That's what I teach my kids. I thought what would happen if we had one of the masters of our time on the podcast who happened to just write a book about normal and what our normal culture does to your body, your immune system? That's what you're going to get in our show today.

Our guest is renowned Canadian speaker, bestselling author, Dr. Gabor Maté. He's highly sought after for topics like addiction, stress, trauma, and childhood development, which are a part of what make you who are. He spent two decades in family practice, and he's worked in Vancouver's downtown east side with patients in addiction and mental illness. And I met him through my friend and former guest on the show, doctor... Not doctor, just Joe Polish from Genius Network. Gabor, welcome to the show.

Dr. Gabor Maté:

Well, I think Joe is dating a doctor, so you were close.

Dave:

He is dating a doctor.

Gabor:

That makes him an honorary doctor. Anyway, thanks for having me on. And I know we met briefly at an event that Joe organized, and I look forward to spending some time with you today.

Dave:

I've wanted to have you on this show, oh, for several years now. And we've been working on making our schedules work out because I deeply respect your work. And as I mentioned just briefly a minute ago, I do think you're one of our modern masters who's really looked at what childhood development and trauma do to adults in terms of stress and addiction. Your writing has been just influential in the field for a long time, and I'm grateful for the contribution you've made. Anytime we get to learn from a master on the show, it's always a special moment.

Gabor:

Thank you.

Dave:

I want to go back in time for you. So few adults connect things like birth and early childhood with what they see, what they perceive, what they do as adults. How did you stumble onto that connection and make it the focus of your work?

Gabor:

When I was in family practice, I began to notice that the people who got sick, either mentally ill or physically ill, they all had certain histories and certain features of their histories that, once I got to know

them, I couldn't ignore. And so I began to notice that, for example, people got sick with chronic autoimmune diseases all had certain personalities. There were people pleasers, they suppressed their anger, they took responsibility for other people before looking after themselves, they tended to be afraid of disappointing anybody. And I just began to notice that they couldn't say no to the demands of the world, even if it cost them.

When I began to notice that, I said, "Well, where do these patterns come from?" Because no baby is born not being able to say no. No baby is born taken on their parents' stresses and making it their own responsibility. No baby's born not expressing what their needs are when those needs arise so something must have happened in childhood.

And what I found out when I was dealing with addictions, chronic physical illness, chronic mental illness, the origins always traced back to childhood trauma. And once I realized that, I also realized that my medical education, while it's brilliant in the technical and biological sense, left out the human, social and psychological and the emotional element. And so then I began to talk to my patients about this stuff, and they began to teach me about their lives.

And then I worked in palliative care, people who were dying of cancer. Same thing. Then I worked in addictions. Everyone was traumatized. And what's frustrating, Dave, is that I had to realize these things on my own almost in isolation despite the fact that there'd been all this research supporting these insights for decades. In fact, physicians have been saying it for at least 150 years. Some physicians, some very prominent physicians, some very prominent physicians have been saying these things, and yet there was this gap between what the science showed and what medical practice imbues its practitioners with. I had to break through that wall of silence and both educate myself from my patient stories, also look at the scientific literature.

And of course, I was a doctor, I was successful, but I wasn't a happy guy. I was depressed, I had addictive behaviors, I had problems in my marriage, my kids were afraid of me sometimes. And I had to start asking myself, "Well, what happened to me? Like what's going on with me? I'm well meaning, I love my kids, I love my wife, but I'm not treating them the way they deserve to be treated." And so I had to look at what happened to me that inclined me that way? With this combination of looking at the science, the histories of my patients and having to delve into my own history, I came to these conclusions.

Dave:

Wow. The most impactful thing that I hear in all that it is that wall of silence, because if we've known this for 150 years, if someone had told your parents or someone had told you this in high school, it would've radically altered your path because you probably would've been more kind to your family and to other people, but even in medical school you didn't learn it. Where does the wall of silence come from?

Gabor:

Well, Sigmund Freud is a very interesting example. He founded psychoanalysis, and he is considered a great figure in history of the study of the mind. And he had all kinds of wonderful insights. But when you first started seeing patients with what we call mental illness now, or neurosis, they told him they'd been abused as children. And he actually published a paper about that back in the 1890s. And then he walked it back and he said that these people imagined the abuse because they wanted to sleep with their fathers.

And that was because, first of all, he hadn't dealt with his own trauma, No. 1. Number 2, in polite Viennese society, you just don't get to be a successful psychiatrist if you talk about trauma

happening to be respectable, middle class children, and so there's this social taboo that's been there for such a long time.

There's lots of other reasons. I can mention three diseases: rheumatoid arthritis, multiple sclerosis and breast cancer, okay?

Dave:

Mm-hmm.

Gabor:

In the late 1800s, there were three leading physicians. The very first person who described multiple sclerosis was a French neurologist called Jean-Martin Charcot, considered to be the father of modern neurology. He said that multiple sclerosis was caused by long-term stress and grief. Dr. William Osler, Sir William Osler, who was a Canadian physician who also is one of the founding doctors at John Hopkins Medical School also worked at Oxford. He said that rheumatoid arthritis was caused by long term stress and grief and vexation. A surgeon called Paget, an American surgeon said in 1870 that breast cancer is linked to negative emotions and depression and so on. For all of those points of view, multiple sclerosis, rheumatoid arthritis, breast cancer, there's been oodles of studies since then showing the connection between emotions, disturbed emotions, and the physical illnesses. And yet this stuff is not taught in the medical schools.

In 1938, there was a famous physician at Harvard in whose name they still have a research day annually at Harvard who gave a lecture printed in the Journal of the Medical Association, American Medical Association where he said that emotional factors are important in the causation of all illnesses and must be at least as important as physical factors in the healing. He said this in 1938. In 1977, Dr. George Engel, a famous American physician, called for what he termed a biopsychosocial perspective, which recognizes that the biology of individuals can't be separated from their psychology or from their social relationships.

When I went to medical school, nobody told me about this stuff, nobody even mentioned it. I didn't get a single lecture on trauma. And the average medical student still doesn't hear anything about trauma, not about psychological trauma and its impact on the body. There's this denial of something very painful, and I think it's because if we recognized all this stuff, medical practice would have to change radically from just strictly biological to the more encompassing.

And furthermore, society would've to change. We wouldn't raise children the way we are raising them now. We wouldn't give the advice to parents that we give to parents. We wouldn't have the schools run the way they run. We wouldn't have the jails run the way they're run. We wouldn't have social policies the way they're promulgated. In other words, recognition of trauma would call for radical social transformation, so it's scary for people. Not to mention trauma is painful to talk about.

Dave:

You've got a few more miles in your life than I've had so far. Are you hopeful? Do you think we're going to make those changes in our society?

Gabor:

Do you have to rub my age into my face like that? Is that what you-

Dave:

[inaudible 00:11:19], not aging.

Gabor:

Do I have hope? Well, you know what? In the last chapter of the book, *The Myth of Normal*, I talked about that to Noam Chomsky, who's got more miles than I do. He's in his 90s.

Dave:

There you go. I value experience greatly, my friend.

Gabor:

And Noam, in his advanced old age, is beginning to look like an Old Testament prophet with this long beard. But I interviewed him just before I started to write this book and I asked him the same question that you asked me because he once said that, "I am a strategic optimist, but a tactical pessimist." I believe in the long term, things will get better, but in the short term, they'll get worse. I asked him if he still felt that way, if he's still an optimist and he said, "What else can I be?" He says, "If you don't think there's a possibility for transformation, you might as well just kill yourself right now." And so yes, I believe that in the long term, as a human...

That's why I wrote this book. I didn't just write the book to give the bad news to people, I wrote the book so that people can recognize what isn't working so we can do something about it, because I believe we can. In the long term I am optimistic. I believe in the human beings. Despite all the evidence to the contrary, there's also great evidence to on behalf of the goodness of human beings in this world. But I think we're going to have go through a difficult and hard time. And I think that's what we're doing now is going through a very hard time right now.

Dave:

I'm glad that you still have some hope. I really like Noam's perspective on that. I think right now, humans are a failing species, but that doesn't mean we're a failed species, we've just got to make some serious upgrades to our society, to the environment that we live in so we can get back on track. And I think there's still hope for that.

Gabor:

Well, we are a failing species, and that's the whole point. We tend to think of ourselves as a common intellectual species, but where has intellect got us?

And the whole problem with this society, one of the reasons I say it's a toxic culture... And the full title is "*The Myth of Normal: Trauma, Illness and Healing in a Toxic Culture.*" And one of the factors that make this culture toxic is that we don't raise children with their emotions in mind, we raise them with our behavioral goals in mind. How do we want them to behave?

For example, if we want them to sleep through the night when they're six month old, we don't care about the feelings because the child is desperate to be picked up. Tell a mother baboon not to pick up their baby if they're crying. Tell a mother bear to ignore the child's distress. But human mothers are told to ignore their baby's crying. Now that baby learns that his feelings don't matter and the only way to survive is to suppress the feelings. You're quite right, we are a failing species, and part of the toxicity of this culture is it doesn't recognize the importance of emotions in childhood development.

Dave:

I had no idea that the circumstances of your birth or even of the prenatal experience had any bearing on your personality or behavior as an adult until I was about 30 and I worked with some transpersonal psychology masters and realized very clearly I was born with a cord wrapped around my neck. And you come into the world thinking something's trying to kill you and that you're all alone, you'll build your reality based on that. And that's just one 12 hour period, really, around birth.

And you look at all the bullying, all the stuff that happens with kids, by the time we're adults, it's pretty scrambled. And I like your myth of normal because I believed that normal was the way I felt. And I think everyone feels that. And unless you realize that there's some other reality, how would you know that you're not supposed to be angry all the time, that you're not supposed to be in pain all the time? Because those were actually normal for me, completely. Oh, everyone feels like that. How is normal a myth in your perspective? Did I hit that on the head? Or is there a different perspective on it?

Gabor:

No, no, you're very close to it. The norm as such is just a statistical average so that you live in Mill Bay right now on Vancouver Island. If everybody in Mill Bay tortured their cats, and if you didn't, you'd be abnormal because torturing in the cat would be the norm. But we make the mistake that we think that what is normal is also healthy and natural. But what is normal in this society like not picking up the kids when they're crying or banishing them from your presence if they displease you with a time out, that's the norm, but it's neither health nor natural.

The norm in this culture is traumatic. It's normal for people to go to jobs that don't mean anything to them. That's the norm, but it's not healthy or natural, it's damaging to them. It's normal in schools to punish kids for their behavior rather than to understand what those behaviors represent. What is the child actually acting out? What's happening inside of him when he is angry or upset or oppositional? What is the feeling? The norm is just to try and control the behavior rather than to understand the child's internal needs and dynamics. That's one sense in which the norm is a myth because it's not healthy or natural in this culture.

The other thing I'm saying is that given how traumatizing and toxic this culture is in so many ways, illness, whether the mind or the body are, actually normal responses to an abnormal situation. Rather than the illness being in the abnormality... For example, let's say you're an angry little kid. You're angry for some reason, but your parents have been told that the anger should be punished and banished. What will you do? You will push down the anger in order to be accepted by your parents. What's another word for pushing down? Depression. You depress your anger. 30 years later, you're diagnosed with depression.

Dave:

It makes sense. Let me ask a question. There's lots of parents, or certainly everyone who's on the show has been a kid at one time or another, so, okay, let's say you have a little kid who's beating on their sibling because they're mad. The behavior needs to stop because it's not okay to beat on your sibling.

Gabor:

Absolutely not.

Dave:

Isn't there some a, okay, yes, I recognize your emotions. The behavior is important. How do parents or even adults navigate that? Well, behavior actually matters because if you're so mad, you like the house

on fire, I'm not going to allow the behavior. In your perfect future, how would we navigate kids so they don't destroy things?

Gabor:

Well, first of all, you're quite right; that behavior can't be either tolerated or permitted. But what the question is not whether we like it or whether we should try and stop it. Of course we should. But the question is with what attitude and with what understanding? Where are we coming from? Who are we being where we're doing it?

Now, if a child is chronically beating on their siblings, why is that? It's because they feel afraid of losing the parents' love and they're jealous. They think the sibling is getting more and they think that what the sibling is getting, they're losing. They have an attachment anxiety.

As my friend, the psychologist, Gordon Neufeld says, "Frustration is the engine of aggression." We have to understand if this is happening chronically, what is this child frustrated about? When do we get frustrated? When our needs aren't met. I can tell you that any child who's chronically aggressive towards a sibling is a frustrated child lacking sufficient security in the attachment relationship. T.

He long term way of dealing with it is the stuff that kids so full of attention until it's coming out of his ears. I guarantee you is going to stop hitting on the sibling because he won't be frustrated anymore. In the meanwhile, in the short term, you say, "No, your sister or your brother's not for hitting. Now, come over here, sit down with me." Hold them in the lap. "You're very angry when you did that, weren't you?" "Yeah." "Well, you can be angry, but you can't hit. You will not hit."

But we deliver the message not out of threat, not by making the kid afraid, but by loving the child and setting a firm boundary. Believe me, it's very effective. It's not a question of do we permit unacceptable behavior? Of course we don't, neither in childhood nor in adulthood. It's a question of how do we handle it when we're confronted with it? Are we coming from intimidation? As some psychologists recommend that we should hit the kid or threaten them. Or are we coming from love, understanding that this child is just...

By the way children's brains, especially at an early age, haven't developed self-regulation yet. The capacity-

Dave:

Not at all.

Gabor:

... to regulate impulses. They're not doing it deliberately, their brains just aren't mature enough. And so how do we help the kids mature and develop healthy brains? By giving them a secure attachment relationship. We have to keep asking ourselves, as we try to maintain acceptable behaviors, what are the child's developmental needs? And then we will assert those boundaries in a way that'll promote healthy development, not fear. If you promote fear, you get the behavior and you also get a very troubled adult. That's what's going to happen. I hope that answers it sufficiently.

Dave:

Oh, it absolutely answers it. And so you still deal with the behavior, but you talk with the kid about the emotions behind it, and then you deal with the emotions by, in that case anyway, more attention, more time until they feel the attachment they need.

Gabor:

And by the way, I used to... I inflicted trauma on my kids. One of the ways I did is I used to get very angry. Now-

Dave:

Oh, I've been mad at my kids, for sure.

Gabor:

Well, but if I act out that anger chronically, that hurts them. And so the question is who's the one who's not capable of controlling their emotions? When I'm parenting, I also have to look at myself. How am I showing up? What example am I'm setting?

Dave:

Parenting definitely makes you more self-aware, at least it's supposed to. It does for every parent that I know, certainly has for me. Given that likely no one listening to the show had perfect parents who always did what you described, once we're adults, how do we go about breaking the behavior patterns that got instilled in us from our parents doing their best? Which probably wasn't very good because that's normal.

Gabor:

Well, and part of the problem is, of course, is that there's a wonderful psychologist, Professor Emerita at Notre Dame University, [inaudible 00:23:36]. And I'm just writing the forward for her next book. But she studied human beings in the evolutionary nest, what she calls it, the evolved nest.

Now, the evolved nest for human beings... Now, you know what happens when an elephant baby's born? All the mother elephants stand in a circle as the mother is in labor. When the baby plops to the ground, all the mothers touch them with their trunk. They stroke them. That baby's welcomed into the community.

Now, human beings evolved with that communal parenting. Part of the toxicity of this culture is that that communal parenting has disappeared and individual parents and parent couples, or even individual isolated parents have to struggle on their own with challenges that the point of human evolution were never meant to be on the shoulders of just an isolated couple or an individual so that we just don't have the support anymore.

Now, as adults, how do we deal with all this? Well, usually we have to suffer first. The Greek playwright, Escalus, said in his play, Agamemnon, that the way the master created us, we have to suffer, suffer into truth. That's the story with me. When I found myself in midlife successful, economically secure, respected professionally and socially, but unhappy, depressed, engaging in addictive behaviors, in a tense marriage with kids that were troubled, I had to wake up and start asking what's going on here? It begins with the recognition that, A, we suffer, and B, we don't need to,

The Buddha said, by the way, that once you understand the source of your suffering, you're beginning the healing process already. For other people, it's a disease. For other people, it's a mental illness. For other people, it's a relationship crisis or a divorce that finally says, okay, something's going on here. Maybe I better find out. What I'm saying to people is if you're suffering, don't accept it as normal, as you were saying before, but ask what's going on here? Let the suffering instruct you that there's something going on, that what you think is normal is actually not healthy or natural for you. That's the first step. Only the first step, but it's the essential one.

Dave:

I came across some of this when I was about 30 and did something called re-birthing that I know you're familiar with. And it's something I would've never agreed to do as a computer hacker, but I was at a personal development retreat and had never heard of transpersonal psychology so I said, "All right, I've got nothing to lose here even though this is dumb." And that's exactly what the elephants do. You put yourself in that, whatever emotional state you would've been in as an infant and go through the physical emotions of being born and come into that room where there's a group of people going, "Hey, welcome. We all want you." And it does something weird to your nervous system as an adult that seems to reset some stuff. Why does that work?

Gabor:

Because that's what we were wired for. There's a woman called Jean Liedloff who wrote a book called *The Continuum Concept*, and so I'm stealing this idea from her. She talks about we're not only born with expectations, we're born as expectations. And like the lungs, our expectation for oxygen, the lungs don't expect oxygen, they're an expectation for oxygen. They evolved because of oxygen. If there's no oxygen, there'll be no lungs. The lungs are an expectation for oxygen. The human being's an expectation for love, communal love. This is how we evolved. That's the expectation. That's why it feels so good.

Now, I was born, turns out I was pulled out of my mother by forces. My mother was asleep. Well, maybe that had to happen. I don't know what the circumstances were, and sometimes you have to intervene, and that's perfectly okay. But my expectation would've been that I'd be pushed out of my mother naturally and placed on her tummy, and I would migrate towards her breast and start suckling. That's what a monkey baby will do. That's what a human baby will do. That's the expectation. When that's interfered with, that has an impact. Now, sometimes it's also the essential to save a mother or baby's life to interfere and to intervene, but here in British Columbia where you and I are having this conversation, the cesarean section is now 40%.

Dave:

But the medicalization of birth and the portrayal of birth as this medical emergency with ambulances and sirens and screaming, that wasn't my experience of it. It was holy when I got to be there as a dad. How are we going to fix that in society?

Gabor:

Well, Dave, that's why I spent the two chapters on this subject in this book. There's a chapter in prenatal life and another chapter on birthing because one of the toxicities of this culture is that we stress pregnant women, ignoring all the science that shows that stress on the pregnant moment already affects the brain development of the child and the physiology of the child. In the long term, you can look at 40 year olds and look at the impacts of their mothers' stresses, this has been done, in the womb.

Dave:

It's so real. Of all the, I think seven or eight books I've written right now, the first one was on pre and perinatal care for kids because it's the highest return on investment for building super humans who live a long time. Have a healthy mom who had a calm and peaceful and loving pregnancy. And if you just have that, you're probably going to live longer and perform better and have higher IQ and be nicer to other people and do more in the world.

Gabor:

Absolutely. And you know what's tragic about it? You're in Vancouver Island. Well, I was in Vancouver Island once talking to an Indigenous group. Canada's Native people have a lot of addictions and so on because of the unbearable historical trauma that they were subjected to. But I was talking to this group, and I was saying what you and I were saying now about prenatal life. And this young guy comes up to me and says, "Doc, in our culture, there used to be a rule that said that if a mother was pregnant and you were stressed or upset, you were not permitted to go near them because they didn't want you to transfer your stress and your anger onto that infant." These people, they didn't have scans and heart rate monitors and blood tests and ultrasounds, they just knew intuitively what science has now proven, and which medical practice just completely ignores.

Dave:

It's one of the easiest things that you can do as a listener. If you see a woman who's pregnant, open a door for her and say, "Hi." Offer to carry her groceries. It's not that hard, and it makes such a big difference for the baby. And it used to be that's what a gentleman would do. If you were 10 years old, your dad would say, "Hey, go help the neighbor, she's pregnant." And it feels like pregnant women today. Oftentimes don't feel safe receiving help from people. And oftentimes, people won't help.

Gabor:

Well, you know something? When I was in family practice, I did deliver a lot of babies, I attended a lot of deliveries. And my patients would so often tell me that I'm on a bus and somebody comes up to me and tell me some terrible birth experience they had and how careful you have to be. Pregnant women are sometimes a magnet for people's disaster stories. That's how stupid we are.

Dave:

Traumatized people like to share their trauma, don't they?

Gabor:

Especially with somebody who's vulnerable and about to give birth. What a story to hear. I agree with you. Now, my wife had a tough, emotionally a very tough pregnancy, and I write about this in the book, with one of our children. And actually, the chapter opens with her diary when she's talking to the baby inside her saying, "Your daddy doesn't hear your heartbeat like I do. And all this adrenaline flowing in me right now is not because if you, sweetheart. And I hope someday that you'll understand that." Because I was a workaholic, emotionally immature doctor in my 40s. And I was imposing my stresses on my wife. That affected our child.

Dave:

One of the things that I like about *The Myth of Normal*, your new book, is you're saying our culture is toxic. And that can be such a trope. And people say, "Well, what does that even mean? How can a culture be toxic?" How do you even define what a culture is in order to say it's toxic? I'm really curious about what is a culture?

Gabor:

Okay, well, so let's take a really simple and maybe even simplistic example, but that illuminate the point. In a laboratory when you're growing microorganisms, you have to provide in a petri dish. You have to have a certain broth, a kind of brew that'll support their growth. We call that we call that a culture medium. The cultures in their entire environment image. Those microorganisms develop, thrive, or fall

ill. Now, if in a laboratory culture broth, a lot of the microorganisms started dying or falling ill or not functioning well, you'd call that a toxic culture.

Now, for human beings, the culture is not just the biological so that we swim in, it's also a relationship with our parents, it's the nature of the entertainment that we watch, it's the politics that we engage in or that is being imposed upon us, it's the way we make our living, our relationships at work, how we entertain ourselves, what relationships we are to others and to nature and to society. All this forms the culture because this is the soup in which we develop, in which we thrive, or in which we fail to thrive. Every organism in the world has got its own culture in that sense. Human beings have a much more sophisticated and complex culture because we are much more sophisticated than complex creatures. But it's the entire environment, emotional, psychological, intellectual and relational in which we live, in which we develop, in which we're born, and in which we thrive, in which we succeed or in which we fail.

For me, culture is an all-inclusive term to include the human environment that either sustains us or fails to sustain us. And different societies have different cultures not just in terms of different music or different literature, but different ways of being with each other, different way of relating to the world. And the culture that we evolved in as a species and in which we lived in for millions and hundreds of thousands of years had very different approaches to life and to human connection than ours do. Our culture has got amazing scientific achievements and economic discoveries and practices that would've been unimaginable even a couple hundred years ago. We know that. But in the process, we've lost the essence of what it means to be a human being.

Dave:

We have definitely lost our humanity. I've been working on how I perceive culture and trying to put it into the framework I use for biohacking. Even ego development, I believe, is a subcellular process that's emergent. And I feel like culture is a set of programs that's installed on our species. And you can have different programs, different versions running in different cultures, there isn't just one program. It's like an app on your phone that changes how the screen looks.

And that means that we can hack it. We can actually go in and say, "Well, I'm going to change the programming there because right now the programming doesn't value kindness, it doesn't value childhood or birth or pregnancy or peace or some other things because it's overvaluing other things." And that drives us as individual units that our culture is running on to take all sorts of behaviors and even to change our biology to match the culture that we're in, but we can change it.

And two of the things that you wrote about in your book that really stood out for me that cause stress... In the book, you say you reviewed all the stress literature you could find, and there were some factors that strongly activated the stress access, the HPIA access, and they were lack of control and lack of information. It feels like if you were to design something to cause stress in people, the last two years where everyone knows we've been lied to because the censorship is apparent. Whether or not we heard the truth, we just know censorship there so we had lack of information and we know lack of control because you couldn't go outside. How do people recover from that lack of control and lack of information that we've had for the last couple of years?

Gabor:

Well, so first of all, I would say it's not just in the last couple of years.

Dave:

Fair point.

Gabor:

If you look at advertising, it's designed to lie to you and kids grow to manipulate you. The lie is that you need this product in order to be happy. And kids are lied to from an early age on, then they're glued to the sets where this propaganda is coming at them all the time. If you look at the Vietnam war, was based on a pack of lies. 3 million Vietnamese and 50,000 Americans went to their deaths because of a bunch of lies that the public was sold through the media. The Iraq war, weapons of mass destruction.

Dave:

Total lies.

Gabor:

There were no weapons of mass destruction; it was a complete lie. Half a million Iraqis died and some 5,000 Americans, and the carnage continues. Lying in and politicians, does anybody expect politicians not to lie? So that-

Dave:

Think we hire them to lie. Isn't that their primary function?

Gabor:

Well, they seem to think it is. In any case, what I'm saying is that whatever you think about the COVID and the COVID response, and even whether or not you and I agree on that, what I'm saying is that the lying and the manipulation and the loss of control is endemic. What control is there when some corporation 1,000 miles away decides to throw you out of a job or to reestablish or to relocate somewhere else where you can't move? You have no control.

Dave:

Right. Or to delete your social media account because you said something wrong even though that's how you connect with your community. And that's traumatic. I know some creators who really... It hurts.

Gabor:

It hurts, yeah. And so there's loss of control. Now, in Canada right now, as we speak, there's something like 8% annual inflation rate. That means if you have \$100 a year, from now it'll be worth \$92. But that's tremendous uncertainty and stress for people and lack of control so that this society is almost... Not almost. It's not designed to, but it functions if it was designed to deliver uncertainty, loss of control, lack of information, and conflict. And these are the four major triggers of the stress response, so we live in a stressful society. And you can look at the stress form on levels of mothers who are economically... Of children whose mothers are economically challenged, those children will have elevated stress hormone levels.

Dave:

It's totally true. And the idea of lack of control and lack of certainty, the economic environment definitely does that. And it's absolutely true, too. We didn't have to agree on whether the COVID response was the right one, we can agree that it was really stressful on people.

Gabor:

It was in one way or the other.

Dave:

You see what I'm talking about.

Gabor:

It was. And the isolation was very stressful for people and-

Dave:

Yeah, especially for kids.

Gabor:

And what was the result? Well, for some kids. Because families, where the families were relatively intact and the parents were grounded, actually, I've heard a lot of these parents tell me that it was the best time with their lives because they actually got to be with their kids the whole day for the first time, which is how nature created us. But overall, though, the rate of childhood abuse has gone up under COVID because of the isolation, the rate of addictions has gone up. When you stress people, then violence and addictions and all that rise. And isolation itself, especially for the elderly, isolation itself, loneliness is a risk factor for disease. Loneliness is as much of a risk factor of disease as smoking 15 cigarettes a day, physiologically.

Dave:

And frankly, smoking 15 cigarettes a day is probably more fun than being alone, so if you had a choice between the two, that'd be the to take, right?

Gabor:

I haven't thought of that, but you're making a point for sure. There was a lot of loneliness, socially imposed loneliness during COVID. And so I don't want to get into a public health debate, but certainly you and I will both agree that, whether the policies were right over there wrong, they themselves created a lot of suffering and a lot of stressful people.

Dave:

They did, indeed. And to end on a lighter note here, you talk about four A's that you've reviewed in an earlier book. And you review them in *The Myth of Normal* here. Can you talk about what those four A's are? Because those represent what you can do about this.

Gabor:

You know what the funny thing is? This is my third interview today, and probably they escape my memory at the moment. But one of them is anger, healthy anger, because we have to be able to set boundaries.

Dave:

By healthy anger, you mean expressing anger, like saying that, "I'm actually angry. That wasn't okay," or something like that?

Gabor:

Yeah, that wasn't okay. Or if I'm intruding on your space, "No, stay out." That's the rule. We have a circuitry between our brain for anger. That's why we have it; to protect our boundaries. And you know what else protects our boundaries, by the way? Is the immune system. That's why when we suppress anger, you're also affecting the immune system because they're one system. Healthy anger is essential, healthy anger, not chronic rage, healthy, situational anger. That's the first one.

Dave:

Got it. Letting the anger out so it doesn't become repressed bitterness. Okay, that makes sense. You had acceptance.

Gabor:

Yeah, accept. Yeah. I remember some of them. Acceptance, which was just to say that this is how it is right now, not that this is the way it needs to be or this is the way I want it to be. But that right now, if I'm stuck in traffic, I better not argue with the traffic. The reality is I'm stuck in traffic. I don't have to generate a lot of resentment and anger at the traffic or at the weather for not being the way I want it to be, you know?

Dave:

Right.

Gabor:

Acceptance means, well, this is how things are. Now I have to decide what I want to do about it. Before I can do something about it, I have to accept that for this moment. This is how they are. A third one was authenticity.

Dave:

But-

Gabor:

Authenticity, which is the capacity to feel our feelings and to be true to our inner impulses and our gut sense and our drives and not to betray that for the sake of being accepted by others. That's what I mean by authenticity. And the loss of authenticity is one of the major impacts of trauma. It's also a major cause of physical and mental illness.

Anger, authenticity, acceptance. Agency means that we're in charge of our own lives, that we make the decisions when it comes to our health, when it comes to our relationships. We're not doing by unconscious dynamics from our childhood, we're not responding like a one year old baby when your wife doesn't pick you up at the airport, we're not behaving in ways to please other people, but we behave in ways that seems authentic to us. Agency and authenticity are very close together so that we can't control life, we can't control the world. There's always going to be uncertainties in the world and there's going to be problems and disasters and losses, but we can be in charge of who we are in response to them. That's what I mean by agency.

Dave:

Beautifully said. And thank you for your time at the end of your day before you go give another talk. I understand the author circuit. For listeners, this is a book worth reading. You are spending probably 1/3rd of the electricity in your brain on ancient survival mechanisms that Dr. Maté talks about in his book. And if you read *The Myth of Normal*, you're going to learn some things you probably didn't know about yourself and about the world, which gives you agency, which is only one of the four A's that you would learn about what you could do about all this. I highly recommend you do it. It's Dr. Gabor Maté, D-R-G-A-B-O-R-M-A-T-E.com or anywhere you can find books, you're going to find *The Myth of Normal*. Gabor, thank you for your contributions in the field and for just talking about, hey, be nice to someone pregnant. It'll leave ripples.

Gabor:

Dave, it's a pleasure to speak with you. Thanks for hosting me.

Dave:

You've got it. You're listening to *The Human Upgrade* with Dave Asprey.