

Why We're a Culture of Addicts

By Leslie Garrett on Wednesday February 22nd, 2017

Is Addiction the Result of Nature or Nurture?

If there's one constant among addicts of all types, it's shame. It's what makes us lie and hide. It's what keeps us from asking for help – though we don't think we need it because we're also good at lying to ourselves.

About why we eat. Or shop. Or gamble. Or drink.

Dr. Gabor Maté knows the feeling well. Maté, a renowned doctor, speaker, and author, has seen it in the heroin-addicted men and women he treats in Vancouver's Downtown Eastside. He sees it in the behavior of well-respected workaholics. The cosmetic surgery junkies. The power seekers. The 'I Brake for Garage Sales' shoppers.

He's seen it in the mirror.

Maté, author of the groundbreaking book *In the Realm of the Hungry Ghosts: Close Encounters with Addiction*, believes shame is behind our unwindable 'war on drugs.' Our 'tough on crime' policies. Our judgment of addicts. Our marginalization of street junkies.

Maté knows, as so many of our spiritual teachers have tried to teach us, that our [judgments of others](#) are really all about *us*.

The common emotion that fuels addicts' behavior: shame.

Maté, who serves as resident doctor at The Portland Hotel, a Vancouver housing project for adults coping with mental illness, addiction, and other challenges, saw himself in the stories of the women and men who, day after day, came to see him for treatment and who slowly, over years, revealed to him their pain.

Those of us still hiding and denying? Gabor Maté sees us too.

Haunted

Gabor Maté was born into the Jewish ghetto of Budapest in 1944, just weeks before the Nazis seized Hungary, to a loving but overwhelmed mother and an absent father, who had been sent to a forced-labor camp. Just months later, his grandparents were killed at Auschwitz. At a year old, he was handed by his mother to a gentile stranger who was assigned his safety.

Maté understands now that those early experiences – or, more accurately, his mother's frantic state of mind – guided the neural circuitry in his still-developing brain. Impaired circuitry that virtually prescribed a future of addiction and its close cousin, attention-deficit disorder (ADD).

Stress and trauma affect the development of a child's brain.

Over years of hearing the stories of street drug users, examining his own past, and putting it together with his medical training, Maté became convinced that – as he says in a recent interview: *both addiction and ADD are rooted in childhood loss and trauma.*

It's a novel – and surprisingly controversial – approach, examining not the addiction but the [pain](#) behind it. Fighting not the substance but the circumstances that lead someone to seek out that self-soothing.

Circumstance Over Substance

Addiction, says Maté, is nothing more than an attempt to self-medicate emotional pain. *Absolutely anything can become an addiction... It's not the external behaviors, it's our relationship to it.*

Maté calls addicts 'hungry ghosts,' a reference to one of the [six realms of the Buddhist Circle of Life](#). These hungry ghosts are depicted with large empty bellies, small mouths, thin necks — starving for external satisfaction, seeking to fill but never being full, desperate to be soothed. We all know that realm, he says, at least some of the time. The only difference between the identified addict and the rest of us is a matter of degrees.

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It's a view that has earned him some critics, not least of which is the Canadian Conservative government, which has sought to shut down the safe-injection site he helps oversee. The conventional medical community certainly hasn't embraced his ideas. Addiction is typically viewed through one of two lenses: as a genetic component or as a moral failure.

Both, says Maté, are wrong.

And he says he's got the brain science to prove it.

“A Warm, Soft Hug”

Maté points to a host of studies that clearly show how neural circuitry is developed in early childhood. Human babies, more than any other mammals, do most of their maturing outside the womb, which means that their environment plays a larger role in brain development than in any other species.

Factor in an abusive, or at least stressful, childhood environment and you've produced impaired brain circuitry— a brain that seeks the feel-good endorphins and stimulating dopamine that it is unable, or poorly able, to produce on its own. A brain that experiences the first rush of heroin as a “warm, soft hug,” as a 27-year-old sex trade worker described it to Maté.

Addiction stems from a need to comfort one's self of unattended emotional pain.

It's the adversity that creates this impaired development, says Maté, not the genetics emphasized by the medical community.

And our response to addicts – criminalization, marginalization, ostracism – piles on that adversity, fueling the addictive behavior.

The good news is that addiction can be prevented, but only if you start early. Maté writes in *Hungry Ghosts*:

[Prevention] needs to begin in the crib, and even before then... in the social recognition that nothing is more important for the future of our culture than the way children develop.

What about those children who are now addicted adults? Unprecedented brain research has revealed that [brains can, essentially, be rewired](#). He continues:

Our brains are resilient organs... Some important circuits continue to develop throughout our entire lives, and they may do so even in the case of a hard-core drug addict whose brain 'never had a chance' in childhood.

What's more, Maté, unlike many of his medical counterparts, factors in our potential for recovery, even transformation:

something else in us and about us: it is called by many names, 'spirit' being the most democratic

and least denominational.

The Illusion of Choice

We'd like to think that addicts have a choice, that they can just choose to stop — even if it's hard. But Maté insists that the ability to choose is limited by the addict's physiology and personal history. He states:

The more you're driven by unconscious mechanisms, because of earlier defensive reaction to trauma, the less choice you actually have... Most people have much less choice in things than we actually recognize.

These **unconscious impulses** are why we find ourselves with our hands in a bag of chocolate after an argument with our spouse. It's why we're on Craigslist arranging a sexual encounter while our wife sleeps beside us. It's why a respected medical doctor finds himself lying to his wife. Again.

“Addiction is the only prison where the locks are on the inside.”

“‘Have you been obsessing and buying?’ she's asked me a number of times in the past few weeks,” Maté writes in *Hungry Ghosts*. “I look directly at my life partner of thirty-nine years and I lie. I tell myself I don't want to hurt her. Nonsense. I fear losing her affection. I don't want to look bad in her eyes. I'm afraid of her anger. That's what I don't want.”

For years, Maté struggled with a shopping addiction, spending thousands of dollars on classical music CDs in a single spree, then unable to resist the impulse to do it again weeks later after promising his wife he'd stop. It's an addiction he refers to as wearing ‘dainty white gloves’ compared to the grinding drug abuse of his Downtown Eastside patients.

But, he writes, “I've come to see addiction not as a discrete, solid entity — a case of either you've got it or you don't got it — but as a subtle and extensive continuum.”

Unless we become fully aware of the drivers of our addiction, he says, we'll continue to live a life in which ‘choice’ is an illusion.

“Passion Creates, Addiction Consumes”

Is there a difference between a drug addiction and being hooked on a behavior — like sex? The medical community continues to debate the question, but Maté is adamant.

Addiction comes in many different forms, and comes from unconscious impulses.

All addictions, whether to drugs or to behaviors such as compulsive sexual acting out, involve the same brain circuits, the same brain chemicals and evoke the same emotional dynamics...

Behavior addictions trigger substances internally. So (behavior addicts) are substance addicts.

Where do we draw the line between addiction and, well, passion? What about the Steve Jobs of the world, who drive themselves — and others — to push harder, work longer, produce more and do everything better?

Daniel Maté, Gabor's son and an editor of his books, says:

A lot of people make wonderful contributions to the world at their own cost... We often lionize unhealthy things.

To determine whether we're serving a passion or feeding an addiction, Daniel Maté suggests that it comes down to a simple question, answered honestly: Are you free or are you not free?

His father takes it further.

What function is the addiction performing in your life? What questions is it answering . . . and

how do we restore that?

Or, as he writes in *Hungry Ghosts*, “Passion creates, addiction consumes.”

Compassion for the Addict — and Ourselves

Responding to addiction requires us not only to care for the body and mind but also the soul, Maté says. The spiritual element of his practice is critical, he says, not only to understand the hard-core street addict but also our own [struggle](#).

Compassion and acceptance are profoundly healing for an addict's internal pain.

We lack compassion for the addict precisely because we are addicted ourselves in ways we don't want to accept and because we lack self-compassion. – Gabor Maté

And so we treat the addict as an ‘other’ – this criminal, this person making poor choices – to whom we can feel superior.

Compassion is understanding, and to understand is to forgive.

We need, he says, to turn [compassion](#) into policy.

Maté summed it up nicely in a 2010 talk at Reed College:

To . . . point the finger at that street-corner drug addict who's in that position because of that early trauma is blind to say the very least... I think that if we developed a more compassionate view of addiction and a more deep understanding of the addict and if we recognized the similarities between the ostracized addict at the social periphery and the rest of society, and if we did so with compassion both for them and for the rest of us, we would not only have more efficient, more successful drug treatment programs, we would also have a better society.