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**WHY DO YOU PICK UP A BABY WHO IS CRYING?**

**(Or, acting out, dangerous behavior... alcoholism and drugs!?! so why are we talking about babies?!)**

**Why do you pick up a baby who is crying?**

The baby is in distress over discomfort, hunger, being startled, and so forth. Babies in distress who are not attended to, slide into despair. You can hear the difference in their cry.

**Why do you pick up a baby who is crying?**

Because babies do not know how to self-soothe. You pick up the baby to soothe him or her so that he/she doesn't go into despair, which ignites a whole set of other emotional and psychological issues potentially.

**Why do you pick up a baby who is crying?**

Because as you soothe the baby, the baby learns how to self-soothe. He/she eventually learns to rock him/herself gently the way you rock him/her. He/she eventually learns to caress him/herself around his/her face and body, the way you caress him/her. He/she eventually learns to murmur in the same tone (but in baby language) the gentle nurturing sounds that he/she has heard from you. Babies learn how to self-soothe by being soothed by loving caretakers.

Babies that are soothed learn and are modeled behaviors that they eventually use to soothe others as they grow older.

Babies that learn how to self-soothe become children, teenagers, and adults who know how to self-soothe and know how to soothe others.

Babies that DO NOT learn how to self-soothe become children, teenagers, and adults who DO NOT know how to self-soothe or soothe others.

Children who do not know how to self-soothe, will act out to gain the fourth cousin twice removed of nurturing- that is, negative attention. They take the negative attention because that is all they feel they can get. And you need to celebrate their acting out, because their acting out is a cry for help. The cry for help although the baby or child may not know it, is also a cry of hope. Babies that stop crying have lost hope. This can result in the failure to thrive syndrome. Children who stop acting out have also lost hope and may slide deeply into depression.

And why is this article written for parents, teachers, AND therapists, social workers, and alcoholism and drug abuse counselors? And other professionals work clients with other compulsive and addictive self-destructive behaviors? And why might the principles from



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this article be useful in working with such clients, or if you are someone with addictive behaviors?

**Why?** Because teenagers and adults who do not know how to self-soothe, will use alcohol, drugs, sex, food, self-injury, and any number of other dysfunctional behaviors in order to self-soothe. If they lose hope, they may also fall into patterns of short-term gratuitous or hedonistic behaviors that can be self-destructive. Long-term goals or dreams become irrelevant with life experiences and views of hopelessness and helplessness.

Teenagers and adults who do not know how to self-soothe, will get into a relationship with you- the family member, friend, and/or professional, and demand that you always perfectly soothe them when they are in need. And, if for some reason, you fail to soothe them when their distress spirals immediately into despair, they will lash out and punish you for your betrayal. This can be borderline personality disorder tendencies in action. This type of behavior can become endemic in problematic couples and other relationships. Or, they may not know how to soothe YOU or others effectively or appropriately. Other personality disorders may arise from the same issues.

Parents who do not know how to self-soothe will overcompensate soothing for their children as they seek to prevent their children suffering the despair they experienced- often despite their children not feeling despair. The consequence of this may be narcissistic and entitled (spoiled) children who proceed with problems into second (their own intimacy relationships) and third generations (their children). This can contribute to the development of another generation of addiction-prone individuals.

**Why do you pick up a baby who is crying?**

Because this is how they learn that in the big wide world, there is someone who cares that he/she is in distress.

**Why do you pick up a baby who is crying?**

Because this is the fundamental behavior of all those wonderful attachment theories!

Why do some people advocate letting them "cry it out?" On a humorous note, I recall research that came out a few years ago, that the tone and pitch of a baby's cry is designed to bug the heck out of us! Duh! That makes us want to get the baby not to cry of course. Some people advocate letting babies "cry it out" because they are focusing on a practical problem and focusing on the behavior itself. It's a legitimate problem to be handled in any number of ways. But it needs to be handled so that babies can have secure attachment.

**Why do you pick up a baby who is crying?**



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Because a cry of discomfort also is a cry of need. If adults don't respond to the cry, the "cry it out" advocates are correct... the baby will stop crying. The baby will stop crying because beyond the cry being a cry of discomfort, it also becomes a cry of hope. When babies, children, teens, and adults lose hope, they don't cry out anymore. Crying out, acting out, and other behaviors are the cries to caregivers (personal and professional) that need to be responded to.

This is how I explain this issue to parents, teachers, and other human services professionals... to people... to anyone! They get it. At the core, it's still about attachment.

Acting out behavior, self-destructive or dangerous behavior, addiction including alcoholism and drug addiction can have many roots. Not the least of these are the attachment anxiety- the attachment despair one may feel from feeling insignificant, abandoned, and alone in the world. And from having felt that for years and decades since infancy and early childhood. As a psychotherapist I advocate that my clients must learn four things:

1. They must learn how to be alone. As much as good people: friends, family, fellow 12-steppers, church members, and so forth can give support, there inevitably will be times when one is alone. Being alone is not intrinsically horrific, but can be quite wonderful if one is good with oneself.
2. They learn how to alone without being lonely. As stated, being alone can be great- a time to reflect, to consolidate, or to commune with one's inner soul. However, some individuals struggle to be alone without being lonely. Loneliness happens.
3. They need to learn how to be lonely without getting desperate. As attachment anxiety (or attachment despair), trauma is re-triggered, and/or real and existential fears and anxieties amplify when alone and lonely, some individuals become desperate.
4. And most importantly since the cycle and sequence of this dynamic is often powerful and not readily amenable to conscious restriction or muting, they need to learn how to be desperate without being STUPID! In kinder language, they need to learn how to be desperate without making bad choices: using alcohol, drugs, sex, porn, spending, toxic relationships, or other destructive behaviors to self-soothe the intense emotional and psychic pain. It is not being alone, lonely, or desperate that makes life crazy and unmanageable. It is the bad choices made when desperate.

Being able to not make bad choices is not the same as becoming able to make good choices. The inability or difficulty in making good choices is a later clinical or life challenge- a later focus of therapy or personal process. It is the consequences of bad choices and prior bad choices that make one's life crazy and out of control.



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How does someone become desperate and not make bad choices? There are only two ways for one to do this. First, is practice! One must practice feeling the desperation and not make bad choices. Avoiding the desperation eventually fails to work. Essentially or to a large degree, alcohol, drugs, and other compulsive behaviors were attempts at avoiding feeling desperation. People need to perhaps not make good choices yet, but definitely not call ones dealer, go to corner liquor store, download some porn, or overeat. One must practice suffering through it. No fun and certainly, no magic. Suffer and survive. And then, suffer some more and still survive. Then do it again. However, how does one develop the capacity to suffer through desperation? By being able to self-soothe. When in that place of anxiety, desperation, traumatic intensity, profound loneliness, or other psychic pit, the ability to self-soothe is key.

### **Why do you pick up a baby who is crying?**

You pick up the baby to soothe him or her, to give the baby models of how to soothe others in all of their future including intimate relationships, and so that baby can learn to self-soothe. You pick up the baby to armor and empower him or her for the turmoils of life and relationships to come when baby will be alone, lonely, and desperate.

### **Why do you pick up your baby who is crying? Not that baby, but THAT baby!**

You pick up the baby... the scared little boy... the overwhelmed little girl within yourself (within your client) to soothe him or her. This may be you- the professional providing the attachment figure "picking" up the client, but eventually, it has to be the addicted or other troubled individual "picking" him or herself up to soothe.

### **Why do you pick up a baby who is crying?**

You pick up that inner self- that baby within, so you don't pick up the bottle of beer, the line of coke, the latest porn offering, the second serving, the Visa card...

**That is why.** Why, you pick up a baby who is crying. And why, we're talking about babies to parents, teachers, therapists, social workers, alcoholism and drug abuse counselors! The work of how remains difficult and challenging. Hopefully, this perspective and these principles resonate with you- the caring person and with the individual to empower more effective work and processing. Give yourself a hug!

## **Biography**

Ronald Mah, therapist and educator, combines concepts, principles, and philosophy with practical techniques and guidelines for effective and productive results. He uses humor and stories from his many experiences to illustrate important points in a stimulating and highly motivating and engaging style.

A Licensed Marriage & Family Therapist, his experiences include: Asian-American community mental health, Severely Emotionally Disturbed mental health & school partnership programs, vocational programs for at risk youth, welfare to work programs,



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Professional Education experiences include: 16 years in ECE, including owning and running a child development center for 11 years, Kindergarten, elementary, & secondary teaching credentials and experience, ethnic studies curriculum writer, community college instructor, Masters of Psychology instructor, and former member Board of Directors of the California Kindergarten Association and of the California Association of Marriage & Family Therapists.