

**Addiction & Choice : rethinking the relationship Nick  
Heather and Gabriel Segal (eds.) Oxford: Oxford University  
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LYNCH, Richard <<http://orcid.org/0000-0003-1370-7112>>

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*Addiction and Choice. Rethinking the Relationship.* Nick Heather and Gabriel Segal (eds.)  
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This edited book questions whether addiction is a human choice or compulsion beyond the control of individuals. This makes it important for understanding how to think about, and respond to, problematic substance use of all sorts. There are no chapters covering specific links between drugs and crime but debates on justice and policy are well-served by reviewing how people's responsibility for their actions is viewed in the light of recent scientific developments and philosophical understandings. The central claim of the book is that the dichotomy of addiction as involuntary or a free choice is unhelpful. People can and do move beyond their substance use disorders that do themselves and others harm even if this is not always an easy process.

There is an acknowledgment by several authors that heavy, dependent and addictive use is not easily discerned and that it is the nature of such problems that they are not always revealed to the person involved. Since addictions, or disorders of choice as they are called by one of the book's editors, involve some individual impairment of decision-making, then the social aspects of the behaviours involved are important for a balanced assessment of harm. This point addressed by Beth Burgess who, from a practice perspective, recognises the social stigma and the damaged backgrounds of many involved with addictions. Her metaphor of working respectfully with people to remove their blindfold is striking in its power.

Cravings, desires, compulsions, wants, habits and likes are all theorised by different experts to help explain the behaviours found in people with addictions. Of course, these are only problems if there is an interruption to the desired flow of mind-altering substances. The term addiction itself is explored and the difficulties in operationalising a definition acknowledged. The scientific (neuroscience) and philosophical perspectives help to place the key questions about culpability, blame and responsibility for change in a contemporary context. There is one chapter on Anglo-American legal perspectives by Morse which recognises the choice-based theory inherent in the law. This requires people to have diachronic self-control as the decision to use in the first place attracts liability regardless of the lack of intention to do harm whilst (subsequently) under the influence. People do have choices but these are constrained by their psychological practices, personal histories and social situation as well as the effects of the chemicals on the brain.

The highlights of the book for me were Marc Lewis' chapter and Nick Heather's views on akrasia, where people act against their better judgement. Marc Lewis combined a neuroscientific, philosophical and lived experience perspective which illuminated the place of the brain in human behaviour without biological determinism. Nick Heather talks of addiction in terms of a disorder of the human will and relates this back to the philosophy of Aristotle. This is also consistent with pure choice-based perspectives from other authors who explain dual mental processing and reward-based theories of addiction. Akrasia helps to normalise poor choices as ones we all make when we do things we wish we rather hoped we had not done. This helps move the debate in the field beyond brain disease models or just freewill into recognising that a multi-modal approach to change for different individuals may be important. The separate chapters by Rachman and Segal recognise the way relationships based on social cooperation and community are active ingredients of change. The latter talks explicitly about the success of mutual aid recovery groups such as Alcoholics Anonymous/Narcotics Anonymous which retain a disease based model, albeit with this being overcome through the 12 steps programme and experiences of others in a similar position

(other recovery programmes such as SMART recovery, based on cognitive behaviouralism, are available).

Heyman and Mim's chapter was the most overtly challenging in suggesting that much addiction research misrepresents the existing evidence, including epidemiological studies that showed people left their substance dependence behind by their 30s (illegal drugs) or 40s (alcohol, cigarettes), at least in America. This is as a result of natural factors such as family, work and a desire to improve themselves. The conclusion on this pure choice-based perspective also highlights that much traditional research is based upon clinical populations rather than community ones. The result is that natural remission or recovery is not found as frequently. The solution proposed is to improve the frequency and timing of contingency-based approaches with clear negative consequences for episodes of consumption. This does seem to be the basis of current workfare approaches to ensuring recovery takes place within existing social policy.

The book, by design, is weighted towards theoretical and conceptual matters. The implications for justice and rehabilitation are profound. Blaming and scapegoating those with addictions and labelling them as beyond the pale will not change anything. Recognising that we all make bad choices sometimes and that it is hard to face up to them may help normalise responses to this frustrating and, at times, intractable problem. Finding out about the problem may be one way of working towards solutions but exploring the existing successes of people in recovery is another.

Senior Lecturer,  
Sheffield Hallam University, UK.

RICHARD LYNCH