

Kent Dunnington, *Addiction and Virtue: Beyond the Models Of Disease and Choice*. Downers Grove, IL: Intervarsity Press, 2011. (197 pp.) ISBN 9780830839018

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Given the growing prevalence of various forms of addiction, both in society and in the Church, theological publications on this topic are rare. A recent exception to this rule is *Addiction and Virtue: Beyond the Models of Disease and Choice*, by Kent Dunnington (Greenville College, Illinois, USA). His central thesis is that “the category of habit is indispensable for charting an intelligible path between the muddled polarities of ‘disease’ and ‘choice.’” (p. 10) Accordingly, he begins by showing the problems with these options. He first argues against the disease model, particularly understandings of addiction regarding neurology, genetics and medicine. Even if addictive behaviour is often accompanied by certain brain structures, it does not neurologically follow that all people with precisely those brain structures will engage in addictive behaviour. The same is true genetically; addictive behaviour does not follow, uniformly or simply, from particular genetic conditions. And medically, “remission rates for addicts in [medically-based] treatment hover somewhere between 10 and 40 percent, significantly worse than the remission rates reported of the general population, most of whom do not seek treatment.” (p. 26). Conversely, the choice model is found to be an inadequate accounting of addiction, which is routinely experienced in ways qualitatively different from the ordinary moral struggles where weakness of will is the operative principle (p. 34-35).

In the second chapter, before establishing the essential nature of the language of habit, Dunnington describes addiction generally in terms of human agency. Drawing upon Aristotle’s categorization of human action (virtuous, continent, incontinent, and vicious), he locates addiction as a form of incontinent action, where an agent fails to act according to their better judgment (p. 37). This failure, for Aristotle, is either due to the strength of passion or the weight of habit (p. 43). He then goes on to describe a particular kind of incontinent action, which Aristotle called “impetuous incontinence”, which “occurs whenever hurry, strong appetite or an abnormal bodily state wrecks the deliberative process that is needed to arrive at a right judgment, which would lead to a right action” (p. 45). In all this, addiction is distinguished from “simple incontinence” where a conscious moral agent makes a clear decision (p. 42).

In the third chapter, Dunnington turns to Aquinas and the language of habit. The domain of habit lies, or mediates, between the polarities of involuntary action, determinism, and instinct on the one hand, and voluntary action, voluntarism and disposition on the other hand. In this way, habit is neither unchangeable nor easily or spontaneously changed. Habits can be changed, but only with great effort and practice (pp. 63-71). In light of the previous chapter, action that is incontinent or addictive becomes intelligible where the presence of a good judgment does not stop the flow of an addictive habit. The addictive and habitual behaviour can indeed be arrested (for example, by establishing the new habitual actions of a 12-step recovery programme), but the point here is that it cannot be abated through a simple spontaneous decision to ‘stop’.

Chapter 4 moves to discuss intemperance. The battle for temperate action lies in the tension between two types of habits: “mastery habits”, which are exercised through conscious volition, and “automatism habits”, which don’t always need conscious reason (pp. 85ff). An agent can override an automatism habit, but at the cost of great exhaustion. By contrast, acting on an automatism habit requires no psychological effort at all (p. 87).

In chapter 5, Dunnington moves to discuss three ways (arbitrariness, boredom, and loneliness) in which modern culture fails to provide the moral goods humans seek, and thus encourage various forms of addiction. Modern arbitrariness (pp. 106-112) has replaced a traditionally shared vision of the goal of living. Modern boredom (pp. 112-18) flows on from this arbitrary lack of prioritization of goals and tasks, leaving us weary of deciding what to do and strive for. Modern loneliness (pp. 118-123) stems from a shift away from traditional concepts of friendship, community and citizenship toward an increasingly disconnected and individualistic modes of being. Addiction, particularly in its modern form, fills the void of purpose, activity and community in modern culture.

Chapter 6 seeks to redress the relationship between addiction and sin. Whilst not conflating the two concepts, Dunnington demonstrates that a robust understanding of sin is large enough to include our understanding of addiction as habitual behaviour that grows to become beyond our immediate control, even as addicts remain responsible to act in ways that curtail their addictive behaviour.

In chapter 7, addiction is related to worship. Addiction is understood as “a failure of worship, a potent expression of idolatry in which we pursue in the immanent plane that which can only be achieved in relationship with the transcendent God” (p. 159). Thus both addictive behaviour and worship come ‘naturally’ for human beings which are wired to seek ultimate goods beyond present experience (p. 157).

The eighth and closing chapter discusses ways in which the church is in a posture both to learn from and operate in a larger mode than the recovery movement. Dunnington has critiques of the 12-step notions of a ‘God of our understanding’, identifying as an ‘addict’, and the low expectation of a ‘daily reprieve’. By contrast, he thinks the church can learn from the recovery movement’s practice of honest confession, the apprentice/sponsor model, and the physical proximity of the meeting room.

This is an immensely important and ultimately convincing project, particularly in its ability to converse with and challenge both the recovery movement and the Christian community. Dunnington is successful in establishing the primacy of habit language over that of disease or choice. Perhaps his critiques of the recovery movement go too far. Participants in 12-step recovery programmes will understand their self-identification as ‘addicts’ not in a philosophically (or indeed theologically) ultimate sense, but in the context of membership in a community of persons from whom ongoing admission of their behavioural patterns is beneficial. Likewise, the emphasis on the ‘daily reprieve’ has less to do with the absence of an ultimate hope or identity and more to do with the consistent effort which accompanies growth in sobriety. Those critiques aside, Dunnington issues insights too important to ignore in a world and church increasingly plagued by addiction.