**FOREWORD**

The way to begin resolving trauma is to talk about it, to bring it to the light of day. As one of the contributors to *Unlock The Door* states, “When one person’s words flow and another person listens, magic can happen.” In this book people speak and we, the readers, listen. And listen we must.

 For twelve years I worked as a physician in Vancouver’s Downtown Eastside, notorious as North America’s most concentrated area of drug use. Within a few square blocks thousands of human beings chase the chimera of oblivion through the injection, ingestion or inhalation of mind-altering substances, seeking an evanescent escape from the pain of their existence. It’s a quest that often leads to their death, whether through overdose, suicide, HIV or a multiplicity of other diseases. In those twelve years I did not meet a single female patient, out of hundreds, who had not be sexually abused in childhood. Many of these same women prowl the streets offering cheap sexual favours in exchange for drug money, an endeavour that is more than a financial transaction: having been objectified sexually as children, they may have little valuation of themselves other than as sexual beings. Sexuality is the only aspect of them that ever received attention. Among the men, at least a significant minority had been sexually abused as well.

 No one should think, therefore, that the consequences of sexual abuse are only psychic – although those would be devastating enough, as I discuss below. Addiction is one frequent outcome, both because sexual abuse generates searing emotional pain that substances like opiates, cocaine and alcohol temporarily soothe, but also because abuse alters the developing brain in such ways that make it more receptive to intoxicants.

 We know something about how specific kinds of childhood trauma affect brain development. For example, the vermis, a part of the cerebellum at the back of the brain, is an area thought to play a key role in addictions due to its influence on the motivational system in the midbrain. Imaging of this structure in adults who were sexually abused as children reveals abnormalities of blood flow, and these abnormalities are associated with symptoms that increase the risk for substance addiction. In one study of the electro-encephalograms (EEGs) of adults who had suffered sexual abuse, the vast majority had abnormal brain waves and over a third showed seizure activity.

 According to a review published by the US National Institute on Drug Abuse in 2002,

… the rate of victimization among women substance abusers ranges from 50% to nearly 100%... Populations of substance abusers are found to meet the (diagnostic) criteria for post-traumatic stress disorder… those experiencing both physical and sexual abuse were at least *twice* as likely to be using drugs than those who experienced either abuse alone.

Similarly with alcohol: those who experienced sexual abuse were three times more likely to begin drinking in adolescence.

 As with addiction, so with diseases of the body. Men sexually abused have a threefold risk of heart attacks, while people abused in childhood have a nearly fifty per cent risk of cancer as adults. And this last fact points to the importance of the present volume of painful recollections and revelations: the men are thought to incur the elevated risk not only because of their trauma, but because they tend to repress or suppress their traumatic memories, fearing to share them with others. Such suppression stresses the cardiovascular system, and other body functions.

 An Australian study also found that men who had been sexual abused in childhood were up to ten times more likely to have suicidal tendencies. One of the researchers said,

Men are particularly vulnerable because they don’t like to talk to others about their problems… It’s difficult for anyone to come to terms with traumatic experiences such as childhood sexual abuse, but for men the stigma is worse because they don’t tend to confide in their friends as much. Many suffer feelings of failure and isolation and think that it is a sign of weakness to discuss their past abuse with others.

While such shame may affect men more, women are very much vulnerable to it as well.

 I have often considered why sexual trauma should be so particularly debilitating, both psychologically and physically. What makes it more corrosive than other forms of psychological or physical abuse? I believe the answer lies in the need of the human being for autonomy, for an existence in which one’s body and soul can both glory in their full individual expression. Sexual abuse, more than other forms of hurt, robs the person of autonomy, reducing her or him to the status of an object whose body exists only to serve the desires of another, whose emotional needs are seen not to exist, whose soul is disregarded. Such objectification threatens to deprive us of our very humanity and, as many stories in this book attest, forces us to split our psyche: the surface façade we present to the world, and the inner, hidden milieu of shame, confusion, pain, anger and bottomless sorrow. We become not ourselves. And then we compensate in ways that can never make up for the loss of ourselves. Addiction is only one of them.

 The most corrosive impact of sexual abuse is shame, toxic self-rejection. Children are narcissistic, in the purest sense of the word. Their world revolves around them; everything happens to them and because of them. If the caregiving adults are able to respect the child for who she is, as she is, the child will come to accept and honour herself. If they hurt and objectify her, it is because she is unworthy to be a full human being. That shame becomes the central dynamic of the psyche. Not recognized and integrated, it needs to be compensated for – if not by drugs, then by a desperate drive to be accepted by others at all costs, or even by the relentless striving for worldly achievement that, attained or not, leaves the person as hollow as the most abject failure.

 As attested by many of the stories in this book, even if unseen by their narrators, the tragedy of the abused child is that she experienced herself as a failure even before the abuse began. The reason is simple: by the time the child was traumatized sexually, she had already been isolated from the emotional nurturance and protection of the adult world. In my healing work with abuse survivors I ask a simple question: “All that time that your body was physically invaded and your emotions violated, who did you talk to, from whom did you seek help?” The near universal answer: “No one.” In short, well prior to the onset of the abuse the child knew she was alone. There was no one to keep her safe and no one to rescue her. That is what made the abuse possible, since the predator senses with laser precision which child is left vulnerable, alone, without succour.

 “There is trauma from the abuse and the first thing that disappears is a person’s voice because they don’t know what to do with the trauma,” asserts one of the interviewees in *Unlock The Door*. Yes, but not quite so. That voice had already been silenced – that is why they don’t know what to do with the trauma: in fact, that is *the* trauma.

 There is an encouraging example in this book of how a sexual incident need not become traumatic, a story in which a three-and-a-half-year-old girl is subjected to inappropriate sexual touching and display from a twelve-year-old cousin. The child immediately tells the grandmother who promptly informs the parents; the entire family gathers around, and the problem never recurs. This child, we may rest assured, has not be traumatized.

 Even the astute and eloquent Sylvia Fraser overlooks this essential point. Sexually exploited by her father, she never tells anyone until in adulthood the repressed memories flash into consciousness. But they were repressed only because there was no one to whom the child Sylvia could have revealed what she was having to endure, not even her mother. Instead, she berates herself:

Unfortunately, when I was growing up, I was always raging at my mother who functioned as a kind of doormat for my father because she was an easy target and I was so full of the fury that helped me to survive. She was a good woman, very dutiful, absolutely moral and upstanding. So, what relatives saw when they looked at me was a little brat who was always having temper tantrums. I certainly expected no sympathy from anybody.

There was no little brat, and the raging was not unfortunate. It was the proper emotional expression of a hurt child enraged at the blindness and indifference of the adults who ought to have seen and prevented her suffering.

 We need truth to emerge from shadow into light. This brave volume of stories, interviews, poetry and, above all, truth-speaking, will unlock the door to the light for many. And it will bestow the blessing of helping people still entrapped in shame to find their own courage and strength, as many of the contributors here have been able to.

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