Was Sisyphus a Pusher?

Desmond Manderson

Helen Keane

*What’s Wrong with Addiction?*

MUP, $29.95pb, 236pp, 0 522 84991 1

Alex Wodak and Timothy Moore

*Modernising Australia’s Drug Policy*

UNSW Press, $19.95pb, 103pp, 0 86840 482 9

The current legal régime for the regulation — I use the term advisedly — of drugs has many unintended consequences. One of its minor tragedies is the number of thinkers and activists whose valuable energies are thus diverted to the Sisyphean labour of undoing it. So many words have now been written on the failure of prohibition that there is surely little more to be added. More than a decade ago, former Senator Peter Baume expressed it well: ‘Our strategies seek to prevent the production of certain designated illegal substances, and fail to do so; they seek to prevent the importation of substances, and fail to do so; they seek to prevent the distribution of substances, and fail to do so; they seek to prevent the sale and use of substances, and fail to do so.’ Instead, our laws and policies make all these activities that much more dangerous, more corrupt, more poisonous and more destructive.

Nevertheless, new books appear. Some are by bright young scholars for whom the very perversity of the laws is strangely compelling, and the paradox of the entrenched community support they enjoy compellingly strange: Helen Keane’s *What’s Wrong with Addiction?* falls into this category. Still others are penned by hardened front-line warriors whose long experience in the field gives them an authority and directness that commands our respect: Alex Wodak and Timothy Moore’s short manifesto, *Modernising Australia’s Drug Policy*, falls into this category. Together these two recent texts provide us with a clear picture of our present problems in dealing with drugs, and the occasional glimmer of an alternative future.

Moore is drug policy project officer at Redfern Legal Centre; Wodak has been Director of the Alcohol and Drug Service at St Vincent’s Hospital for many years. He is one of the great and enduring figures in the battle for drug law reform in this country. Both have extensive experience with the real and immediate problems faced by many users of illegal drugs. No dreamy theorists, these two. Yet they write with an apparently undimmed enthusiasm for the need to change the legal structure of drug control in this country. *Modernising Australia’s Drug Policy* is very short — scarcely more than 100 pages — and can perhaps best be described as a polemic: a polemic against the wasted lives that drug laws leave in their wake. Their argument is simply and forcefully put. Wodak and Moore provide us with a snapshot of the extent of the current drug problem in Australia, together with much valuable information on possibilities for reform, experiments and alternatives tried in other countries, and their own best judgment as to the way forward. What makes the book significant is its matter-of-fact approach, and the clarity with which it establishes its central argument. Illicit drugs, the authors insist, are a social and a health problem in this country, and no progress will be made until they are treated as such. This means abandoning our current doomed obsession with law enforcement, and the rhetoric of ‘war’ that accompanies it. This is an argument with which I wholeheartedly agree. This short book will be an immensely valuable resource for all those who want ready access to the arguments and information in support of it.

Nevertheless, I am not sure that *Modernising Australia’s Drug Policy* will convince the hesitant. It is too tinged with exasperation at the self-evidence of their position. Contrary arguments are given little credence, and complex questions as to the weighing up of evidence are treated with some haste. Perhaps the most notable example of this problem concerns the discussion of ‘the increasing number of drug overdose deaths’ in Australia. Yet neither here nor elsewhere in the book is any mention made of the recent ‘heroin drought’ in this country. According to reliable evidence, this phenomenon led to a dramatic decrease in the number of drug overdose deaths in this country during 2000. This is being trumpeted by governments and other advocates of the status quo as resounding evidence that law enforcement does reduce supply, and that a reduced supply does have important health and social outcomes. Clearly, the question is by no means so straightforward and there are a variety of ways of interpreting the data. There is, for example, nothing that necessarily attributes the drought to any specific law enforcement initiatives. But it is true that drug overdose deaths have recently declined, and the argument that this is proof of the efficacy of current policy needs to be addressed properly. Wodak and Moore, unfortunately, appear to ignore the whole question, and this weakens their case.

Wodak and Moore’s occasional oversimplification of the issues stems, I believe, from a deeper exasperation. They assume that the problem is fundamentally one of ignorance. If only everyone knew the consequences of the current legal framework, they could hardly maintain their support for it. It is this confidence in the power of information to transform belief that explains the bipolar mood of their essay: exasperation, certainly, but, on the other hand, a surprising optimism. These two hard-bitten soldiers in the war against the war against drugs maintain a remarkable confidence in their eventual victory.
I am less sanguine. I suspect that most people in Australia are not really ignorant of the costs of current policy, but merely indifferent to them. Theirs is the posture of the ostrich as it buries its head in the sand. The question is, surely, why? If popular opinion is so resistant to the facts and reason marshalled against the disastrous prohibition experiment, that must be because the current approach fulfils some social needs. And here a more reflective analysis may help us to understand drug addiction not as a phenomenon that users experience, but as a discourse that society constructs.

Helen Keane’s clever and imaginative book What’s Wrong with Addiction? sometimes bears the unwieldy hallmarks of its origins as a doctoral dissertation. But, by and large, she wears her theory lightly. Indeed, the book demonstrates that the post-structural analyses of French theorists such as Deleuze, Foucault and Derrida are not merely parlour games for the over-educated. On the contrary, by breaking down the distinction between fact/view, is/ought, science/art, and showing us how deeply the very world around us is infected by the language through which we come to see it, this scholarship has opened up a whole new way of understanding how society attributes meaning to particular acts or behaviours.

Keane explores the gamut of addiction and addiction literature — from drugs, alcohol and tobacco, to eating disorders, and ‘sex addicts’ — and does so by way of an analysis that focuses on how these addictions are actually understood in society. To this end, she summons sources as varied as scientific texts, self-help manuals and popular magazines. Fundamentally, her discussion shows us that the language of ‘addiction’ refers not to a physical state, still less to its health consequences, but to a social irritant. The first step is this: addiction does not simply describe a chemical imbalance in the brain or the body — not in relation to drug use, and still less in relation to the many other behaviours that are now fashionably depicted as ‘addictions’. It is rather a problem of wrongful desire (the word ‘craving’ neatly conflates the fact of desire with our value judgment of it). Keane relentlessly demonstrates that this problem is, all too often, not the subject’s but society’s. The second step is this: once we accept that we use the word addiction to describe a certain problematic relation to desire, the terminology turns out to be wonderfully contradictory. What is purported to describe a lack of control turns out frequently to involve the subject in behaviour that is in fact enormously disciplined and controlled. The anorexic or bulimic is a particularly good example of this.

This is by no means intended to trivialise the serious social and health problems that the use of drugs causes in many users. Nor should we forget that so many of those problems are a result not of the drugs themselves but of the legal or social system that represses them. But the language of addiction is far too convenient for all concerned. It is convenient for users because it abrogates any responsibility the individual might have for their behaviour and their choices. It is convenient for society because it allows all drug use to be labelled and condemned indiscriminately, and the most extreme practices — medical, social or penal — to be justified as if it were not the individual that was being punished at all. We used to burn witches to save their souls. ‘Addiction’ offers a similar kind of abjection: the drug or behaviour itself becomes both the agent of action and the object of social or legal control. The ‘addict’, in either case, is merely an unfortunate bystander caught in the line of fire.

It is important to recognise that even outstanding crusaders for ‘harm reduction’, like Wodak and Moore, are in danger of running a line of limited utility here. To speak of addiction as a ‘health problem’ moves the site for social intervention but does not remove it. This is because the discourse of health does not normalise behaviour but pathologises it. It excuses the user at the expense of disempowering them. I do not for a moment think that our authors make this serious mistake, and nor do many subtle and complex health programmes around the country. But I suspect that many people in society do make this mistake, and the publicity that attaches to silver-bullet solutions like naltrexone only encourages this way of thinking. The law enforcement model of drug use makes the user a lesser being — a criminal. The disease model of addiction makes the user a lesser being — an invalid. Either way, our capacity to see someone who uses drugs or engages in other kinds of compulsive behaviours as making choices that may or may not be deleterious to them or to society is reduced. This explains the indifference that I earlier suggested is the real constraint on drug law reform in this country. The disease model and the lazy language of addiction generalise and belittle users. They are thought of as not quite human because they are not quite free or normal. It is here that we need to act, by personalising their experiences, and perhaps even — radical thought — by acknowledging their desire. Could this be worse than the disgraceful consequences of our current approach to the regulation of drugs? Keane’s outstanding work implies that we might abandon the whole idea of addiction and rethink the circumstances under which desires are, or ought to be treated as, unacceptable. Wodak and Moore, for their part, provide a valuable conspectus of the state of drug policy in the world today, and offer pragmatic ways forward. For these proposals to be implemented requires not increased knowledge, but a shift in our interpretation of it. I can’t help feeling that they are rather like poor old Sisyphus, eternally pushing that stone up the hill. They are buoyed by their confidence that one day soon they’ll get there. But the problem lies not with the stone. Over the past hundred years, we have made a mountain out of a molehill when it comes to drug use. The time has surely come when we should turn it back into a molehill once again.