CHAPTER 1

The Untruth of Fragility: What Doesn’t Kill You Makes You Weaker

When heaven is about to confer a great responsibility on any man, it will exercise his mind with suffering, subject his sinews and bones to hard work, expose his body to hunger, put him to poverty, place obstacles in the paths of his deeds, so as to stimulate his mind, harden his nature, and improve wherever he is incompetent.

MENG TZU (MENCIUS), fourth century BCE

In August 2009, Max Haidt, age three, had his first day of preschool in Charlottesville, Virginia. But before he was allowed to take the first step on his eighteen-year journey to a college degree, his parents, Jon and Jayne, had to attend a mandatory orientation session where the rules and procedures were explained by Max’s teacher. The most important rule, judging by the time spent discussing it, was: no nuts. Because of the risk to children with peanut allergies, there was an absolute prohibition on bringing anything containing nuts into the building. Of course, peanuts are legumes, not nuts, but some kids have allergies to tree nuts, too, so along with peanuts and peanut butter, all nuts and nut products were banned. And to be extra safe, the school also banned anything produced in a factory that processes nuts, so many kinds of dried fruits and other snacks were prohibited, too.

As the list of prohibited substances grew, and as the clock ticked on, Jon asked the assembled group of parents what he thought was a helpful question: “Does anyone here have a child with any kind of nut allergy? If we

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know about the kids’ actual allergies, I’m sure we’ll all do everything we can to avoid risk. But if there’s no kid in the class with such an allergy, then maybe we can lighten up a bit and instead of banning all those things, just ban peanuts?”

The teacher was visibly annoyed by Jon’s question, and she moved rapidly to stop any parent from responding. Don’t put anyone on the spot, she said. Don’t make any parent feel uncomfortable. Regardless of whether anyone in the class is affected, these are the school’s rules.

You can’t blame the school for being so cautious. Peanut allergies were rare among American children up until the mid-1990s, when one study found that only four out of a thousand children under the age of eight had such an allergy (meaning probably nobody in Max’s entire preschool of about one hundred kids). But by 2008, according to the same survey, using the same measures, the rate had more than tripled, to fourteen out of a thousand (meaning probably one or two kids in Max’s school). Nobody knew why American children were suddenly becoming more allergic to peanuts, but the logical and compassionate response was obvious: Kids are vulnerable. Protect them from peanuts, peanut products, and anything that has been in contact with nuts of any kind. Why not? What’s the harm, other than some inconvenience to parents preparing lunches?

But it turns out that the harm was severe. It was later discovered that peanut allergies were surging precisely because parents and teachers had started protecting children from exposure to peanuts back in the 1990s. In February 2015, an authoritative study was published. The LEAP (Learning Early About Peanut Allergy) study was based on the hypothesis that “regular eating of peanut-containing products, when started during infancy, will elicit a protective immune response instead of an allergic immune reaction.” The researchers recruited the parents of 640 infants (four to eleven months old) who were at high risk of developing a peanut allergy because they had severe eczema or had tested positive for another allergy. The researchers told half the parents to follow the standard advice for high-risk kids, which was to avoid all exposure to peanuts and peanut products. The other half were given a supply of a snack made from peanut butter and puffed corn and were told to give some to their child at least three times a week. The researchers followed all the families carefully, and when the
children turned five years old, they were tested for an allergic reaction to
peanuts.

The results were stunning. Among the children who had been “pro-
tected” from peanuts, 17% had developed a peanut allergy. In the group
that had been deliberately exposed to peanut products, only 3% had devel-
oped an allergy. As one of the researchers said in an interview, “For decades
allergists have been recommending that young infants avoid consuming
allergenic foods such as peanut to prevent food allergies. Our findings sug-
gest that this advice was incorrect and may have contributed to the rise in
the peanut and other food allergies.”

It makes perfect sense. The immune system is a miracle of evolutionary
engineering. It can’t possibly anticipate all the pathogens and parasites a
child will encounter—especially in a mobile and omnivorous species such
as ours—so it is “designed” (by natural selection) to learn rapidly from
early experience. The immune system is a complex adaptive system, which
can be defined as a dynamic system that is able to adapt in and evolve with
a changing environment. It requires exposure to a range of foods, bacteria,
and even parasitic worms in order to develop its ability to mount an im-
mune response to real threats (such as the bacterium that causes strep
throat) while ignoring nonthreats (such as peanut proteins). Vaccination
uses the same logic. Childhood vaccines make us healthier not by reducing
threats in the world (“Ban germs in schools!”) but by exposing children to
those threats in small doses, thereby giving children’s immune systems the
opportunity to learn how to fend off similar threats in the future.

This is the underlying rationale for what is called the hygiene hypothesis, the
leading explanation for why allergy rates generally go up as countries
get wealthier and cleaner—another example of a problem of progress. De-
velopmental psychologist Alison Gopnik explains the hypothesis succinctly
and does us the favor of linking it to our mission in this book:

Thanks to hygiene, antibiotics and too little outdoor play, children
don’t get exposed to microbes as they once did. This may lead
them to develop immune systems that overreact to substances that
aren’t actually threatening—causing allergies. In the same way,
by shielding children from every possible risk, we may lead them to react with exaggerated fear to situations that aren’t risky at all and isolate them from the adult skills that they will one day have to master [emphasis added].\(^{10}\)

This brings us to the oracle’s first Great Untruth, the Untruth of Fragility: *What doesn’t kill you makes you weaker.* Of course, Nietzsche’s original aphorism—“What doesn’t kill me makes me stronger”—is not entirely correct if taken literally; some things that don’t kill you can still leave you permanently damaged and diminished. But teaching kids that failures, insults, and painful experiences will do lasting damage is harmful in and of itself. Human beings *need* physical and mental challenges and stressors or we deteriorate. For example, muscles and joints need stressors to develop properly. Too much rest causes muscles to atrophy, joints to lose range of motion, heart and lung function to decline, and blood clots to form. Without the challenges imposed by gravity, astronauts develop muscle weakness and joint degeneration.

**Antifragility**

No one has done a better job of explaining the harm of avoiding stressors, risks, and small doses of pain than Nassim Nicholas Taleb, the Lebanese-born statistician, stock trader, and polymath who is now a professor of risk engineering at New York University. In his 2007 best seller, *The Black Swan*, Taleb argued that most of us think about risk in the wrong way. In complex systems, it is virtually inevitable that unforeseen problems will arise, yet we persist in trying to calculate risk based on past experiences. Life has a way of creating completely unexpected events—events Taleb likens to the appearance of a black swan when, based on your past experience, you assumed that all swans were white. (Taleb was one of the few who predicted the global financial crisis of 2008, based on the financial system’s vulnerability to “black swan” events.)

In his later book *Antifragile*, Taleb explains how systems and people can
survive the inevitable black swans of life and, like the immune system, grow stronger in response. Taleb asks us to distinguish three kinds of things. Some, like china teacups, are fragile: they break easily and cannot heal themselves, so you must handle them gently and keep them away from toddlers. Other things are resilient: they can withstand shocks. Parents usually give their toddlers plastic cups precisely because plastic can survive repeated falls to the floor, although the cups do not benefit from such falls. But Taleb asks us to look beyond the overused word “resilience” and recognize that some things are antifragile. Many of the important systems in our economic and political life are like our immune systems: they require stressors and challenges in order to learn, adapt, and grow. Systems that are antifragile become rigid, weak, and inefficient when nothing challenges them or pushes them to respond vigorously. He notes that muscles, bones, and children are antifragile:

Just as spending a month in bed . . . leads to muscle atrophy, complex systems are weakened, even killed, when deprived of stressors. Much of our modern, structured, world has been harming us with top-down policies and contraptions . . . which do precisely this: an insult to the antifragility of systems. This is the tragedy of modernity: as with neurotically overprotective parents, those trying to help are often hurting us the most [emphasis added].

Taleb opens the book with a poetic image that should speak to all parents. He notes that wind extinguishes a candle but energizes a fire. He advises us not to be like candles and not to turn our children into candles: “You want to be the fire and wish for the wind.”

The foolishness of overprotection is apparent as soon as you understand the concept of antifragility. Given that risks and stressors are natural, unavoidable parts of life, parents and teachers should be helping kids develop their innate abilities to grow and learn from such experiences. There’s an old saying: “Prepare the child for the road, not the road for the child.” But these days, we seem to be doing precisely the opposite: we’re trying to clear away anything that might upset children, not realizing that in doing so,
we’re repeating the peanut-allergy mistake. If we protect children from various classes of potentially upsetting experiences, we make it far more likely that those children will be unable to cope with such events when they leave our protective umbrella. The modern obsession with protecting young people from “feeling unsafe” is, we believe, one of the (several) causes of the rapid rise in rates of adolescent depression, anxiety, and suicide, which we’ll explore in chapter 7.

The Rise of Safetyism

In the twentieth century, the word “safety” generally meant physical safety. A great triumph of the late part of that century was that the United States became physically safer for children. As a result of class action lawsuits, efforts by investigative journalists and consumer advocates (such as Ralph Nader and his expose of the auto industry, Unsafe at Any Speed), and common sense, dangerous products and practices became less prevalent. Between 1978 and 1985, all fifty states passed laws making the use of car seats mandatory for children. Homes and day care centers were childproofed; choking hazards and sharp objects were removed. As a result, death rates for children have plummeted. This is, of course, a very good thing, although in some other ways, the focus on physical safety may have gone too far. (The Alison Gopnik essay quoted above was titled “Should We Let Toddlers Play With Saws and Knives?” Her answer was: maybe.)

But gradually, in the twenty-first century, on some college campuses, the meaning of “safety” underwent a process of “concept creep” and expanded to include “emotional safety.” As an example, in 2014, Oberlin College posted guidelines for faculty, urging them to use trigger warnings to “show students that you care about their safety.” The rest of the memo makes it clear that what the college was really telling its faculty was: show students that you care about their feelings. You can see the conflation of safety and feelings in another part of the memo, which urged faculty to use each student’s preferred gender pronoun (for example, “zhe” or “they” for students who don’t want to be referred to as “he” or “she”), not because this
was respectful or appropriately sensitive but because a professor who uses an incorrect pronoun “prevents or impairs their safety in a classroom.” If students have been told that they can request gender-neutral pronouns and then a professor fails to use one, students may be disappointed or upset. But are these students unsafe? Are students in any danger in the classroom if a professor uses the wrong pronoun? Professors should indeed be mindful of their students’ feelings, but how might it change Oberlin students—and the nature of class discussions—when the community is told repeatedly that they should judge the speech of others in terms of safety and danger?

To understand how an Oberlin administrator could have used the word “safety,” we turn to an article published in 2016 by the Australian psychologist Nick Haslam, titled “Concept Creep: Psychology’s Expanding Concepts of Harm and Pathology.” Haslam examined a variety of key concepts in clinical and social psychology—including abuse, bullying, trauma, and prejudice—to determine how their usage had changed since the 1980s. He found that their scope had expanded in two directions: the concepts had crept “downward,” to apply to less severe situations, and “outward,” to encompass new but conceptually related phenomena.

Take the word “trauma.” In the early versions of the primary manual of psychiatry, the *Diagnostic and Statistical Manual of Mental Disorders* (DSM), psychiatrists used the word “trauma” only to describe a physical agent causing physical damage, as in the case of what we now call *traumatic brain injury*. In the 1980 revision, however, the manual (DSM III) recognized “post-traumatic stress disorder” as a mental disorder—the first type of traumatic injury that isn’t physical. PTSD is caused by an extraordinary and terrifying experience, and the criteria for a traumatic event that warrants a diagnosis of PTSD were (and are) strict: to qualify, an event would have to “evoke significant symptoms of distress in almost everyone” and be “outside the range of usual human experience.” The DSM III emphasized that the event was not based on a subjective standard. It had to be something that would cause most people to have a severe reaction. War, rape, and torture were included in this category. Divorce and simple bereavement (as in the death of a spouse due to natural causes), on the other hand, were not, because they are normal parts of life, even if unexpected. These
experiences are sad and painful, but pain is not the same thing as trauma. People in these situations that don’t fall into the “trauma” category might benefit from counseling, but they generally recover from such losses without any therapeutic interventions.\textsuperscript{19} In fact, even most people who do have traumatic experiences recover completely without intervention.\textsuperscript{20}

By the early 2000s, however, the concept of “trauma” within parts of the therapeutic community had crept down so far that it included anything “experienced by an individual as physically or emotionally harmful \ldots with lasting adverse effects on the individual’s functioning and mental, physical, social, emotional, or spiritual well-being.”\textsuperscript{21} The \textit{subjective experience} of “harm” became definitional in assessing trauma. As a result, the word “trauma” became much more widely used, not just by mental health professionals but by their clients and patients—including an increasing number of college students.

As with trauma, a key change for most of the concepts Haslam examined was the shift to a \textit{subjective standard}.\textsuperscript{22} It was not for anyone else to decide what counted as trauma, bullying, or abuse; if it felt like that to you, trust your feelings. If a person reported that an event was traumatic (or bullying or abusive), his or her subjective assessment was increasingly taken as sufficient evidence. And if a rapidly growing number of students have been diagnosed with a mental disorder (as we’ll see in chapter 7), then there is a rapidly growing need for the campus community to protect them.

\section*{Safe Spaces}

Few Americans had ever heard of a “safe space” in an academic sense until March of 2015, when \textit{The New York Times} published an essay by Judith Shulevitz about a safe space created by students at Brown University.\textsuperscript{23} The students were preparing for an upcoming debate between two feminist authors, Wendy McElroy and Jessica Valenti, on “rape culture,” the concept that “prevailing social attitudes have the effect of normalizing or trivializing sexual assault and abuse.”\textsuperscript{24} Proponents of the idea, like Valenti, argue
that misogyny is endemic to American culture, and in such a world, sexual assault is considered a lesser crime. We can all see, especially in the #MeToo era, that sexual abuse is far too common. But does that make for a rape culture? It seems an idea worthy of debate.

McElroy disputes the claim that America is a rape culture, and to illustrate her argument, she contrasts the United States with countries in which rape is endemic and tolerated. (For example, in parts of Afghanistan, “women are married against their will, they are murdered for men’s honor, they are raped. And when they are raped they are arrested for it, and they are shunned by their family afterward,” she says. “Now that’s a rape culture.”) McElroy has firsthand experience of sexual violence: she told the audience at Brown that she was brutally raped as a teenager, and as an adult she was so badly beaten by a boyfriend that it left her blind in one eye. She believes it is untrue and unhelpful to tell American women that they live in a rape culture.

But what if some Brown students believe that America is a rape culture? Should McElroy be allowed to challenge their belief, or would that challenge put them in danger? A Brown student explained to Shulevitz: “Bringing in a speaker like that could serve to invalidate people’s experiences.” It could be “damaging,” she said. The logic seems to be that some Brown students believe that America is a rape culture, and for some of them, this belief is based in part on their own lived experience of sexual assault. If, during the debate, McElroy were to tell them that America is not a rape culture, she could be taken to be saying that their personal experiences are “invalid” as grounds for the assertion that America is a rape culture. That could be painful to hear, but should college students interpret emotional pain as a sign that they are in danger?

Illustrating concept creep and the expansion of “safety” to include emotional comfort, the student quoted above, along with other Brown students, attempted to get McElroy disinvited from the debate in order to protect her peers from such “damage.” That effort failed, but in response, the president of Brown, Christina Paxson, announced that she disagreed with McElroy, and that during the debate, the college would hold a competing talk about rape culture—without debate—so students could hear
about how America is a rape culture without being confronted by different views.28

The competing talk didn’t entirely solve the problem, however. Any student who chose to attend the main debate could still be “triggered” by the presence of McElroy on campus and (on the assumption that students are fragile rather than antifragile) retraumatized. So the student quoted above worked with other Brown students to create a “safe space” where anyone who felt triggered could recuperate and get help. The room was equipped with cookies, coloring books, bubbles, Play-Doh, calming music, pillows, blankets, and a video of frolicking puppies, as well as students and staff members purportedly trained to deal with trauma. But the threat wasn’t just the reactivation of painful personal memories; it was also the threat to students’ beliefs. One student who sought out the safe space put it this way: “I was feeling bombarded by a lot of viewpoints that really go against my dearly and closely held beliefs.”29

The general reaction to Shulevitz’s article was incredulity. Many Americans (and surely many Brown students) could not understand why college students needed to keep themselves “safe” from ideas. Couldn’t they do that by simply not going to the talk? But if you understand the fragile-student model—the belief that many college students are fragile in Taleb’s sense of the word—then it makes sense that all members of a community should work together to protect those students from reminders of past trauma. All members of the Brown community should come together to demand that the president (or somebody) prevent the threatening speaker from setting foot on campus. If you see yourself or your fellow students as candles, you’ll want to make your campus a wind-free zone. If the president won’t protect the students, then the students must come together to care for one another, which seems to have been the positive motivation for creating the safe space.

But young adults are not flickering candle flames. They are antifragile, and that is true even of victims of violence and those who suffer from PTSD. Research on “post-traumatic growth” shows that most people report becoming stronger, or better in some way, after suffering through a traumatic experience.30 That doesn’t mean we should stop protecting young people
from potential trauma, but it does mean that the culture of safetyism is based on a fundamental misunderstanding of human nature and of the dynamics of trauma and recovery. It is vital that people who have survived violence become habituated to ordinary cues and reminders woven into the fabric of daily life.\textsuperscript{31} Avoiding triggers is a \textit{symptom} of PTSD, not a treatment for it. According to Richard McNally, the director of clinical training in Harvard’s Department of Psychology:

Trigger warnings are counter-therapeutic because they encourage avoidance of reminders of trauma, and avoidance maintains PTSD. Severe emotional reactions triggered by course material are a signal that students need to prioritize their mental health and obtain evidence-based, cognitive-behavioral therapies that will help them overcome PTSD. These therapies involve gradual, systematic exposure to traumatic memories until their capacity to trigger distress diminishes.\textsuperscript{32}

Cognitive behavioral therapists treat trauma patients by exposing them to the things they find upsetting (at first in small ways, such as imagining them or looking at pictures), activating their fear, and helping them habituate (grow accustomed) to the stimuli. In fact, the reactivation of anxiety is so important to recovery that some therapists advise their patients to avoid using antianxiety medication while undertaking exposure therapy.\textsuperscript{33}

For a student who truly suffers from PTSD, appropriate treatment is necessary. But well-meaning friends and professors who work together to hide potential reminders of painful experiences, or who repeatedly warn the student about the possible reminders he or she might encounter, could be impeding the person’s recovery. A culture that allows the concept of “safety” to creep so far that it equates emotional discomfort with physical danger is a culture that encourages people to systematically protect one another from the very experiences embedded in daily life that they need in order to become strong and healthy.

This is what we mean when we talk about \textit{safetyism}. Safety is good, of course, and keeping others safe from harm is virtuous, but virtues can
become vices when carried to extremes.\textsuperscript{34} “Safetyism” refers to a culture or belief system in which safety has become a sacred value, which means that people become unwilling to make trade-offs demanded by other practical and moral concerns. “Safety” trumps everything else, no matter how unlikely or trivial the potential danger. When children are raised in a culture of safetyism, which teaches them to stay “emotionally safe” while protecting them from every imaginable danger, it may set up a feedback loop: kids become more fragile and less resilient, which signals to adults that they need more protection, which then makes them even more fragile and less resilient. The end result may be similar to what happened when we tried to keep kids safe from exposure to peanuts: a widespread backfiring effect in which the “cure” turns out to be a primary cause of the disease.

iGen and Safetyism

The preoccupation with safetyism is clearest in the generation that began to enter college around 2013. For many years, sociologists and marketers assumed that the “Millennial generation” encompassed everyone born between (roughly) 1982 and 1998 or 2000. But Jean Twenge, a psychologist at San Diego State University and an authority on intergenerational differences, has found a surprisingly sharp discontinuity that begins around birth-year 1995. She calls those born in and after 1995 “iGen,” short for “internet Generation.” (Others use the term “Generation Z.”) Twenge shows that iGen suffers from far higher rates of anxiety and depression than did Millennials at the same age—and higher rates of suicide. Something is going on; something has changed the childhood experience of kids born in the late 1990s. Twenge focuses on the rapid growth of social media in the years after the iPhone was introduced, in 2007. By 2011 or so, most teens could check in on their social media status every few minutes, and many did.

We’ll explore Twenge’s data and arguments in chapter 7. For now, we simply note two things. First, members of iGen are “obsessed with safety,” as Twenge puts it, and define safety as including “emotional safety.”\textsuperscript{35} Their
focus on “emotional safety” leads many of them to believe that, as Twenge describes, “one should be safe not just from car accidents and sexual assault but from people who disagree with you.”

The second point we want to note about iGen is that the campus trends that led us to write our original Atlantic article—particularly the requests for safe spaces and trigger warnings—started to spread only when iGen began arriving on campus, around 2013. The demands for safety and censorship accelerated rapidly over the next four years as the last of the Millennials graduated, to be replaced by iGen. This is not a book about Millennials; indeed, Millennials are getting a bad rap these days, as many people erroneously attribute recent campus trends to them. This is a book about the very different attitudes toward speech and safety that spread across universities as the Millennials were leaving. We are not blaming iGen. Rather, we are proposing that today’s college students were raised by parents and teachers who had children’s best interests at heart but who often did not give them the freedom to develop their antifragility.

In Sum

- Children, like many other complex adaptive systems, are antifragile. Their brains require a wide range of inputs from their environments in order to configure themselves for those environments. Like the immune system, children must be exposed to challenges and stressors (within limits, and in age-appropriate ways), or they will fail to mature into strong and capable adults, able to engage productively with people and ideas that challenge their beliefs and moral convictions.
- Concepts sometimes creep. Concepts like trauma and safety have expanded so far since the 1980s that they are often employed in ways that are no longer grounded in legitimate psychological research. Grossly expanded conceptions of trauma and safety are now used to justify the overprotection of children of all ages—even college students, who
are sometimes said to need safe spaces and trigger warnings lest words and ideas put them in danger.

- Safetyism is the cult of safety—an obsession with eliminating threats (both real and imagined) to the point at which people become unwilling to make reasonable trade-offs demanded by other practical and moral concerns. Safetyism deprives young people of the experiences that their antifragile minds need, thereby making them more fragile, anxious, and prone to seeing themselves as victims.