

## **Robin Room, Ph.D.**

Robin Room has had a distinguished career within the alcohol and drug problems arena, spanning his service as Scientific Director at the Alcohol Research Group in Berkeley, CA, the Vice-President for Research at the Addiction Research Foundation in Toronto, Canada, Visiting Scientist at the National Institute for Alcohol and Drug Research, Oslo, Norway and Professor and director of the Centre for Social Research on Alcohol and Drugs (SORAD) at Stockholm University, Sweden. I have steeped myself in Robin's papers since first discovering his dissertation on "governing images" of alcohol and drug problems (See <http://www.robinroom.net/dissert.pdf>). He has written about an indescribably diverse range of topics related to alcohol and other drug problems, but I am most personally indebted to his work on governing images. I recommend that any serious student of addiction and the larger arena of alcohol and drug problems drink deeply from the well of knowledge that exists within the collected papers of Robin Room. Full documents and abstracts of those papers can be located at <http://www.robinroom.net/> Below is a sampling of Robin Room's thinking and writing.

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### **GOVERNING IMAGES IN PUBLIC DISCOURSE ABOUT PROBLEMATIC DRINKING**

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#### **SYNOPSIS**

The chapter reviews studies of governing images or "discursive formations" of problematic drinking. Analyses in the late 1960s first systematically contrasted different "models of alcoholism" and conceptualizations of the "deviant drinker". These initiated a sociological tradition of "constructivist" analysis of the "medicalization of deviance", primarily focused on the rise of the disease concept of alcoholism in the modern era. Starting in the late 1970s, historical analyses argued that the initiation of "addiction" concepts came much earlier, and were popularized as part of 19<sup>th</sup> century temperance movement thinking. Recent analyses in the cultural studies tradition have placed the alcohol discourse in a broader frame of discourse in English-speaking societies about "diseases of the will".

Meanwhile, research on discursive formations has expanded to take into account ideologies of alcohol control, including the “new public health approach”, and a loosely-linked “alcohol problems” approach. Particularly in Nordic countries, attention has been given to the competing discourses of neoliberalism and of the welfare state, which have been the dominant discourses in the debate over Nordic alcohol control measures.

In their timing and location, the appearance of analyses of a particular governing image are themselves a signal and symptom that that conceptualization is coming under critical scrutiny. More attention is needed in future work on discursive formations to who uses a discourse, and how it is received; to the boundaries of application of a discourse, and to breaks and imperfections in its application; and to the relation between governing images and the images, attitudes and arguments at the level of everyday communications.

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The potential problems from drinking of alcoholic beverages have been the subject of public discourse for all of recorded history. An ancient Egyptian text, for instance, offers the injunction:

Make not thyself helpless in drinking in the beer shop. For will not the words of thy report repeated slip out from thy mouth without thou knowing that thou has uttered them? Falling down thy limbs will be broken, and no one will give thee a hand to help thee up. As for thy companions in the swilling of beer, they will get up and say, “Outside with this drunkard”. (Budge, 1972)

The text illustrates that there are at least two levels of understanding operating in any communication. In the first place, the text is an argument about drinking and its potential adverse consequences that is intended to inform or persuade. We can thus analyze the text in terms of its subject-matter and message.

In the second place, the text includes within it a whole way of thinking about alcohol. We notice that the message assumes a concept of a “drunkard” as a moralized social category, carrying a negative stigma. The text is thus giving us a scrap of evidence about a way of thinking about drinking assumed by the writer to be both understood and shared by the readers.

Nowadays, the term “discourse” is used for both these aspects of communication. The meaning which concerns us here is the second, referring to a system of thinking about a particular topic, and relating back to Foucault’s concept (1972) of a “discursive formation”. Thus Sutton (1998), for instance, distinguishes between several major formulations of the nature of alcohol problems in Swedish history. In this sense, “a discourse may be understood as a bounded body of knowledge and associated practices, a particular identifiable way of giving meaning to reality via words or images” (Lupton, 1999:15). Earlier analyses in the field had used other terms roughly in place of this sense of “discourse”, talking in terms of “models of alcoholism”, for instance (Siegler, Osmond and Newell, 1968; Bruun, 1971), of “conceptions” (Levine, 1978), or of “governing images” (Room, 1974, 1978; Moore and Gerstein, 1981).

The reader is thus referred elsewhere for material on discourse at the level of

elements of meaning and their relationship, often discussed in the alcohol literature in terms of “representations” (e.g., Paakanen and Sulkunen, 1987), “images” (e.g., Sulkunen, 1998), or “portrayals” (e.g., Grube, 1993), and for reviews of the substantial literatures on the content of communications about alcohol and their persuasive value (Casswell, 1995; Martin and Mail, 1995; Baillie, 1996), and on representations of alcohol in fiction and other literary works (Forseth, 1999).

### Moral vs. medical models

That drinking or alcohol problems can be conceptualized and discussed in very different terms has been self-evident in societies such as the United States, where the conceptualizations have been openly contested during the last two centuries. In such circumstances, it has not required scholarship to perceive that alcoholic beverages could be defined alternatively as “the good creature of God” or the “demon rum” (Levine, 1983), and that problematic drinkers could be defined alternatively as “drunkards” or as “alcoholics”.

Systematic efforts to describe and contrast different discourses or conceptualizations of problematic drinking may be dated from Gusfield’s paper (1967) on “moral passage” and Siegler, Osmond and Newell’s paper (1968) on “models of alcoholism” (see also Bruun, 1971). Siegler et al. laid out a number of alternative conceptualizations of the problematic drinker, and sought to systematically fill in the blanks for each model in terms of its definition of the drinker and the implications for the drinker’s social handling. While “moral” and “medical” models are distinguished in the classification, the authors further distinguish within these general rubrics between different “moral” and different “medical” models. The ideas that there are multiple medical models, and that medical and moral models were not necessarily mutually exclusive, have received some further attention (Room, 1974; 1978), but are still overlooked in much analysis.

While Siegler et al. had not focused on the historical succession of conceptualizations, this issue was at the heart of Gusfield’s analysis (1967), which traced the succession of three different dominant conceptions of the “deviant drinker” in the United States in the preceding century and a half. In the first period of temperance ferment, oriented to “moral suasion”, the dominant image, Gusfield proposed, was the “repentant drinker”. In the latter part of the 19th century, as the temperance movement moved towards legislating sobriety, the image shifted to the “enemy drinker”. In the 1940s, after the collapse of the temperance cause and the Repeal of Prohibition, the image shifted again to the “sick drinker”. Gusfield emphasizes the symbolic functions of laws and official acts expressing such conceptions, whereby the “worth of one set of norms” over others is publicly affirmed, and the role of social “movements to redefine behavior” in catalyzing the “transition of the behavior from one moral status to another”.

The shift towards the “disease concept of alcoholism” in the 1930s and after has drawn considerable further attention by sociologists. Building on a perspective which Gusfield’s 1967 analysis pioneered, Schneider (1978) and Conrad and Schneider (1980) adopted a self-conscious framing as “historical social constructionists” (now often termed “constructivists”), emphasizing the social processes by which concepts are created and take on social authority. Conrad and Schneider fit the alcoholism story into an analysis of the “medicalization of deviance” as a general historical shift. On the other hand, focusing specifically on alcohol, Roizen (1991) analyzed the repeated efforts to find a

discourse about alcohol problems which the American public could accept in the 1930s and 1940s, after the debacle of Prohibition. While these analyses have focused primarily on the role of ideological entrepreneurs, and their interaction with and effects on public discourse, other analyses have shown how the shift in discourse had effects, too, on the mainstream of scientific and biomedical knowledge (Herd, 1992; Katcher, 1993).

### The rise of the addiction concept

In his landmark paper on “the discovery of addiction”, Levine (1978) shifted the focus of attention to the early 19th century, more than a century earlier than the period which was the focus of discussions of the rise of the modern “disease concept of alcoholism”. Paralleling analyses by Foucault and Rothman of the shift in perspective and discourse that brought into being the 19th century mental asylum, Levine argued that the addiction concept was first developed for alcohol, and that it arose in connection with early temperance thinking, in a social context of a heightened concern for self-control in Jacksonian America.

Porter (1985) and Warner (1994) have since argued that the inception of the addiction concept must be pushed back from Levine’s dating, with Porter finding an addiction concept in 18th-century British medical writers, and Warner (1994) in 17th and 18th-century sermons. It is unclear, however, how widely such concepts were accepted then. Acknowledging Porter’s and Warner’s evidence, it can still be argued that Levine’s dating of the rise of addiction concepts is right, in terms of broad-based popular discourse about drinking. Supportive evidence can be found in McCormick’s pioneering study (1969) of conceptions of problematic drinking in English literature. “When we look at fiction about 1830, when the industrial revolution was in full swing”, McCormick concluded, “we find that the same drinking may be described as existed 80 years before but that a new and more desperate kind of solitary, tragic and inexplicable drinking has come into existence beside it.”

These discussions of the advent of the addiction concept in the 19<sup>th</sup> century have been primarily limited to material from Britain and the United States. Although it is clear that addiction concepts also became rooted in other European societies in the course of the 19<sup>th</sup> century (e.g., Baumohl and Room, 1987), relatively little historical work has appeared, in English at least, focusing on the shift in discourse associated with the advent of the addiction concept (but see Mitchell, 1986; Sournia, 1990).

There has, however, been some research and analysis on the applicability of alcoholism or addiction concepts in a broader frame cross-culturally. The present author argued that alcoholism could be regarded as a “culture-bound syndrome” (Room, 1985), given the ethnographic evidence that interpretations of problematic drinking in terms of loss of control were culturally specific, depending among other things on a cultural expectation of personal self-control. As Lemert (1951:356) had earlier noted, the theme of lack of self-control at the heart of American attitudes to the alcoholic “is one of the most vivid and isolating distinctions which can be made in a culture which attributes morality, success, and respectability to the power of a disciplined will.” In a given society, Lemert proposed,

in order for chronic alcohol addiction or compulsive drinking to develop, there must be strong disapproval of the consequences of drinking or of drinking itself beyond a certain point of intoxication, so that the culture induces guilt and

depression over drinking and extreme drunkenness per se. (Lemert, 1951: 348-349)

Along the same line, qualitative research on a World Health Organization project has raised further questions about the cross-cultural applicability of current diagnostic concepts of dependence (Room et al., 1996; Schmidt and Room, 1999), although other studies, using quantitative factor-analytic methods, have argued for the cross-cultural applicability of the alcohol dependence syndrome (e.g., Hall et al., 1993).

Recently, the burgeoning field of cultural studies has begun to take an interest in the issue of self-control and the will as a focal conceptualization and concern in English-speaking cultures. The discourse around alcohol is brought into analyses like Sedgewick's essay (1992) on "epidemics of the will" and Keane's work (1998), in the context of a broader discussion of the cultural position of concepts of willpower and addiction. Peele (1995) offers a more partisan critique of addiction concepts as fueling the growth of an anti-addiction industry in the U.S. Valverde's recent volume on Diseases of the Will (1998) returns problematic drinking to a central place in the discussion, analyzing it as an object both of self-control and of state control.

#### The impact of the temperance movement: reactions and continuities

The historical analyses we have been discussing can be seen as driven by the central feature in the landscape of discourse on problematic drinking in English-speaking societies in the last two centuries: the rise of the temperance movement, and its aftermath (including the movement's political decline). In this context, the main object of research attention has been the governing image of addiction, as a way of problematizing and understanding some or all drinking. While the "medicalization of deviance" tradition has emphasized the transition between different governing images in the 20<sup>th</sup> century, analyses like Levine's have emphasized the transition to temperance from conceptions of earlier times, and have focused on the continuities in conceptions and discourse between the temperance era and more recent decades.

Temperance movement thinking about alcohol extended well beyond the domain of addiction concepts (e.g., Levine, 1983b). And temperance movements of the 19<sup>th</sup> and early 20<sup>th</sup> centuries were heavily intertwined with the major "progressive" movements of the day -- abolition of slavery, women's rights, socialism, and in many places nationalism and nation-building. The extensive historical literature on these movements, and on those who opposed them, often considers or touches on the ways of thinking and discourse of those involved, but is beyond the scope of this essay. For relevant historical studies, the reader is referred to bibliographic essays by Verhey (1991) and in the pages of the Social History of Alcohol Review.

#### "Alcohol problems" and alcohol control

Research on frames for problematic drinking and for social responses to it has expanded in recent years to take into account ideologies of state control of the alcohol market. As Levine (1983a) notes, the idea of state alcohol control developed explicitly as an alternative to prohibition, and thus was bitterly opposed by the mainstream of the temperance movement. The idea, which often included the idea of the state monopolizing all or part of the industry, remained an elite rather than popular discourse nearly everywhere until and unless it was actually put into practice. As government

monopolies were implemented, in Sweden incrementally after 1850 (Frånberg, 1987), in Russia around 1900 (McKee, 1997), in Canada in the 1920s (Smart and Ogborne, 1996) and in 18 states in the U.S. in 1934 (Room, 1987), they often set the frame for continuing debates in these societies about government versus individual responsibilities for controlling problematic drinking. Thus this framing of discourse about alcohol has figured prominently in current analyses based on Swedish (Sutton, 1998) and Canadian (Valverde, 1998) experience.

Analyses have begun to appear of a relatively recent formulation of the argument for state intervention in the alcohol market, variously called the “total consumption approach” or the “new public health approach”. This framing is at centre stage in Sutton’s analysis (1998) of Swedish alcohol discourses; only in the Nordic countries, and particularly in Sweden, could this framing be considered to have entered popular discourse, rather than remaining an elite discussion. The discourse also plays a part in the story in the growing field of studies of the formation of government alcohol policies, both in the Nordic countries (e.g., Holder et al., 1998) and elsewhere (e.g., Baggott, 1990).

Loosely linked with the “new public health approach” has been a conceptualization of the focus of discussion in terms of “alcohol-related problems” or “drinking problems”. Whereas the classic alcoholism concept had tended to regard all specific health and social problems as symptoms of a unitary alcoholism, the “alcohol problems” approach disaggregated the field into wide diversity of health, casualty, interactional and social problems related to alcohol consumption or drinking compartment. Though some formulations in the “alcohol problems” tradition subsume alcoholism or alcohol dependence as one more among the problems (e.g., Edwards et al., 1977), the approach tended to be counterposed to an approach in terms of “alcoholism” (Room, 1984). For instance, one early formulation argued, after listing “the most important kinds of damage caused by alcohol, alcoholism is excluded from the classification because the damage caused by alcoholics already appears in the above classes” (Bruun, 1973). This tradition, too, has received some constructivist scrutiny (Levine, 1984).

#### The dialectic of control: consumer sovereignty and external governance

In an era in which the tide has flowed strongly in favour of privatization and of the doctrine of consumer sovereignty, a framing of alcohol issues in terms of “alcohol control” or “alcohol policy” -- relatively recent terms in the alcohol literature (Room, 1999) -- is now seen by many as an assertion of state power at the expense of individual autonomy. As Tigerstedt (forthcoming) points out, there is some irony in this, as the framing, with its emphasis on patterns and problems at the level of the population as whole, was originally put forward as a justification for dismantling individual-level social controls on drinking in Nordic countries.

A number of recent studies in Nordic and neighboring countries have paid detailed attention to the competing discourses concerning drinking and conceptualizations of drinking and alcohol problems, often in the context of general discourses about social problems (e.g., Simpura and Tigerstedt, 1992; Lagerspetz, 1994; Hanhinen and Törrönen, 1998). Contrasting the framing of newspaper discussions by public health advocates and by advocates of looser Swedish alcohol controls, Olsson (1990) noted that the public health discourse tended to use statistical and impersonal

arguments, while opposing arguments were pitched at the personal and anecdotal level. Those opposed to the current controls offered an alternative “dream of a better order”, in which the central role of alcohol still remains, but ... it is less dramatic and ... the negative consequences of alcohol are believed to be minimized. The continental drinking culture is the theme of this dream, nourished by the shame felt about what is felt to be the dominating drinking culture,... the Scandinavian way of drinking, which is characterized by heavy drinking, drunkenness, and violence. (Olsson, 1990)

In a participant-observation study of the ways of thinking and speaking of middle-class regular drinkers in Helsinki, Sulkunen (1992) found among their generally relaxed views on moral questions one strand of “militantism”: an “antipathy of external control and patronizing over individuals, particularly over drinking in public” (p. 114). “Their rally against the moral barrier [between alcohol and everyday life] finds an easy target in the public alcohol control system” (p. 117). Likewise, focus groups with local influentials in a Finnish community study (Holmila, 1997) found a strong contingent of “neoliberals”, who saw decisions about drinking as a matter for individual decision and autonomy, in contrast to those whose thinking ran in older liberal terms, with authority resting with the family, or the supporters of welfare state thinking, who assigned the state a substantial role in preventing problems from drinking.

### Some conclusions and suggestions

A constructivist perspective on constructivist analyses. The timing and orientation of the studies we have been considering suggests that analyses of the discourse of a particular conceptualization in the alcohol field are themselves a signal and symptom of the fact that that conceptualization is under critical scrutiny, and often under attack. Already in the late 1960s and early 1970s, the disease concept of alcoholism was under critical scrutiny by sociologists (Room, 1983). By treating it as just one more “model” to be ranged alongside others, analyses such as those by Siegler et al. (1968) and Bruun (1971) were implicitly putting in question the model’s claim to be the “new scientific approach” which transcended all others. Likewise, Levine’s analysis (1978) in terms of a continuity between temperance thinking and the alcoholism concept undercut arguments by the alcoholism movement that their conceptualization was a “new scientific” replacement for temperance models.

In a similar fashion, the new cultural studies of “epidemics of the will” (Sedgewick, 1992) and historical analyses of the idea of “diseases of the will” (Valverde, 1998) come in the wake of a new North American efflorescence of concerns about self-control, expressed among other ways in a fanning-out into other preoccupations, from its origin in Alcoholics Anonymous, of 12-step ideology (Room, 1992; Rice, 1996). Along with the new cultural studies have come more polemical critiques of these trends (e.g., Kaminer, 1992; Rapping, 1996).

Even more obviously, analyses of the discourse of alcohol control and of the “public health approach” have primarily emanated from societies (Canada and the Nordic countries) and a time when alcohol controls have been being weakened or dismantled (Holder et al., 1998; Her et al., 1999), and public discourse about a “total consumption model” has been losing ground (Sutton, 1998). These changes also provide a context for the recent Nordic studies of the competing neoliberal discourse in terms of individual consumer autonomy.

The dating and shape of the current literature suggests a slightly facetious

conclusion: when an eager young scholar comes to you offering a label for the conceptual framing you have been struggling toward or working within, and proposing to study it as a discourse, then you know you are history.

That the analyses are to some extent creatures of their own time and place does not, of course, in any way invalidate them. The work we have been considering includes solid research and some brilliant thinking, and makes contributions which will last beyond its own historical moment. But the record so far does leave a question: Is there some way in which such work can be stimulated in other times and places, where there is no alternative conceptualization to lean on, and before scholars are growing uneasy with the old dispensation?

Who uses a discourse, and how is it received? In recent decades, a revolution in historiography has broadened the attention of historians from the narrow focus of diplomatic and intellectual history to the broader spheres of social and cultural history. Imperfectly, and as yet only partially, a version of this expansion of attention is under way in analyses of public discourse on alcohol. Studies still appear which are primarily grounded on policy documents and medical, professional or research literatures, but the questions of who shares a discourse in common and of how communications within a particular discourse are received by various audiences are coming more to the fore. The use of focus groups and participant observation methods, as in the recent Nordic studies, open up the possibility of understanding how discursive formations are actually put to use in everyday reasoning and conversation, of studying who adheres to a discourse and interpersonal variations in its expression, and of testing how those holding to one discourse respond when challenged from another.

Quantitative methods such as sample surveys may also play a part in helping us understand the cultural complexes which we have been calling governing images or discursive formations. In the context of such surveys, approaches such as offering respondents vignettes to think their way through, and recording and analyzing their open-ended responses, offer the promise of capturing the reasoning and associations that tie the discursive formation together.

The reach of a governing image, and its imperfect hegemony. A governing image or discursive formation gathers together a broad field in terms of a single frame of understanding, often summarized in a few shorthand phrases. It is thus always an imperfect fit to the reality it seeks to cover (Room, 1978); adherents will tend to downplay the discrepancies, while opponents, if any, will tend to focus on them. The conceptual terrain which a governing image seeks to cover may expand or contract over time. Thus, for instance, the extent to which drinking-driving is to be understood in terms of alcoholism has varied in the last 30 years in North America. For another example, alcoholism concepts are surprisingly absent from North American public discourse about the role of intoxication in sexual and other violent crimes (Room, 1996). More attention to the boundaries of application of governing images will give us a better understanding of their core of meaning and their social significance.

In fact, it is quite common for people, even when quite committed to a particular discursive frame, to shift into and out of it in different contexts. Someone strongly committed to talking about and understanding the world in terms of scientific rationality may nevertheless read and half believe the newspaper's horoscope column. It even seems possible and fairly common to work within supposedly antagonistic conceptual frames for the same material. Thus Kaskutas (1992) reports that 29% of the members of



Women for Sobriety also concurrently attend Alcoholics Anonymous, and Connors and Dermen (1996) report 35% concurrently attending AA for members of Secular Organizations for Sobriety (SOS) -- though both WFS and SOS were founded around critiques of some of AA's central ideas. In the words of an AA slogan, it is not unusual, with respect to discursive formations, for people to "take what you can use and leave the rest".

In the context of linguistic studies, attention is now given to these "breaks" and discontinuities in the framing and logic of speech, as especially informative about the structure of thinking and discourse (e.g., Arminen, 1998). Analyses like this at the level of conceptualizations and discursive formations would give us a much better understanding of the collective thinking and social processes surrounding governing images of problematic drinking.

Discursive formations and the analysis of everyday discourse. At the level of empirical work, the boundary between studying a governing image or discursive formation and studying discourse in its other meaning -- the imagery, associations, and structure of argument of speech or other communications -- is often unclear. We have excluded from consideration here the wide range of survey and experimental studies of attitudes and expectancies about drinking, and survey studies of reasons for drinking and of attitudes towards public policies on alcohol and on community responses to alcohol problems. For purposes of studying discursive formations, off-the-cuff responses to the precoded questions in such studies tend to offer only fragments of the picture. Along with content analysis of texts and other prepared communications, however, they do provide the material for analyses of images, attitudes and arguments in everyday life. We need some clear thinking about analyses of the relation between the two levels, that of discursive formations and that of everyday discussion, as a prelude to actual analyses of the interrelations.

The dynamics of competition between discourses. The alcohol experience suggests that old discourses rarely die; they go out of fashion, or they go underground as being "politically incorrect", but there are still elements of them extant in the culture in which they once flourished. Though Gusfield's early formulation (1967) was in terms of shifting designations of the deviant drinker over time, his later work fully recognizes that American social thought on problematic drinking is a matter of continually "contested meanings" (Gusfield, 1996). While the focus of the sociological constructivist tradition has often been on the ideological entrepreneurs who push forward a new conceptualization, attention is needed to do to the responses of various audiences to the ideological contests.

In this regard, new attention is needed to the various "moral models" of problematic drinking. Long after the demise of the north American temperance movement, it is clear that "moral models" of drinking are alive and well, and indeed riding in triumph in the context of criminal law (e.g., Keiter, 1997). New moral-accountability discourses can be found also in such contexts as cognitive behavioural psychology and economic theories of "rational addiction" (Elster and Skog, 1999). As Valverde (1998:203) suggests, after documenting discontinuities between the Canadian medical-social and criminal-justice discourses, "uncovering historical connections would be helpful in breaking through vicious circles and avoiding unknowing, forgetful repetitions".

More sustained attention is also needed to the relation between discourses of

normalized drinking -- drinking as a pleasure and a social activity -- and the discourses of problematic drinking which have been our focus here. For that matter, the somewhat more hidden discourses in praise of intoxication need also to be taken into account. The theme of needing to understand the “pathological” in the context of the “normal” is an old one in alcohol studies; as Gusfield (1996:40) found in making the point, Selden Bacon, the founder of modern alcohol sociology, had made it forcefully and repeatedly over a period of 30 years and more.

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