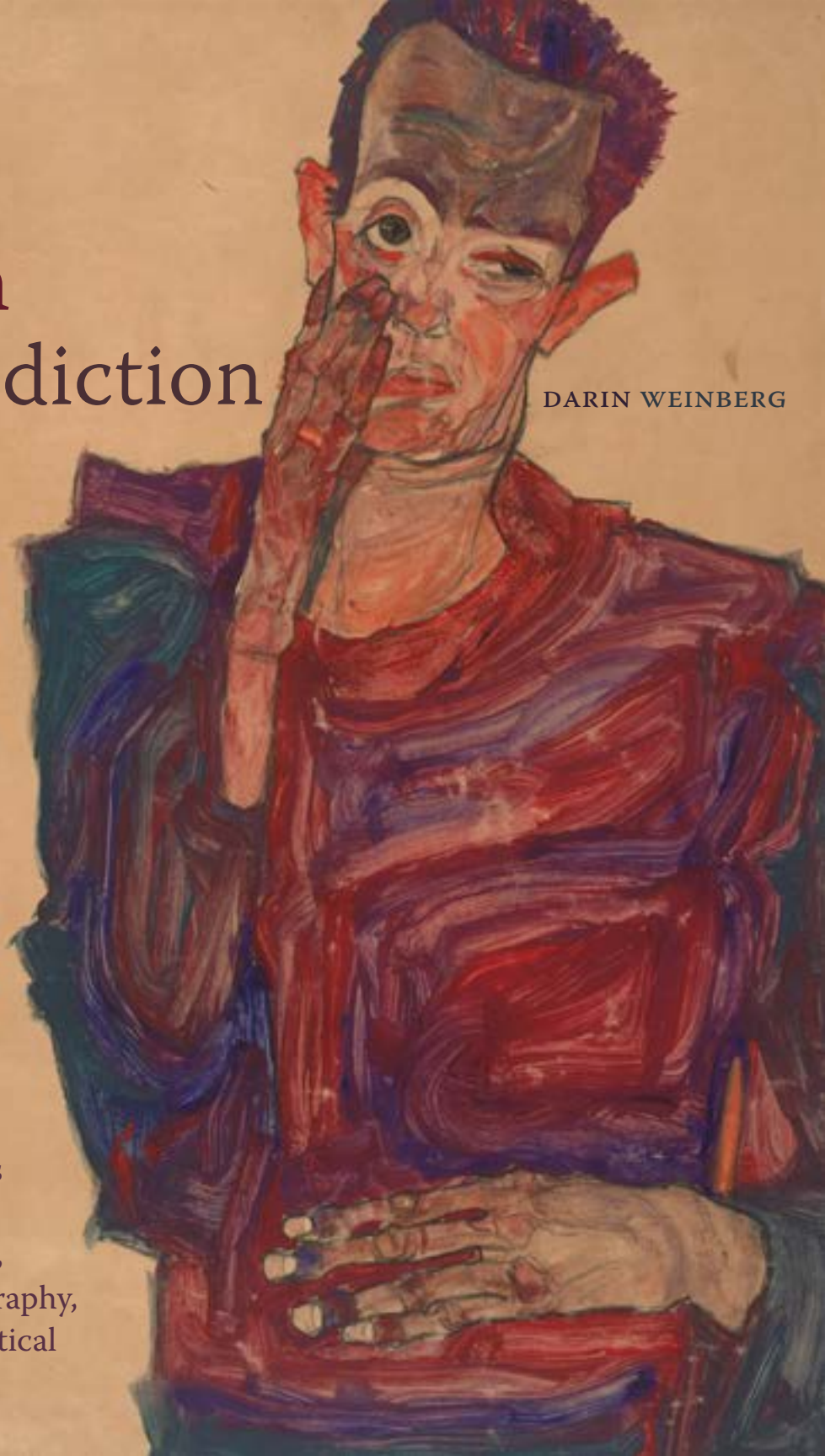


On Addiction

DARIN WEINBERG

Insights
from
History,
Ethnography,
and Critical
Theory



On Addiction

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Duke University Press
Durham and London 2024

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Printed in the United States of America on acid-free paper ∞

Project Editor: Livia Tenzer

Designed by Aimee Harrison and Courtney Leigh Richardson

Typeset in Warnock Pro by Copperline Book Service

Library of Congress Cataloging-in-Publication Data

Names: Weinberg, Darin, author.

Title: On addiction : insights from history, ethnography,
and critical theory / Darin Weinberg.

Description: Durham : Duke University Press, 2024. |

Includes bibliographical references and index.

Identifiers: LCCN 2024003244 (print)

LCCN 2024003245 (ebook)

ISBN 9781478030829 (paperback)

ISBN 9781478026587 (hardcover)

ISBN 9781478059813 (ebook)

Subjects: LCSH: Drug addiction—Social aspects. | Substance

abuse—Social aspects. | Drug addiction—Psychological

aspects. | Substance abuse—Psychological aspects. |

Drug addiction—Moral and ethical aspects. | Substance

abuse—Moral and ethical aspects. | Addicts—Social

conditions. | BISAC: SOCIAL SCIENCE / Sociology / General |

PHILOSOPHY / Movements / Critical Theory

Classification: LCC RC564 .O523 2024 (print) |

LCC RC564 (ebook) | DDC 362.29—dc23/eng/20240509

LC record available at <https://lcn.loc.gov/2024003244>

LC ebook record available at <https://lcn.loc.gov/2024003245>

Cover art: Egon Schiele, *Self-Portrait with Eyelid Pulled Down*,
1910. Chalk, brush, watercolor, and body color on brown
packing paper, 44.3 × 30.5 cm. Albertina, Vienna.

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PREFACE

The chapters that follow are based on a selection of essays I've written over the past twenty-five years or so. They share their earliest origins in my PhD research at UCLA in the 1990s, which was conducted primarily under the guidance of Mel Pollner, Bob Emerson, and Harold Garfinkel and culminated in the book *Of Others Inside: Insanity, Addiction, and Belonging in America*. That said, though, and as might be imagined, my thinking has continued to evolve during this time. More importantly, the chapters that follow have all been written not simply as mere extensions or elaborations of themes I developed in that book but in direct response to a range of different debates that have been influential in addiction studies since that time, in the social sciences and beyond.

To the extent they have been crafted in the first instance as constructive contributions to a range of different debates, they are better understood as distinctly local products of these debates themselves rather than as derivatives of a fixed epistemic orthodoxy, theoretical outlook, or method of investigation. However, as I seek to make clear in the introduction, this does not mean they aren't supplementary to one another, mutually implicative, and mutually reinforcing. They certainly are. But as I also seek to make clear in the introduction, this should not be understood to reflect an orthodox commitment to one scientific paradigm or another but as a historically and culturally specific social achievement, an achievement forged under, and with respect to, particular institutional and intellectual conditions outside of which this achievement has very little meaning.

Indeed, the primary objective of this volume is to make the case that addiction science has been widely hobbled by fixed axiomatic commitments

predicated on one or another established scientific paradigm, methodology, epistemology, or rationality. More specifically, I argue it is precisely a widespread commitment to their respective axiomatic orthodoxies that has often caused both social and medical scientists to find understanding addiction as a loss of self-control so elusive. Despite a robust cross-disciplinary consensus that the loss of self-control is the defining criterion of addiction, neither the social nor the medical sciences have made much headway in adequately providing for what in the world this really means to people.

Because they tend to see people as intrinsically self-interested cost-benefit analysts, social scientists have struggled to avoid also theorizing addiction and recovery from addiction as products of voluntary cost-benefit calculations. But if addiction is voluntary and rational, why not manage it with ordinary rewards and punishments, incentives and disincentives, rather than some kind of therapy? Conversely, because they tend to see human life as bio-mechanical, medical scientists have struggled to avoid theorizing addiction and recovery from addiction in biologically reductionist terms that provide rather poorly for the lived experiences of self-control, its loss, or its recovery among addicts themselves. The following chapters are devoted in different ways to clarifying what it actually means for addicts to exercise self-control, to lose it, or to once again recover it, and especially what these mean to addicts themselves.

More broadly, the chapters collected here reflect my efforts to expand the scope of how we think about addiction beyond generalizations regarding its neurological, psychological, or sociological substrates and into a more specific and particularist appreciation of the understandings that can be gleaned from historical, ethnographic, and critical theoretical forms of investigation. This is decidedly not an effort to displace orthodox orientations to addiction science but rather to supplement them and to contextualize them. As a sociologist, I have long believed that much novel insight can come not only from attending to the historical and ethnographic realities that yield addictions themselves but also by attending, reflexively, to the historical and ethnographic realities that have shaped our own work as addiction scientists as such and in all our myriad guises.

This exercise has important consequences not only for addiction scientists but also for addiction counselors, politicians, policymakers, friends and families of addicts, addicts themselves, indeed everyone who would hope to foster therapeutic interventions over criminal prosecution and prohibition. If we are to genuinely help and empower people to overcome their addictions, we must understand in detail what addiction and recovery mean to them and

why. And if we are to foster therapeutic over punitive interventions at the level of culture, law, and policy, we must be resourced with arguments that persuasively specify in detail what we are talking about and why. This has not yet been as effectively accomplished as I believe the following chapters allow. Moreover, I have come to believe that the limitations of received addiction science in this respect have deep roots in the histories of the disciplines devoted to the study of addiction. Therefore, our efforts must attend to these roots and we must be prepared to radically revise many of our most cherished assumptions concerning the sciences of addiction. And, more specifically, we must be prepared to radically revise many of our most cherished assumptions concerning things like the nature of our bodies, ourselves, our environments, and the diverse relationships we understand to connect these things to one another. It is precisely such revisions the reader will find in this book.



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ACKNOWLEDGMENTS

Over the course of writing the chapters that comprise this book I have been influenced in many different ways by a broad collection of friends and colleagues, many of whom write specifically about addiction and many of whom do not. In alphabetical order, I would like to gratefully acknowledge the intellectual debt I owe to Pertti Alasuutari, Tammy Anderson, Doug Anglin, Patrick Baert, Howard Becker, Joel Best, David Bogen, David Bolton, Philippe Bourgois, Craig Calhoun, Nancy Chodorow, Peter Conrad, Fay Dennis, Cameron Duff, Griffith Edwards, Bob Emerson, Gil Eyal, Kathryn Fox, Suzanne Fraser, Harold Garfinkel, Erich Goode, Emile Gomart, Teresa Gowan, Robert Granfeld, Monica Greco, Jay Gubrium, Nick Heather, Matilda Hellman, John Heritage, Jim Holstein, Peter Ibarra, Bruce Johnson, Annemarie Jutel, Helen Keane, Larry King, John Kitsuse, James Laidlaw, Mike Lynch, Doug Maynard, Gale Miller, David Moore, Sheigla Murphy, James Nicholls, Andrew Pickering, Mel Pollner, Geoff Raymond, Craig Reinerman, Gerda Reith, Robin Room, Marsha Rosenbaum, David Rudy, Joe Schneider, Bryan Turner, Nicole Vittelone, Scott Vrecko, Ivan Weinberg, and Phil Withington.

It has been an absolute pleasure to work with Elizabeth Ault and Benjamin Kossak at Duke University Press throughout the review process. I would also like to thank Livia Tenzer, my project editor at the press, for her oversight of the production process. The book is now a much more lucid and readable text thanks to her efforts. Thanks also to Aimee Harrison for her inspired artistic design of the book and to Courtney Leigh Richardson for shepherding it to the finish line.

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INTRODUCTION

The philosopher Ludwig Wittgenstein once suggested that his writing style often involved coming at a collection of problems from different analytic angles and thereby revealing their multiple theoretical facets as well as their multifaceted relationships with each other. Something like this logic is behind my own argument for the value of bringing these writings together into a single volume. They exhibit more than twenty-five years of my reflections on various aspects of the social nature and social explanation of addiction and the history of others' important considerations of these questions. However, taken together they also exhibit the intellectual gestalt that unites them much more effectively than any of them considered on their own could possibly be hoped to. The fact that these essays are supplementary to one another, mutually implicative and mutually reinforcing in a variety of ways, grounds my argument that the whole of this collection is greater than the sum of its parts.

More specifically, Isaiah Berlin famously distinguished between foxes and hedgehogs in his only slightly whimsical account of the intellectual styles of major thinkers in the Western philosophical canon. I hope readers will agree that these essays convey something of my aspiration and, more substantively, the specific collection of techniques I have adopted, to endeavor to forge a distinctive union between these two styles of thought. For those unfamiliar with Berlin's distinction, it is essentially a contrast between scholars, foxes, who seek to provide reflections on a variety of specific themes, and hedgehogs, or those who seek to tackle one particular major theme. On the one hand, these essays cover a fairly broad collection of topics: the sociological

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canon; key sociocultural contexts within which major chapters in addiction science took shape; addiction, experience, and the body; the interface between medical and social understandings of addiction; posthumanism and addiction; and others. On the other hand, these essays all reflect an enduring meditation on the question of how we might more adequately provide conceptually for addicts' putative alienation from their actions and experiences or their loss of self-control to addictions and the ethical ramifications thereof.

This chapter provides a holistic account of the argument that links the following chapters into a coherent, if multifaceted, intellectual position concerning the social nature and social explanation of addiction. The argument is fundamentally focused on briefly describing how later chapters serve to dissolve various antinomies that have long limited research not only in the social sciences of addiction but throughout the addiction sciences more generally. As will be seen, these antinomies include those that oppose free will to determinism, mind to body, ethics to science, rationality to emotion, culture to nature, particular to universal, practice to theory, subjectivism to objectivism, micro to macro levels of analysis, and presentist and historicist orientations to analysis.

In addition to dissolving antinomies that have long fettered research on addiction, the book is devoted to the allied project of forging syntheses, most centrally among history, ethnography, and critical theory but also between the clinical and the social sciences. This chapter demonstrates how addiction provides an ideal empirical vehicle for the articulation of these syntheses. To the extent it is understood to entail a loss of self-control over one's behavior, addiction requires an intellectual framework supple enough to provide for movements into and out of self-control, the various social and natural processes that may influence these movements, the historical contexts within which these topics have variously become matters of widespread concern, and the ethical ramifications that follow from taking these matters seriously. At its core, the framework I defend combines an ethnomethodologically informed, posthumanist orientation to the history and sociology of science and clinical care with recent insights drawn from the anthropology of ethics. However, it also integrates insights from a variety of other relevant lines of inquiry, including analytic philosophy and the sociology of emotions. In addition to facilitating achievement of the intellectual objectives outlined here, these orientations to research highlight the variable exigencies that confront and constrain self-governance, science, and clinical work in particular cases without thereby reducing these to mere effects of those exigencies.

Free Will and Determinism

As many of the following chapters note, mainstream addiction science is today largely polarized between, on the one hand, those who argue that addiction is a brain disease biomechanically caused by pathological neuroadaptations to prolonged exposure to addictive drugs or activities and, on the other hand, those who argue that addiction is a form of voluntary activity freely engaged by those who are called addicts (see Heather et al. 2022).

Brain disease scientists highlight the clinical facts that addictions cause immense suffering and often defy the efforts of addicts themselves, their significant others, and clinicians to make sense of them as freely engaged activities. They further note the results of laboratory research that show in some considerable detail the kinds of structural and functional changes that brains undergo as a result of exposure to drugs and other addictive substances or practices. Finally, they insist that it is unethical to punish people for behavior they cannot control and that the only ethical remedy for addiction is the provision of clinical care.

Those who argue that addicts do not exhibit a loss of self-control point to the facts that addiction appears to be incentive sensitive, or at least to some extent consistent with cost-benefit calculations. They insist that the language of disease stigmatizes and disempowers people with drug problems, suggesting they are incapable of overcoming their problems without professional medical intervention. And they point to the ubiquity of controlled drug use, the fact that many addicts “mature out” of their addictions without clinical intervention and that drug problems appear to be fundamentally linked to the social contexts in which people live. While they consistently oppose blaming addicts for their problems, choice theorists are less clear about how exactly this is to be avoided if addiction is a free choice (see Berridge 2022).

This antinomy between free will and determinism in addiction science stems from the fact that both disease and choice theorists seek to provide generic models of addiction. This prevents them from theorizing the labile movements into and out of self-control that are the hallmark of addiction and recovery in practice. Disease theorists, for their part, are often axiomatically blocked from taking freedom seriously by their biomechanically reductionist orientation to explanation. Conversely, choice theorists often struggle to articulate a persuasive justification for suspending default tendencies to hold ourselves and one another ethically accountable for our actions. This is because they are too often committed to the idea that all behavior not caused by brute physical force is necessarily free. The “addiction as akrasia” thesis

comes closest to addressing these limitations in mainstream addiction science but because it too is cast in general terms, it cannot adequately provide for contingent movements into and out of self-control in actual cases.

I argue that by drawing upon theoretical resources provided by Michel Foucault, Harry Frankfurt, and Donald Davidson, these problems can be effectively overcome. Without fully rehearsing it in detail here, this argument shows how Foucault's thought on what he called "practices of freedom" furnishes some basic theoretical resources with which to capture the particularity of personal freedom and recovery from addiction in practice. Conversely, I show how Foucault's thought also provides for an exterior to ethical subjectivity that may occasionally intrude upon our lives in practice, thereby rendering our actions comparatively insulated from ethical accountability. I also show how Foucault's thought can be usefully refined in this regard by recourse to Frankfurt's ruminations on the practicalities of free will (or distinguishing in practice those mental contents "internal" to the self and self-control from those that are "external," harmful or threatening to particular selves). The argument is further refined with recourse to Davidson's famous reflections on mental compartmentalization, the principle of charity, and the difference between reasoned/willed action and behavior that is causally determined by mental structures but is nonetheless unreasoned/unwilled. In sum, the argument demonstrates that in practice freedom, addiction, and recovery from addiction are best understood in terms of the details of particular people's lives rather than generically through the generalizations found in most mainstream addiction science.

Mind and Body

The intellectual context in which the first major sociological contribution to the study of addiction was formulated heavily encouraged adoption of a rather rigid dichotomy between bodily and mental perception. In his classic sociological theory of addiction, Alfred Lindesmith argued that human perception is divided into the body's brute response to physical stimuli and the mind's active, conscious, and symbolic interpretation of that stimuli. Hence, for addiction to arise, addicts must reflectively interpret their physiological withdrawal symptoms specifically as withdrawal symptoms and self-consciously use heroin to alleviate those symptoms. Much like the choice theories mentioned previously, this argument makes it difficult to understand how a learned pattern of perception and behavior could ever be experienced

as beyond the addict's control—that is, suffered rather than chosen. And also like other choice theories, Lindesmith's approach makes it difficult to understand why addiction should warrant suspension of our default tendencies to hold ourselves and one another ethically accountable for our actions.

In part to overcome these challenges, I have adapted Pierre Bourdieu's concept of *habitus*. This concept refers to embodied practical and perceptual dispositions that are acquired through practical engagement with particular social environments and facilitate competent participation in those environments. My argument has been that when some of these dispositions come to seriously conflict with dispositions with which actors are more inclined to self-identify, they come to be experienced in Frankfurt's terms as "external" to the self and as afflictions thereof. This approach has the consequence of shifting theoretical attention away from linguistic dispositions to symbolically interpret brute physical stimuli, and the mind-body dualism thereby assumed, and toward the specific practical environments in and for which people come to learn to use drugs or engage in prospectively addictive activities in practice. What once might have been widely known as reflective mental activities are here understood as largely prereflective, prediscursive, embodied, environmentally shaped and situated habits. The body ceases to be understood as an objective biomechanical system about which we might subjectively learn and is specified instead, in line with Bourdieu's and Bruno Latour's (2004) groundbreaking approaches, as a linked set of mutable media through which we subjectively learn and subjectively develop.

In a particularly incisive study of the "odor kits" that perfume makers use to train "noses" to detect progressively subtler aromatic contrasts, Latour (2004) makes a strong empirical case for what I call psychosomatic subjectivity. Latour goes a considerable distance toward creating a conceptual space within which addiction might be construed as an acquired but nonetheless fully embodied form of subjectivity. By retaining a focus on the subjective or lived sentient body, Bourdieu and Latour accommodate much of what choice theorists seek to achieve by narrowing the distance between addiction and normal learning processes. But although they write of the multiplicity of environments within which bodies subjectively learn to be affected, they do not explicitly address the multiplicity of the body itself—as not just an articulated medium for learning to be affected but a linked set of media for doing so. This limits their sensitivity to the potentials for embodied conflicts and/or afflictions like addiction.

The tendency of mainstream addiction science to seek ethically neutral generalizations regarding addiction and recovery systematically distances it from the details of particular people's lives. While mainstream addiction science is generally cast as ethically detached and universal, therapeutic work with addicts instead tends to require particularistic orientations to the aspirations, attitudes, challenges, opportunities, and aptitudes of specific addicts and an ethical engagement with them as collaborators in recovery as opposed to scientific or ethical detachment. All my work has been attentive to the need to allow scientific space for the specificity of particular people, their communities, and their histories as well as being emphatically critical of the notion that science can, even in principle, be ethically disengaged.

On the historical front, I have been more concerned to write genealogies of particular fragments of the present than general narratives concerning the present or the past. This has involved comparative attention to similarities and differences among diverse times and places more than efforts to unearth their shared essences. Similarly, on the ethnographic front, I have sought to highlight similarities and differences among diverse communities and, indeed, the diversity of those who belong to these communities more than generalizations regarding them. Some may wish to argue that the only alternative to scientific generalizations are unrepresentative and ad hoc anecdotes and that the only alternative to ethical detachment is bias. I do not share this wish, and I believe the attention given to diversity, contingency, and particularity among proponents of the comparative case-study approach to historical and ethnographic empirical research is every bit as scientific as research cast in terms of general laws and/or causal mechanisms (see Calhoun 1998; Kandil 2022). I also argue that ethical engagement is, in practice, an inevitable feature of all scientific research and is not necessarily equal to bias.

As I have said, the framework I defend combines an ethnomethodologically informed, posthumanist orientation to the history and sociology of science and clinical care with recent insights drawn from the anthropology of ethics. Whereas received research usually casts rules only as devices for regulating social action, ethnomethodology has long highlighted how, by the active observance and invocation of rules, social action is rendered at all intelligible as reasoned action, let alone conventional or unconventional (see Garfinkel 1967; Heritage 1984; Maynard and Heritage 2022). Moreover, ethical accountability is not occasioned only intermittently when specifically ethical rules are violated but is an indispensable feature of the coordination of social

interaction wherever it is found. Some strands of posthumanist scholarship provide usefully detailed understandings of the real-time constitution of both reasoned human and unreasoned nonhuman agency in practice and hence a nuanced scientific orientation to how in practice we might account for movements into and out of self-control and, in turn, movements into and out of ethical accountability (see Weinberg 2005). This kind of research highlights how the symptoms of addictions and indeed the disorders those symptoms indicate are variously constituted not in people's minds or brains considered in social isolation but in the details of ongoing social interaction.

More specifically, it shows that people's rights and/or obligations to such things as work, hospitalization, social services, trust, or the forbearance of their associates are in practice established not once and for all and with respect to fixed legal, medical, psychiatric, or social identities but provisionally through the situated evaluations and reevaluations of their myriad accountabilities, abilities, and disabilities across the range of settings within which they participate. I believe this is a crucially important scientific insight with far-reaching ramifications for addiction policy. If we are to claim that people diagnosed with addictions are entitled to special assistance, it is indispensable that we be able to both warrant that special assistance and empirically demonstrate the nature of their special needs. The proposed scientific framework transcends the contextually indiscriminate models of disorder provided by medicine and the "psy-" professions to demonstrate the social interactional constitution of disability across diverse settings. It thereby provides a more empirically nuanced linkage of specific addictions and the myriad types of social assistance they might be held to warrant. Though focused in the first instance on the detailed scientific analysis of people's practices, this type of research also promises insights of considerable value to those seeking to empirically ground addiction treatment, policy, and ethical reform agendas.

Rationality and Emotion

My earliest forays into considering the relationship between rationality and emotion were focused on symbolic interactionist accounts of addiction. In many of the following chapters, I develop a critique of the mind-body dualistic accounts of meaningful emotions, like desire or craving, often proffered by symbolic interactionists. This critique is based on the argument that these accounts effectively eviscerate emotion by construing its meaning as wholly cognitive and disembodied. As I show, by requiring that the meaning of emotion be uniformly cast in terms of reflective, symbolic, and rational interpre-

tations of brute physiological experiences, these accounts fail to provide for meaningful emotions that have not been consciously interpreted or rationally evaluated and, hence, that might sometimes be seen to challenge our rational reflections. As an alternative, I conceptualize emotions as embodied, prereflective, and prediscursive dispositions to perceive and/or act in particular kinds of ways that we have learned through participation in various practical contexts. Whether or not we self-identify with our emotions, or indeed any of our habituated orientations to experience and activity, is not a fait accompli. Instead, as the philosopher Harry Frankfurt has argued, it is a matter of second order or meta-evaluation.

Symbolic interactionist accounts that speak to the role of emotions in addiction emphasize the mental interpretation of physiological experiences to an extent that sometimes obscures how the meaning of addictions is shaped in the first instance not by symbolic interpretations but by the ways we have learned to use drugs and other putative objects of addiction in particular practical contexts. However, the symbolic interactionist studies that speak to the role of rationality in addiction, much like those in anthropology, tend to be rather modest in their claims—casting rationality largely in terms of culturally relative cost-benefit analyses. This might also be said of many of the choice theorists of addiction. Most have now abandoned the idea that addictions are no more than rational choices based on stable preferences. In place of orthodox rational choice theory, many have followed theorists such as George Ainslie (1992) in arguing that addicts hyperbolically discount future costs and benefits—that is, the greater the expected immediacy and potency of a reward, the more one becomes prone to forsake their longer-term plans and preferences.

However, there is a community of addiction researchers who have embraced a much more philosophically robust orientation to rationality as composed of “all things considered” judgments based on explicit, universal, acontextual, and rule-based criteria. As is discussed in depth in chapter 5, these researchers posit a dual systems approach to decision-making wherein the first system is one that is variously characterized as fast, automatic, habituated, directly responsive to external cues, impulsive, affective, unintentional, unconscious, and energy efficient; and the second is slower, deliberative, conscious, self-directed, rational, intentional, rule-based, decontextualized, and energy inefficient. These systems are often referred to as system 1 and system 2, and I follow this convention. According to this approach, the locus of self-control is uniformly specified in terms of the more or less rationally coherent, holistic, and deliberative decision-making system 2. These arguments, however, often do not provide sufficiently for the manner in which type 2 decision-

making processes are without exception based on foundations provided by type 1 processes. Not only are we sometimes prone to fetishize or repress our beliefs on the kinds of psycho-emotional grounds studied by psychoanalysts, but we may also distrust or dismiss the machinations of propositional rationality on other grounds as well. Indeed, as Wittgenstein (1953) taught us, conscious, rule-based deliberations are themselves always grounded in predis-cursive dispositional competences forged in what he called particular forms of life—that is, ecologically bounded fields of activity.

Culture and Nature

Closely related to the antinomy between mind and body is the antinomy between culture and nature. With specific respect to addiction science, the concept of natural reward as relevant to biological survival and reproduction has been fundamental to neurological research on addiction. Conversely, the concept of culture has been fundamental to social research on addiction. Due primarily to interdisciplinary and intradisciplinary struggles for prestige and influence in the universities of the early twentieth century, starkly binary ontological oppositions between culture and nature have been installed as foundational conceptual commitments throughout both the social and natural sciences (Weinberg 2014).

The best-known source of this antinomy in the annals of social science methodology is the so-called *Methodenstreit*, or dispute over method, which embroiled some of Germany's finest social thinkers in a debate regarding the particular nature of social life and its amenability to the methods of the natural sciences. Thinkers such as Wilhelm Dilthey and Max Weber became figureheads for an intellectual movement that sought to decisively distinguish the social from the natural sciences on the grounds that their subject matters were irreducibly unique. Scholars argued that whereas the natural sciences study the inanimate universe and “lower life forms,” social scientists study people. Unlike the behavior of the inanimate universe or lower life forms, human behavior is here said to be caused not by uniform laws but by sentient, creative subjects imbued with a cultural understanding of the worlds in which they live. Hence, the effort to grasp the nature of social life must begin with an appreciation of one's research subjects' own cultural understandings of their lives and circumstances.

Though over the years some social scientists have turned to Freudian and other psychodynamic theories, the more general trend has been opposed to presumptions of innate psychic processes (Chodorow 1999). Similarly, many

social scientists in the first half of the twentieth century grew disenchanted with behavioral psychologists' refusal to acknowledge the role of meaning and creativity in human action and experience (Camic 1986). As physically and psychologically deterministic understandings of human action and experience were repudiated, social scientists increasingly viewed their subject matter as a domain unto itself, fundamentally irreducible to forces that were not themselves also cultural (Blumer 1969; Geertz 1973). These processes had immediate bearing on Lindesmith's formulation of addiction. They have also had fundamental influences on the work of symbolic interactionist, cultural anthropological, social psychological, economic, and philosophical research on addiction and drug use.

To be sure, the isolation of debates regarding the cultural dimensions of human life from those regarding our physical and psychic inheritances was never total. And, indeed, this isolation was always less pervasive in anthropology, where the collegial commingling of social and natural scientists was widely institutionalized through their sharing of a single academic department. But even when their research efforts are collaborative, cultural and physical anthropologists have always stood in uneasy analytic relation to one another. Though both strive to illuminate the causes and characteristics of the human condition, their theories and methods have often seemed to defy rigorous comparison with one another. Hence, the more popularly traveled debates on both sides of this antinomy have been those that do not seek to disturb the culture/nature divide (Latour 1993).

If ethnographers, historians, and other humanists have spoken to the natural dimensions of the human condition, they have overwhelmingly focused on the symbolic meaning and cultural function of natural objects rather than the details of their characteristic causal effects on human action and experience. As is argued in many of the following chapters, this has often imposed on social scientists a crippling antinomy between biomechanically deterministic understandings of addiction that cannot provide for the subjective discretion and, indeed, the genuine freedom of nonproblematic drug users or recovering addicts, on the one hand, and, on the other hand, an axiomatic humanist subjectivism in the social sciences of addiction that cannot escape an invariant commitment to the view that human action and experience are always, by definition, culturally meaningful and self-governed. Neither of these approaches can provide for what I have called an intellectual framework supple enough to capture movements into and out of self-control. I have sought to overcome the limitations of this axiomatic antinomy by recourse to the tradition of posthumanist social thought.

As we have seen, humanists tend to insist that the irreducible atoms of social life are inevitably human subjects—integrated, deliberative agents possessing interests and cultures that endow their worlds with meaning, value, and distinctive rationalities. Posthumanists worry that this imagery reifies human nature and denies the possibility of progressively reformulating or even modifying what it is to be human (Haraway 1991; Hayles 1999). Contrary to humanists, posthumanists do not treat human nature as intrinsically immutable but as something dynamically and diversely constituted through different configurations of practice within which actors, human or otherwise, mutually shape one another (Knorr-Cetina 1997; Latour 2005; Pickering 1995). Finally, eschewing reification, posthumanists historically and ethnographically examine situated practical action directly for clues as to how things are realized (literally made real) in any actual case.

Particular and Universal

Many scientists have long aspired to produce findings that are universal. More specifically, addiction science has routinely sought to argue on behalf of universally valid concepts of such things as rationality, the self, self-control, self-interest, choice, natural reward, neuroadaptations, and many others. My own work has been predicated on the belief that this approach is not so much flawed as incomplete in a variety of important respects. More specifically, because universals, by definition, do not change through history and thus appear immune to historical explanation, they tend to invite a disregard for history not only as an important source of influences on the phenomena we seek to understand but also as an important source of influence over the theoretical resources we adopt and with which we ourselves seek to construct our understandings. In short, they foster a blindness to the facts that both human behavior (including addiction and recovery) and our efforts to understand and/or explain human behavior are invariably embedded in and responsive to historical trends.

I should be clear that my effort has by no means been to critique the scientific aspiration to universality as such but to offer a reminder that even theories that proffer claims to universality are themselves perspectival—that is, they come from particular positions in history, including the history of the scientific disciplines within which their purveyors have been trained and to which they seek to contribute. Conversely, though, not even the most particular of events can be explained exclusively in terms of their particularity. To the extent we wish to understand how these events came about, we must situate them in more general, perhaps even sometimes universal, causal contexts.

Indeed, I have always argued that the generalizing sciences have certainly made important contributions to our understanding of addiction and recovery. However, it must not be forgotten that the loss and recovery of self-control take profoundly diverse forms. Both addiction and recovery are deeply personal matters that behoove close consideration of the particular aptitudes, opportunities, aspirations, and desires of particular people. To only briefly touch on some of the anomalies introduced by an overemphasis of universalizing in addiction science, we can begin by noting the now indisputable scientific fact that not everyone responds in the same way to drugs and other putative objects of addiction. Universalistic references to the intrinsically rewarding experiences of ingesting certain chemical compounds have been shown to be hopelessly callous to the diversity of effects drugs actually have not only on different people but also on the same people under different circumstances. Further, as is argued in several chapters, generic specifications of such matters as the reward circuitry of the human brain, differences between natural and unnatural rewards, and the nature of self-control, among others, have all been shown inadequate to the task of empirically understanding addiction and recovery in practice.

Theory and Practice

Like most science, addiction science is often devoted to transcending lay biases in the name of a more rigorous and epistemically legitimate understanding of the phenomena it considers. To note only one very prominent example, this can be seen in the almost complete consensus among addiction scientists that we must transcend the empirically erroneous lay bias that addicts are simply immoral and deserving of punishment rather than care. Though meritorious, this aspiration has too often been undergirded by a presumption that science is capable of completely transcending history and arriving to a space of purely theoretical reflection that is influenced only by ahistorical and universal standards of logic, evidence, and/or scientific method. At least since Karl Marx penned his famous “Theses on Feuerbach,” critical theorists have taken issue with the presumption to pure theoretical reflection devoid of historical influence or practical interests. Marx insisted that scientific theorizing does much more than ethereally reflect on the nature of reality. It is, for better or worse, a product, feature, and consequential producer of reality. Hence, for most Marxian critical theorists, the idea that knowledge could ever be “detached” or “disinterested” is at best a mistake and at worst a ruse

designed to mask the complicity of intellectual authority with political and economic power.

The ideas that reason and knowledge are not detached and disinterested but historically conditioned and materially embodied forms of practical engagement with the world are also central to another influential form of critical theory, American pragmatism. The pragmatists argued that knowledge production, scientific or otherwise, should be freed from the misconceived dream of transcending the human condition. Epistemic standards should instead reflect our much more realistic concerns to merely improve the human condition. By pragmatist lights, scientific theorizing consists not in developing what the philosopher Richard Rorty (1979) called a mirror of nature but in developing habits and practical skills that promote the good of the individual and society. Moreover, grounded as they are in the pursuits of actual communities, our theories and the epistemic standards by which they are evaluated are best understood with reference to the interests and activities of those for whom they hold rather than as abstract, universally valid principles. Pragmatists advise us to expect our epistemic terms of reference to be multiple and to change along with the changing conditions under which they are applied. The comparative evaluation of competing knowledge claims is not forsaken but nested deeply within the specific practical contexts within which it must inevitably be accomplished.

It is only under the specific conditions of their practical use that we may judge the adequacy of our theories, the standards by which they are judged, or the adequacy with which they have been applied in any given case. Insofar as our theories and epistemic standards are devised, learned, and applied in the course of specific practical activities, it follows that, in the first instance, those theories and standards are tied to those activities rather than the particular people who participate in them. Whereas philosophically foundationalist epistemologies have tended to cast knowing as a relationship between an isolated rational mind (or linguistic proposition) and an enduring and self-consistent natural world, critical theorists with an interest in praxis tend to cast knowing as a matter of observably competent performance within a particular domain of practical activity. Epistemic standards cease to be seen as fixed universal rules for linking “the mind” or “language” with a preformed natural world and come instead to be seen as provisional and socially situated rules for defining and identifying degrees of performative excellence.

Because their valid definition, identification, and practical engagement are inevitably predicated on these provisional and socially situated rules, the on-

tological characteristics of both knowing subjects and known objects lose their fixity and universality. Whatever characteristics subjects and objects (e.g., selves and their addictions) are observed to possess are held to exist only in and through the embodied activities constituting the particular practical domains in which they are observed. This theoretical orientation suffuses all the following chapters. In chapter 4, for example, I show how the addictions held to afflict participants in three recovery programs were given empirical form and causal force only in and through the distinctive patterns of therapeutic practice found in these programs. Participants' addictions were often identified and engaged in ways that bore no evident relationship to formally codified nosologies like the *Diagnostic and Statistical Manual of Mental Disorders* (DSM) of the American Psychiatric Association, and assessments of both their presence and absence in people's behavior were dictated only by the moral economy of program practice. Genetic, neurological, and other kinds of biomedical theories and evidence that might be used to great advantage in other recovery settings had absolutely no part in it. This is not to argue that ontology ought to be reduced to epistemology. Rather, it is to argue that neither our various ontologies nor our various epistemologies should be divorced from the historically situated social practices within which they arise, develop, and are given meaning and value.

Subjectivism and Objectivism

At least since René Descartes decisively cleaved *res cogitans* from *res extensa*, Western intellectuals have felt a strong compulsion to categorically distinguish the ontology of subjectivity from the ontology of objectivity. For Descartes, epistemic certainty was attained through the withdrawal of our reflections from both tradition and the evidence of our senses. Because both of these sources of information are capable of deceiving us, the achievement of genuinely valid knowledge required a skeptical introversion into a realm of purely subjective critical reflection. Following Descartes's conceptual disengagement of mind from body, the next major philosophical statement concerning the relation between subjectivity and objectivity was produced by John Locke. Locke effectively inverted Descartes's privatization of epistemic legitimacy by casting the human mind as at birth a *tabula rasa*, or blank slate, that acquired valid knowledge only through public dialogue concerning the evidence of our senses. While intrinsically fallible, the public tribunal of reason was nonetheless for Locke the most credible source of valid beliefs.

Locke's fallibilism has not sat well with a number of Western philosophers and scientists who have sought a more intellectually decisive procedure for separating fact from fiction. Beginning with Immanuel Kant, philosophers have long sought to overcome the apparently intransigent problem of producing objective truth claims that are invulnerable to the cacophony of public debate. This is certainly true of most addiction scientists. For his part, Kant sought to show that philosophy could produce a system of purely logical propositions that are true by definition (e.g., all bachelors are unmarried) rather than empirical, or true by virtue of their relation to the objective world (e.g., all men are mortal). To the extent science trades primarily in producing the latter form of claim, it is vulnerable to being disproved on the basis of new empirical evidence. Following Kant, many philosophers have claimed that because logic is not contingent on the available empirical evidence, it can provide universally valid guidance as to both the basic requirements any sound investigation will entail (e.g., rules of statistical inference) and what it is reasonable to seek to discover (e.g., natural laws rather than ethical facts). This project was also heavily influenced in the twentieth century by the logical positivists.

Unfortunately, though, while these schools of thought provide procedural imperatives for research, they nonetheless remain reliant on categorical distinctions between the ontology of subjectivity and the ontology of objectivity. The ontology of the objective world is cast as mind-independent and therefore demands that we somehow forge an adequate epistemological bridge between subjective perception and belief, on the one hand, and a mind-independent objective universe on the other. Because they have radically severed questions of epistemology from questions of ontology, those who have followed in the Kantian tradition have ultimately rendered the ontologically real epistemologically unknowable. The critical theoretical traditions I have followed reject this subject/object antinomy in favor of an ontology of emergent collective practice. According to these traditions, the ontology of objectivity is conceived in intersubjectively practical terms as the worlds we produce and/or discover together—that is, invariably through the activities we share with other members of particular cohorts. This understanding of the relationship between subjectivity and objectivity suffuses the following chapters.

In place of the metaphysical chasm Kantians have posited between a putatively mind-independent objective reality and subjective, including scientific, perception and agency is inserted the perceptual habits Harold Garfinkel held constitutive of what he called the natural attitude. Habit indispensably fur-

nishes a pretheoretical empirical world of perceptible ontological topics irreducible to the analytic resources we use to theoretically account for them. It is therefore prospectively useful to discursive knowledge production in a way that a mind-independent world, because it is by definition unperceived, can never be.¹ As the acclaimed historian of science Lorraine Daston (2008, 99) has argued, “It is habit that makes perception of a world possible. . . . The novice sees only blurs and blobs under the microscope; experience and training are required in order to make sense of this visual chaos, in order to be able to see *things*.” Citing the biologist Ludwik Fleck’s groundbreaking contributions to our understanding of the ontology of disease, Daston (2008, 100) writes,

For Fleck, learning to see like a scientist was a matter of accumulated experience—not only of an individual but of a well trained collective. The fault line in epistemology did not run between subjects and objects, the great Kantian divide, but, rather, between inexperience and experience. Unlike the neo-Kantians, who worried about how the subjective mind could know the objective world, Fleck was concerned with how perception forged stable kinds out of confused sensations. . . . Another way of putting this contrast is to say that Fleck was more interested in ontology than in epistemology.

Fleck’s attention to the collective orchestration of perceptual habit formation predates Garfinkel’s inauguration of ethnomethodology but resonates deeply with ethnomethodology’s attention to the collective orchestration of the tacit, taken-for-granted competences constitutive of what ethnomethodologists call membership. It should also be emphasized that by foregrounding members’ regard for one another’s observable competencies rather than the tacit perceptual habits these observed competencies reveal, neither Fleck nor ethnomethodologists need to view different members’ tacit competences as identical to one another. While it may be sensible to endorse Garfinkel’s observation that the intrinsic accountability of practical action fosters the acquisition and habituation of capacities to competently participate in shared practices, we need not assume these tacit capacities, or habits, take identical forms (S. Turner 1994). These practical and perceptual habits need only be sufficiently attuned to allow for meaningful collaboration. Disagreement over the ontological character of what we perceive under microscopes or otherwise remains, despite our differences, a form of meaningful collaboration.

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Micro and Macro

It has long been broadly held that whereas macro levels of analysis invoke structural causes of both large- and small-scale social action, micro levels of analysis drill down to consider the granular details of social interaction, largely sidestepping structural causes in their explanations and instead looking at social action as a negotiated process undertaken among subjective agents. Even among proponents of the brain disease paradigm, it is growing increasingly common to see acknowledgments of the importance of macro social variables like poverty, marginality, racism, homophobia, social cohesion, or community as important predictors of both the onset of addictions and recovery from them. These kinds of variables have long been the bread and butter of social scientific studies of addiction (Alexander 2008; Bourgois and Schonberg 2009; H. Levine 1978; Waterston 1993).

For example, as is explored in detail in chapter 2, both the historical and ethnographic literatures on drug and alcohol use have vastly enriched our acquaintance with the lived experience of drug use and addiction, and the extent to which it is inextricably entwined with broader economic, political, and cultural realities. However, as I argue throughout this book, this literature is considerably more silent as to how precisely we might best conceptualize addiction as a loss of self-control. Largely devoted to describing how *unproblematic* drinking and drug use can be interpreted as adaptive to local structural circumstances, this literature tends to overlook the sometimes seemingly self-destructive addictive aspects of drug and alcohol use (Douglas 1987; Heath 2012; Room 1984; Singer 2012). And most work specifically focused on addiction itself tends to foreground language and social structural deprivation. Some ethnographies suggest that addiction discourse be understood as what C. Wright Mills (1940) famously called “vocabularies of motive” furnished by, for example, addiction treatment clinics (Carr 2011; Davies 1992; Garcia 2010; Weinberg 2000a), while others highlight that putative addictions are often practical adaptations to the hardships of social structural deprivation and oppression (Bourgois and Schonberg 2009; Garcia 2010; Waterston 1993; Weinberg 2005). These studies vividly demonstrate the macro structural and cultural conditions under which people make their micro-level decisions about drug use, addiction, and recovery but rarely, if ever, explicitly consider the question of whether and how addiction reflects a loss of self-control.

While these insights valuably encourage more attention to how addictions can be remedied through social structural interventions, it is less obvious how they mitigate putative addicts’ ethical accountability for their specific

responses to the deprivations and oppressions they suffer. However, as is argued throughout this book, a therapeutic frame for addiction requires that we interpret putative addicts as somehow afflicted and therefore in need of care. Hence, warranting and implementing a therapeutic frame for addiction does not in the first instance require theories that serve only to explain the general causes of putatively addicted behaviors; it specifically requires theories that allow these behaviors to be, at least partially, ethically disowned. It is only by distinguishing the free agency of addicts' particular selves, their self-control, from the causal effects of their specific addictions that people might be simultaneously understood as amenable to therapeutic empowerment or emancipation from their addictions through recovery and somehow also afflicted by an addiction that justifies and demands such a therapeutic engagement in the first place.

Presentism and Historicism

The history and sociology of science are often framed with respect to whether they are presentist, historicist, or some combination of both. Presentist research with respect to both past and contemporary science is said to be largely extractive. That is, by presentist lights, science is read for its contributions, or lack thereof, to presently valued debates largely without reference to the biographical, intellectual, and social contexts that gave rise to its production. By contrast, historicist research is precisely concerned to situate science within the various biographical, institutional, cultural, economic, and moral contexts within which it was produced and to which its authors and audiences were at the time oriented and accountable. Over the past several decades, orthodox presentist research has been much maligned in the history and sociology of science. It is said to be Whiggish, teleological, or mistakenly devoted to the idea that science develops in a linear and progressive direction wherein the past must be judged as nothing more than a repository of preliminary successes and failures to achieve what we are now more successful in achieving. Historicists complain that not only is this approach hopelessly naive and inadequate to the task of providing for the actual historical evolution of science, but it also neglects the extent to which history, taken on its own terms rather than our own, can provide a wealth of resources with which to improve and enrich present science.

Science, both good and bad, is invariably marked by the moral and cultural climates within which it is conducted. However, due primarily to the moral and cultural climate within which addiction science is currently conducted,

many of us have too often lost sight of this. Instead of understanding current science within, and in light of, its moral and cultural contexts, many of us have sought more to extricate addiction science from its locations in history and to provide, in the words of Pierre Bourdieu (2004, 1), “trans-historical truths, independent of history, detached from all bonds with both place and time and therefore eternally and universally valid.” Contra Bourdieu’s aspirations, my own work has been consistently and resolutely opposed to the idea that science might be productively cleansed of its historicity.

However, this has not meant that I have sought to relinquish a claim to objectivity or a commitment to scientific progress in the present. My own view is that present debate can often be improved on by a greater critical historical appreciation of precisely how and why particular theoretical positions have variously gained ascendancy in both the past and the present. For example, in addiction science we must ask not only of the logical and evidentiary grounds supporting different theories but also what broader political and cultural factors have encouraged greater and lesser attention to the needs of addicts or their respective communities over time, or the political and cultural factors that encouraged optimism or pessimism regarding recovery from addiction. Such inquiry often serves to fruitfully remind us that without exception science is embedded in, and necessarily responsive to, complex and multivalent historical contexts that extend well beyond the demands of logic and empiricism (Jasanoff 2011; Longino 2002; Rouse 2002). Perhaps even more valuably, it serves to illuminate in critical and sociohistorical terms just how present debate has arrived at where it has.

Some Last Remarks

As readers might already have inferred, I disagree with those who suggest that history, ethnography, and critical theory are independent and autonomous intellectual pursuits bearing only occasional relevance to one another. In the mid-twentieth century, it was routine to distinguish narratives concerning particular elements of the past from narratives concerning particular cultures, subcultures, or institutions in the present and to distinguish both from theoretical narratives focused on the universal and enduring nature of society as such. Moreover, moral philosophy and theories of justice were also cast in universal terms that typically underappreciated the importance of particular historical and ethnographic contexts, or what Wittgenstein called “forms of life,” to the adequate defense of theories of the good and the just (Calhoun 1995; Laidlaw 2014).

I have instead followed the Marxian and pragmatist traditions in collapsing the theory/practice dichotomy and rendered theory (or theorizing) as a particular species of worldly and embodied practical action. Likewise, I have rejected one-sided determinist explanations that cast the practices available to ethnographic observation as mere epiphenomena of macro-structural dynamics like capitalism or institutionalized racism. As I have said, such reductions beg the question of our specific ethical accountabilities for the ways in which we have sought to contend with these macro-structural dynamics or, for that matter, with each other. Conversely, though, it is equally untenable to presume that collectively orchestrated social practices can be adequately understood without attention to the inequalities of power reproduced through macro-structural dynamics. Hence, I have sought to bring history, ethnography, and critical theory together as integrated facets of a holistic critical social science, always mutually implicative of one another in a variety of important ways.

Likewise, I have rejected the categorical distinction between the social and the clinical sciences. Many in addiction science categorically distinguish addiction medicine (as the clinical application of biomedical, largely neurological understandings of the nature and etiology of addiction) and the social scientific study of addiction (as the investigation of environments that foster addiction, recovery, or discourses thereof). As noted earlier, this stems largely from the overwhelming tendency in addiction science to conceptualize human biology and human social life dichotomously as two, and only two, wholly discrete and independently integrated ontological domains. One can see this dichotomy throughout the addiction sciences but it is particularly vividly exemplified in the neurological tendency to distinguish primary from secondary reinforcers of drug-using behavior, as is discussed in detail in chapter 6.

The Chapters in Brief

Chapter 1 provides a critical survey of sociological research on addiction. It begins with the seminal research of Alfred Lindesmith on heroin addiction and then proceeds through discussions of functionalist contributions, research that exemplifies what David Matza (1969) called the “appreciative” turn in the sociology of deviance, rational choice theories, and social constructionist approaches. It is confined to research on addiction in its original meaning as putative enslavement to a substance or activity rather than merely deviant or disapproved activity more broadly. As will be seen, though,

there is a ubiquitous and theoretically interesting tendency even among those who contend to be writing about addiction to slip into modes of analysis that effectively substitute questions regarding the social approval of an activity for questions concerning whether it is voluntary or involuntary. Hence, one purpose of this chapter is to begin to explore whether, and how, this slippage might be avoided.

As I noted previously, mainstream addiction science is at present widely marked by an antinomy between a neurologically determinist understanding of the human brain “hijacked” by the biochemical allure of intoxicants and a liberal voluntarist conception of drug use as a free exercise of choice. Chapter 2 contrasts these two contemporary discourses to two others that played vital historical roles in initiating both scientific and popular concern for addiction. These are the Puritan and civic republican discourses that dominated scholarly discussions of addiction in the early modern era. By comparing them to their early modern historical antecedents, this chapter seeks to reflexively explore and develop more intellectually sound and therapeutically relevant alternatives to the troubled attempts at universality and value neutrality now fettering debates in mainstream addiction science.

In chapter 3, the evolution of Alfred Lindesmith’s classic theory of addiction is analyzed as a product of the particular intellectual currents and controversies in and for which it was developed. These include the conflicts that pitted qualitative against quantitative sociology; the discipline of sociology against medicine, psychiatry, and psychology; and advocates of therapy for addicts against those who would simply punish them. By casting the meaningful experience of drug effects exclusively in terms of symbolically mediated mental representations of brute physiological sensations, Lindesmith’s theory posits an untenable dualism between mental and bodily perception that unnecessarily limits the explanatory scope of sociological research. As an alternative to this dualism, a praxiological approach to the meaning of drug-induced behavior and experience is proposed.

A growing trend in social research concerning illicit drug use has entailed suspending regard for conventional questions such as the etiology of drug problems and the outcomes achieved by assorted interventions in favor of focusing analytic attention on how drug problems are socially constructed in and through human praxis. In chapter 4, I use a constructionist approach to ethnographically demonstrate and explain endogenous accounts of what I am calling the ecology of addiction in drug abuse treatment discourse. These accounts posit a space “out there” marked by its degradation, dirtiness, solitude, and savagery that commonly tempts those who must live there to also

behave amorally, licentiously, and/or savagely. I explain these accounts by showing their fundamental utility in light of specific conceptual puzzles that participants in drug abuse treatment discourse must inevitably solve. Namely, speaking in terms of this ecology of addiction provides participants with a compelling narrative means for reconciling the following two claims: (1) they are chronically prone to enslavement by their addictions and (2) their addictions can be controlled through ongoing participation in a communal project of mutual help.

In chapter 5, I consider the value of interpreting addiction as a form of weakness of the will and/or *akrasia*. I then consider three problems that arise from adopting the specific views defended by those who have explicitly made the case for this thesis as well as some of their less explicit fellow travelers. The first problem is that this thesis too often posits the rational unity of properly functioning or healthy self-control as an integrated source of evaluation and volition. There are very good reasons to believe to the contrary, though, that properly functioning healthy people exhibit varying degrees of rational unity and disunity that are often explicable sociologically. The second problem is that this thesis too often posits self-control as invariably an exercise in emotional restraint, response inhibition, or delayed gratification. Once again, however, there are very good reasons to believe self-control is also exercised through self-discovery and self-actualization, which are not so obviously opposed to emotional expression, disinhibition, and personal gratification. Finally, the addiction as *akrasia* thesis tends to undertheorize the intrinsic relationship between experience, evaluation, and volition and the social contexts within which these are shaped, stabilized, stimulated, and sustained. Chapter 5 concludes with some brief reflections on the ramifications of these arguments for addiction science and treatment.

Chapter 6 argues that, while social contexts have long been understood to play an important role in addiction and recovery, the mechanisms through which contexts are currently said to influence addictive behavior are invariably cast as mere cues, “secondary reinforcers,” or as diverse types of incentives and disincentives that induce addictive behavior. As a result, addiction is cast as either a fundamentally neurological matter with only ancillary and arbitrary links to social context or as the product of social contextually informed cost-benefit analyses. As is shown, in both cases addiction is ultimately construed as essentially a harmful and recurrent yearning for immediate self-gratification. But if indeed this is the essence of addiction, then on what grounds shall we argue that addicts are in need, and deserving, of compassion and therapy as opposed to mere disincentives or punishment?

Drawing on Foucault's work on practices of freedom and Bourdieu's notion of habitus, chapter 6 describes one particularly robust way that the influence of social context on addiction can be explained without thereby weakening the warrant for therapeutic care.

The core criterion of addiction is the loss of self-control. Ironically enough, however, neither the social nor the biomedical sciences of addiction have so far made any measurable headway in linking drug use to a loss of self-control. In chapter 7, I begin by demonstrating the limitations in this regard suffered by the social and biomedical sciences. Whereas the social sciences have variously reduced addicted drug use to deviant but nonetheless self-governed behavior or discourses thereof, the biomedical sciences have failed to adequately specify, let alone empirically analyze, how we might distinguish addicted from self-governed behavior. I then show how these limitations can be very easily overcome by the adoption of a posthumanist perspective on self-control and the various afflictions, including addiction, to which it is regarded heir. This argument provides occasion to acquaint readers with posthumanist scholarship concerning a spectrum of relevant topics, including the human body, disease, drug use, and therapeutic intervention, and to show how these lines of investigation combine to provide an innovative, theoretically robust, and practically valuable method for advancing the scientific study of addiction specifically as the loss of self-control. The chapter concludes with a discussion of some of the more important ramifications that follow from the adoption of a posthumanist approach for drug-policy studies.

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NOTES

INTRODUCTION

- 1 As Daniel Breslau (2000, 293) wryly writes, “It is safe to say that no one has ever observed an instance of scientific knowledge constrained by an unknowable and meaningless material world.”

CHAPTER 1. SOCIOLOGICAL PERSPECTIVES ON ADDICTION

An earlier version of this chapter appeared in *Sociology Compass* 5, no. 4 (2011): 298–310.

- 1 References to “drugs” are used in this chapter as a proxy for all putatively addictive substances and/or behaviors, whether or not they actually involve drugs.
- 2 To be clear, my effort here is not to theoretically define the objective nature of addiction once and for all but to (1) promote a greater terminological precision in empirical sociological research on addiction and (2) examine the idea that addictions, however defined, might sometimes be experienced as sources of human suffering. Those who have sought to understand addiction as a type of affliction or source of suffering have overwhelmingly done so by defining addiction as something that causes a “loss of control,” and so it is the sociology of addiction as the loss of control that I am most concerned to explore here. To be sure, a great deal of important sociological research has looked not at the loss of self-control but at how claims regarding the dangers of addiction have figured in campaigns of social control. As vitally important as it is, this largely social constructionist research tends to either completely reject the claim that some people really do sometimes lose control of their use of drugs and/or begs the question of how such a loss of control is best understood sociologically. By extant social constructionist lights, we may sometimes suffer from being defined in one way or another. But the notion that something other than human

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PLACE OF
FIRST PUBLICATION

Chapter 1: "Sociological Perspectives on Addiction." *Sociology Compass* 5, no. 4 (2011): 298–310.

Chapter 2: "Freedom and Addiction in Four Discursive Registers: A Comparative Historical Study of Values in Addiction Science." *History of the Human Sciences* 34, nos. 3–4 (2021): 25–48.

Chapter 3: "Lindesmith on Addiction: A Critical History of a Classic Theory." *Sociological Theory* 15, no. 2 (1997): 150–61.

Chapter 4: "'Out There': The Ecology of Addiction in Drug Abuse Treatment Discourse." *Social Problems* 47, no. 4 (2000): 606–21.

Chapter 5: "Three Problems with the Addiction as Akrasia Thesis That Ethnography Can Solve." In *Against Better Judgment*, edited by Nick E. Evans and Patrick McKearney, 50–69. Oxford: Berghahn Books, 2023.

Chapter 6: "Toward an Ecological Understanding of Addiction." In *Evaluating the Brain Disease Model of Addiction*, edited by Nick Heather, Matt Field, Antony Moss, and Sally Satel, 373–83. London: Routledge, 2022.

Chapter 7: "Post-humanism, Addiction and the Loss of Self-Control: Reflections on the Missing Core in Addiction Science." *International Journal of Drug Policy* 24, no. 3 (2013): 173–81.

Appendix: John F. Galliher, "Comment on Weinberg's 'Lindesmith on Addiction'"; and Darin Weinberg, "Praxis and Addiction: A Reply to Galliher." *Sociological Theory* 15, no. 2 (1997): 150–61.

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