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Critical Perspectives on Addiction is the 14th book in a series related to medical sociology. The book is divided into four sections, and includes a total of 10 articles related to addiction. I will discuss one article from each section in depth and provide an overall assessment of this book. It should be noted that this review primarily considers the usefulness of Critical Perspectives on Addiction for people working within the field of critical disability studies. The anthology does a good job of presenting current challenges within the addiction field. A disability scholar would be particularly interested in the introduction (as it provides a context for the addiction field and the rest of the book), the first section (which focus on the medicalization of addiction) and the fourth section (which deals with behavior addictions, like eating).

The first section, which focuses on the medicalization of addiction, provides the grounds to understand the similar histories shared by addiction and disability. This could also be useful to a disability scholar as it provides the background for why addiction has been historically separate from the disability category. It also highlights the problems that have arisen as the medicalization of addiction has permitted addiction to be moved into the category of disability through the use of the medical model. Within this section, the article De-Medicalizing Addiction: Toward Biocultural Understandings, by Kerwin Kaye, discusses how disability theory is related to addiction, and serves as a good starting point to understand the growing connections between the disability and addiction fields. Readers with a background in critical disability studies may fault Kaye’s presentation of disability theory as taking place at an introductory level, focusing narrowly on the social model and lacking recognition of recent developments in disability theory.
Notably, recent criticisms of the social model are not present in Kaye’s discussion. However, Kaye mounts a strong argument in support of the idea that the addiction and disability fields have a great potential to learn from each other and to engage in collaboration, which is an important point.

The second section deals with the historical presence of racism within addiction. Helena Hansen and Samuel K. Roberts’ article, *Two Tiers of Biomedicalization: Methadone, Buprenorphine, and the Racial Politics of Addiction Treatment*, does a good job of outlining the way in which racism shapes addiction treatment in the United States. From a Canadian and international perspective, it will be important for readers to remember that this perspective may not be generalizable to contexts outside of the United States.

Section three discusses how addiction, myths of addiction, and addiction treatment have been and are presently used as forms of social control. Both articles in this section are good portraits of how addiction has been used to control certain bodies. Deborah A. Potter’s article, *Drawing the Line at Drinking for Two: Governmentality, Biopolitics, and Risk in State Legislation on Fetal Alcohol Spectrum Disorders*, does a particularly good job at problematizing how addiction can be used as a form of social control over minority groups. Although this section can be used to highlight connections between addiction and disability, from a critical disability studies perspective, the articles do not provide much new knowledge about the function of mental health diagnoses as a means of social control.

The fourth section, which deals with the consequences of the expansion of the definition of addiction to include behaviours (such as eating and playing video games), was the most interesting to me. Having worked in the addiction field for 10 years, arguments in the first three sections were familiar to me, but the material addressed in the final section is has not often been
a focus. I think that this section may be most useful of all for those exploring connections between critical disability studies and the field of addiction, as the articles included highlight the need to approach the expansion of addiction discourses from a critical perspective. The articles in this section are particularly well written and serve as excellent introductions to this emerging and interdisciplinary area. I particularly enjoyed Jessica Parr and Nicolas Rasmussen’s article, *Making Addicts of the Fat: Obesity, Psychiatry and the ‘Fatties Anonymous’ Model of Self-Help Weight Loss in the Post-War United States*.

Overall, *Critical Perspectives on Addiction* is an essential resource for any disability scholar that wants to consider addiction within their work.