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Cohen, Bruce M. Z., Harbusch, Martin & Reichertz, Jo (Eds.). (2026). *Addiction and the Medicalisation of Conspicuous Behaviour: New Critical Perspectives*. Palgrave Macmillan. ISBN: 9783032063120.

Reviewed by Effie Karageorgos*

Critical studies of addiction have long aimed to show the social basis underlying seemingly well-defined categories of 'addiction'. Many studies of addiction have, like broader critiques of mental health categories, highlighted the limitations in applying a rigid checklist approach, such as the *Diagnostic and Statistical Manual of Mental Disorders* (*DSM*) or *International Classification of Diseases* (*ICD*), to the vagaries of human existence. They have questioned the biomedical focus on the individual within these volumes, and their failure to clearly explain addiction, an elusive category that does not integrate structural reasons, including race, culture, gender and geographical location, for various types of 'conspicuous behaviour' (see, for example, Conrad, 2007; Park, 2024; Reith, 2019; Room, 1998).

Addiction and the Medicalisation of Conspicuous Behaviour: New Critical Perspectives, edited by Bruce Cohen, Martin Harbusch and Jo Reichertz, builds on such approaches to further strengthen our understanding of the social construction of the addiction category by broadening analysis and methodologies beyond established addiction 'types', addressing emerging conspicuous behaviour that threatens to disrupt 'order' and so faces medicalisation. Together the chapters in this volume show us how socio-political-technological-economic-neoliberal circumstances carve space for addiction to exist as a category, or as a category framed in a particular way to achieve a set end—whether that be increased state revenue, social regulation, substance control or the cultivation of particular markets. Such factors are also key to ensuring that the 'right type' of addict is labelled, and stigmatised. In other words, *Addiction and the Medicalisation of Conspicuous Behaviour* shows that substances or items recommended in some contexts are rebranded as 'addictive' if their use disrupts what neoliberal capitalist societies consider 'normal' lives, relationships, partnerships or child-rearing styles. This is demonstrated, for example, by the book's analyses of extreme sports (Arntsen & Campbell, Chapter 10) and psychedelic therapy (Noorani, Chapter 11), both of which are only treated as addiction if they assume a socially unacceptable level of risk, or detract from, rather than contribute to, 'wellness' as defined by modern capitalist societies.

This book is a truly interdisciplinary collection, led by three prominent sociologists and comprising 15 chapters by scholars from a range of disciplines, including sociology, criminology, social work, psychology, communication, population health, engineering and the physical sciences more broadly. The book is separated into four sections: the first presents new theoretical analyses of the addiction label; the second section turns to behaviours that have been medicalised, or which are likely to soon be categorised as addictions; the third focuses on activities that, due to their alignment with social norms or economic benefits to the state, are not medicalised; and the final section analyses how addiction discourses have been translated for public audiences, through social media, cinema and parliamentary debates.

In their introduction (Chapter 1), the editors locate addiction as a metaphor or a "cultural label" (p. 5) related to core human experiences or "behaviours that are pursued with passion", and can occur to

* **Effie Karageorgos** is a senior lecturer in History at the University of Newcastle, Australia.
Email: effie.karageorgos@newcastle.edu.au

anyone, at any time. The labelling of such behaviour as 'deviant' by medical authorities creates the still-vague and little-understood category of addiction, that then goes on to determine treatment regimes, political approaches and social attitudes. As a population health expert on addiction, Professor Peter J. Adams, writes in the book's foreword: "Addictions intersect boundlessly with many of the subjective, social, political and cultural aspects of our being" (p. vii). The nature of such intersections is ever-changing as new modes of being arise. As Baptiste Brossard and Benjamin Hemmings (Chapter 15) show through their analysis of cinematic portrayals of sex addiction or nymphomania across 54 films from 1932 to 2019, the positioning of such conspicuous behaviour changes over time. In particular, Brossard and Hemmings find that despite changing relationships between psychiatry and society, as well as shifting gender norms and increasing medicalisation, filmmakers continue to pathologise 'sexual excess' through a variety of aesthetic editing, design and other choices. This is just one of many contemporary perspectives within the volume that show how responses to addiction emerge from a variety of individuals, groups and sites within society, and are ever-changing. Its inclusion of recent technological and cultural developments that have caused or transformed various forms of conspicuous behaviour makes this book a valuable, and current, contribution to critical addiction and mental health scholarship.

Beyond the four distinct sections within this book, there are also several major conceptual strands. One of these focuses on the individualisation inherent in biomedical and psychological approaches to addiction, an argument integrated into most of the chapters in the collection. In Chapter 13, Cherie Lacey, Ian Goodwin and Antonia Lyons write about the individualised ways that social media addiction is framed, and how individuals are blamed for overusing social media platforms that are "addictive-by-design". Similarly, in Chapter 6, Thaddeus Müller outlines the history of the US opioid epidemic to show that in a context in which highly addictive drugs are being prescribed by medical professionals to treat broadening forms of pain, it has been necessary for medical and political authorities to differentiate between 'good' and 'bad' addicts. The only difference between these is that bad addicts engage in deviant behaviour and do not follow medical advice, providing evidence of the increasing individualisation and blame within ways that the addiction label is assigned.

Sometimes it falls onto the individual themselves to challenge and reset the boundaries of the addiction label. In Chapter 8, Kris Taylor shows through his interviews with consumers of pornography that the label of addiction is not merely socially subscribed, but also self-subscribed, particularly in the absence of official definitions or tools to assess pornography addiction. Taylor explains that adapting understandings of pornography viewing in an individualised way and not in line with a binary of good/bad viewing is more helpful to those struggling with their pornography viewing.

Another key theme within the book is the alignment of addiction discourses with the need for profit-driven capitalist systems. This theme is first outlined by Bruce M. Z. Cohen in Chapter 5. His theoretical chapter connects the *DSM* and other disease classification systems with neoliberal capitalist systems that aim to use people productively, for ends that will ensure the continuation of these systems. He also places addiction discourse within this frame, showing that addiction, which is as yet inadequately defined, is a form of social control aimed at perpetuating capitalist systems. Likewise, Gerd Möll (Chapter 14) shows through his analysis of German parliamentary debates that the conceptualisation of gambling addiction has been largely directed by perceived social and economic necessity within Germany, meaning that support for gambling has occurred when it provides revenue to the state, and that the 'problem' of addiction is framed as an individualised problem rather than a state issue to solve. In Chapter 7, Mark Elam focuses on the political negotiation of addiction labels when consumption of a particular substance, in this case nicotine and gambling, provides economic benefits to the state. He points to "disarming innovations" (p. 158) which are technological developments—for example, nicotine replacement products—that aim to quash public concern about the pervasiveness of harmful substances,

such as tobacco. This means that such substances or activities can continue to provide financial benefits to the nation while addictive behaviour is "rerouted" (p. 173) to more publicly acceptable spaces.

The book also points to the uneven application of the addiction label in relation to a range of substances or behaviours, depending on who is consuming and whether their consumption aligns with acceptable social norms. In Chapter 4, Jo Reichertz raises the importance of class when he analyses what he labels "passionate gambling", that he markedly separates from the medicalised label of addiction. He writes that gambling among the middle classes is viewed as "edgework" (p. 92), namely an intentional risk to wellbeing connected with a 'well' mind, whereas gambling is more likely to be pathologised among the working classes. In Chapter 10, Lars Arntsen and Nancy D. Campbell point to the social and political need for lifestyle choices that align with productive activities when comparing extreme sports and drug use. They show that although these two activities produce similar physical and psychological effects in those who engage in them, extreme sports—an example of a socially acceptable activity—is only treated as an addiction by medical or other professionals if it assumes an unacceptable level of risk.

Some chapters also point to industries that promote substances and activities that in some contexts are linked to addiction but in others are not. For example, in Chapter 9, Richard Hammersley analyses the conceptualisation of CBD, or medical cannabis, as a "wellness aid", making the crucial point that although cannabis itself is a subject of much addiction research, the evidence that links CBD—which is the same substance but in a different context—with addiction does not exist "only because so far…nobody is looking for any" (p. 208). A similar contradiction is raised in Tehseen Noorani's analysis of psychedelic therapy (Chapter 11), in which substances that were prohibited in the early to mid-twentieth century have recently been reframed as psychological tools that can lead to 'dependence' but not addiction. Moreover, these substances are said to be useful for treating drug addiction. Noorani shows how cultural integration of such substances by Indigenous and other groups since ancient times and their use as a path to "flourishing" (p. 258) will likely encourage their continued use in wellness regimes.

As emphasised throughout the book, the social and political positioning of contemporary biomedical approaches to addiction research constantly aims to reinforce the legitimacy of these approaches. This is more directly emphasised by Matilda Hellman (Chapter 12), who analyses the commodification of neuroscientific research on addiction through science popularisation websites, or "addiction neurohype" (p. 270). She shows that the exaggerated focus within these websites on the superiority, accuracy and ground-breaking elements of neuroscience, particularly when compared with a "less-knowing past" (p. 276), aims to bolster the authority of scientific research and technology.

All the chapters in this book contribute to a point first stated in the introduction (Chapter 1) by the volume's editors that the medical surveillance of humans is ever-broadening and so analyses of new and altered behaviours and experiences must follow. In Chapter 2, Baptiste Brossard, Emmanuelle Larocque, Nicolas Moreau, Dahlia Namian and Melissa Roy use Hacking's Theory of Ecological Niches, which views mental illnesses as "constructed artefacts" integrating historical, cultural and emotional factors, to assess sex, exercise and work addiction—none of which appear in formal classifications of disease. The authors conclude that while Hacking's focus is on institutions as the adjudicators of disease or disorder, perhaps it is now more appropriate to speak of an "observation network" (p. 46), as the systems that create addictions lie beyond institutions. Martin Harbusch (Chapter 3) moves further away from medical authority as the basis of broader understandings of addiction, writing that medicalisation is now no longer merely the domain of medical professionals but is also facilitated by professional groups surrounding the medical world. He proposes a "triangle of medicalisation" that he calls a "multi-perspective, interpretative framework" (p. 66), which is applicable to the increasing "addictification" of society, or the increased "problematisation of pleasurable behaviours" resulting in "psychiatric or medical control" (p. 60).

Addiction and the Medicalisation of Conspicuous Behaviour: New Critical Perspectives provides readers with a plethora of new avenues to explore in attempting to understand the function of mental health categories

across the world. The book's focus on addiction—a category that, as we have seen, reinforces markets, nations, professions and industries—allows us to come closer to the variability within the allocation of diagnostic labels, which, the authors posit, come from medical classification systems that make judgements about health and illness based on individual sociocultural contexts. Indeed, the book's focus on addiction as conspicuous behaviour labelled problematic represents a further determined move away from the biomedical dominance within general understandings of such behaviours. Its interdisciplinarity makes it valuable to critical mental health and addiction scholars across the academe.

More could be made of cultural, racial or geographic difference within the volume, particularly when discussing colonial or former colonial nations. For example, the introduction's discussion of opium, which was not considered a deviant behaviour by White people in the late nineteenth century, was conceptualised very differently by Britain when applied to Chinese users in the years surrounding the Opium Wars of the 1830s and 1840s, when the British flooded China with opium so as to weaken the population and attempt to colonise the country. Moreover, each state has its own intertwined histories of formation and alcohol use. In many nations, addiction was historically linked to vagrancy in law, creating a legal method of removing deviant 'inebriates' from city streets, and influencing the socioeconomic basis for present-day approaches. The great leaps this collection takes in increasing our conceptual understanding casts such criticisms to the background, but these could be avenues for further research by sociologists, historians or race scholars.

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