

Review By: [Kenneth J. Sher](#)

Review of: *Addiction: A Disorder of Choice*

By: Gene M. Heyman, Cambridge, MA: Harvard University Press, 2009. 200 pp. ISBN 978-0-674-03298-9. \$26.95

There is broad agreement that “addiction” can be a serious problem for addicts, their friends and family, employers, public safety, the criminal justice system, and society at large. However, there is considerably less consensus as to exactly what addiction is, how it should be viewed, and how it should be treated. In a widely-watched Supreme Court case over 20 years ago, the court upheld the Veterans Administration position that eligibility for some education benefits should not be extended to two alcoholic veterans because alcoholism (at least alcoholism that is not secondary to a mental illness) represented willful misconduct and not a true disease.

In seeming contrast, the National Institute on Drug Abuse for the past 10 years has taken the position that addiction is a brain disease (Leshner, 2001; National Institute on Drug Abuse, 2008) in large part because there are observable brain changes that take place in drug-dependent individuals. Between these two poles is a range of positions that emphasize, to varying degrees, a mix of these perspectives.

Proponents of various positions bring all sorts of evidence to bear, including personal experience, clinical wisdom, controlled laboratory investigations in humans and nonhuman animals, clinical trials, and population-based epidemiology to argue their case. At the center of this confusion is not whether some individuals are able to make choices about their continued substance use; clearly they can. Nor is it whether genes and early environmental exposures predispose an individual to addiction; clearly they do.

Additionally, increased experience with a drug of abuse leads to changes in the brain that makes brains of human addicts (and nonhuman addicted laboratory animals) demonstrably different from brains of nonaddicted humans (and nonhuman animals). What is at issue is how to best sort through these various aspects of addiction to understand its essence to enable us to think about it in a scientific way and to develop rational public policies and effective treatments.

In *Addiction: A Disorder of Choice*, Gene Heyman provides a selective but fascinating overview of research and theory in addiction and puts forth a cogently argued, “choice” perspective based on economic principles. However, even for readers not particularly interested in the main thesis of the volume, that is, that addiction can be profitably viewed as “a disorder of choice,” there is a wealth of information here about the history of the use of various substances (especially opiates) across cultures, the epidemiology of substance use disorders, recent behavior genetic research on substance use disorders, and the relation between social class and how the use of various types of substances is viewed by society. In addition to the hard data of research on addiction, Heyman provides a number of autobiographical case histories

of addicts, putting flesh on the bones of more abstract principles and empirical findings.

Indeed, it is in the wide-ranging discussion of various aspects of addiction and substance use where the book shines and becomes more than a scholarly review article. Educated lay people, as well as psychologists, will gain an appreciation of how the status of a psychoactive drug in society can vary over time and across social strata. Whether drug use is viewed as a (relatively) harmless vice or a malignant blight on society is a question that is repeatedly played out in history, across cultures, and into the present time. It's refreshing to see an experimental psychologist place his work in the grand context of the larger behavioral and social sciences so that the unique perspective afforded by a single theory can be appreciated and its relation to other levels of explanation articulated.

Many readers who are already familiar with the larger literature on the course of substance use disorders (e.g., the high rates of "natural recovery" or "maturing out") or the logical problems with equating genetic influence or neurobiological changes with disease may find themselves chomping at the bit to get to the meat of the presentation on addiction as choice. Indeed, while reading this short, well-written volume, I kept thinking there were really two very short books here: one, a broad overview of substance use and dependence from a multidisciplinary perspective; another, a focused presentation on choice theory and how it relates to addiction. However, this is a minor quibble because there are just so many interesting little tidbits of information scattered through the first half of the book that there is enough here to hold the interest of readers who are already familiar with terrain surveyed.

I suspect that some readers may see the subtitle of the book, *A Disorder of Choice*, and immediately reject the thesis on the basis of their preconceived notions about the compulsive nature of addiction and the possible connotation that *choice* implies, namely that ceasing to use a drug is easy or that addicts can always choose to quit. That is not the position Heyman proposes. Rather, he provides a thoughtful overview of how psychologists construe voluntary behavior. It is not a simple or a narrow topic and involves a number of considerations.

Most critical for the central thesis is that (a) choice preferences change over time as a function of prior choices and (b) how choices are framed is critically important to the types of choices that are made. Both of these principles are critical to the view of addiction proposed, which assumes that addicts, like nonaddicts, make choices that reflect the "higher value" among the alternatives that could be considered.

Why, then, do addicts seemingly make "bad" choices, that is, to use drugs that cause harm? The answer, according to the choice perspective put forth by Heyman, is that addicts (and nonaddicts) tend to frame their choices *locally*, that is, without consideration of future choices or how their current choice will affect the cumulative value of future choices. The net result is failure to optimize good outcomes over the long haul. It's not so much that a local perspective is inherently bad but that

there is a mismatch between how choices are made and certain properties of addictive drugs. . . . In the local frame of reference the future and indirect consequences of current choices do not count. This “oversight” might not matter that much if the costs associated with a commodity are as apparent as its benefits. But for drugs the costs are delayed, indirect, and uncertain. (p. 128)

Heyman goes on to describe why, from this perspective, quitting is so difficult and why certain circumstances that pull for a local perspective present a high risk for relapse.

Choice from a global frame of reference will reliably yield outcomes superior to the local frame of reference, but, according to Heyman, “any activity that undermines the competition [of competing activities] and has immediate positive consequences accompanied by negative consequences that lag far behind” (p. 135) will undermine using a global frame of reference in structuring choice. That is, drug addiction is structurally similar to other voluntary behaviors, but the profile of addictive drugs’ positive and negative consequences poses hazards for our normally highly adaptive decision-making apparatus.

Thus, a broad range of activities can be considered addictive in that they lead to a strong local frame of reference that involves choosing to engage in immediately reinforcing but ultimately harmful activities and, in the long run, leading to poorer overall levels of satisfying one’s values—therefore, the title for this review, which is a quote from page 162 of the book illustrating a strategy for combating choices based on a local perspective.

After providing a broad overview of addiction in the first half of the book and then introducing the choice perspective, Heyman attempts to integrate these notions about choice with what is known about the neurobiology of addictive drugs, how acute intoxication can affect frames of reference, the importance of social variables (both interpersonal and cultural) and role statuses, individual differences in choice strategies, and how the choice perspective can inform both treatment and policy. Here the volume is the weakest, not because of any logical or scientific flaws but simply because these important issues are addressed too cursorily and selectively and there is considerable room for deeper translation between a choice perspective and closely related explanatory systems. Indeed, it is admirable that Heyman seeks consilience among these different approaches to understanding and controlling addiction; I just would have liked to have seen deeper and more comprehensive coverage.

As noted earlier, there are really two extended essays contained in this short volume: (a) an overview of addiction that sets the stage for the second part of the book and (b) an analysis of choice behavior and how it relates to addiction. Both are valuable, but it is second part of the book that makes the more unique contribution.

References

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