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**INTERVENTION: REALITY TV, WHITENESS, AND NARRATIVES OF ADDICTION**

Jessie Daniels

**ABSTRACT**

Purpose – Reality TV shows that feature embodied “transformations” are popular, including Intervention, a program that depicts therapeutic recovery from addiction to “health.” The purpose of this chapter is to address the ways whiteness constitutes narratives of addiction on Intervention.

Methodology – This analysis uses a mixed methodology. I conducted a systematic analysis of nine (9) seasons of one hundred and forty-seven (147) episodes featuring one hundred and fifty-seven individual “addicts” (157) and logged details, including race and gender. For the qualitative analysis, I watched each episode more than once (some, I watched several times) and took extensive notes on each episode.

Findings – The majority of characters (87%) are white, and the audience is invited to gaze through a white lens that tells a particular kind of story about addiction. The therapeutic model valorized by Intervention rests on neoliberal regimes of self-sufficient citizenship that compel us all toward “health” and becoming “productive” citizens. Such regimes presume whiteness. Failure to comply with an intervention becomes a “tragedy” of...
wasted whiteness. When talk of racism erupts, producers work to re-frame it in ways that erase systemic racism.

Social implications – The whiteness embedded in Intervention serves to justify and reinforce the punitive regimes of controlling African American and Latina/o drug users through the criminal justice system while controlling white drug users through self-disciplining therapeutic regimes of rehab.

Originality – Systematic studies of media content consistently find a connection between media representations of addiction and narratives about race, yet whiteness has rarely been the critical focus of addiction.

INTRODUCTION

Visual media is a key mechanism for both reflecting and shaping the medicalization of social problems and everyday life (King & Watson, 2005; Seale, 2002, 2004). Historically, drug scares in the United States have been racially inflected. Systematic studies of media content consistently find a connection between media representations of addiction and narratives about race. People who are members of racial and ethnic minority groups are more often portrayed as “addicts” (Taylor, 2008). Research also finds that blacks are portrayed as more menacing than whites in news stories involving drug use (Peffley, Shields, & Williams, 1996; Reinarman & Levine, 2004). Even though someone could be an “addict” and not break any laws, dominant media narratives about “addicts” and “lawbreakers” often regard these two labels as synonymous and racialized. In this trajectory, “addicts” become “lawbreakers,” and they are almost always coded as racial Others (Dixon & Linz, 2000).

Yet, only rarely and very recently has whiteness been the focus of critical attention when it comes to representations of addiction in the media (Linneman, 2010; Murakawa, 2011) or health (Daniels & Schulz, 2006). Media studies scholars point to Richard Dyer’s (1988) essay “White” in the film journal Screen as the catalyst for subsequent scholarly considerations of the representational power of whiteness, a mercurial topic to analyze precisely because it does not inhere in bodies but rather functions to reinforce a system of domination (Nakayama, 2000). At issue is not only the representation of whiteness, but what whiteness is used to do (Projansky & Ono, 1999). The white racial frame (Feagin, 2006, 2010) is a key component
of how whiteness gets operationalized in popular culture. In the current sociopolitical milieu and multimedia landscapes, whiteness is deployed to shape popular understandings of addiction through representations on reality TV.

In the past ten years, the U.S. broadcast media landscape has been transformed by the proliferation of nonfiction television, so-called “reality TV.” Driven by low production costs and drawing large audiences for advertisers, reality TV shows are increasingly popular, cover a range of topics, and appear on an expanding number of networks, as well as online. The focus of a subset of reality TV shows is “transformation” and “makeover.” (Hearn, 2008; Heller, 2008; Lewis, 2008; Ouellette & Hay, 2008). While some shows focus on “transforming” home interiors (e.g., Changing Rooms) or individual wardrobes (e.g., What Not to Wear), the “transformations” offered through many reality TV shows are situated in the bodies of their subjects (e.g., The Biggest Loser). These embodied, televisual transformations are staged as moving subjects from failure to success (Sender & Sullivan, 2008), from illness to health, even from death to life. Some of those who participate in the shows say things like “this TV show saved my life,” while others challenge the health effects of participating in transformations stage crafted for a viewing audience.1 The supposed life-and-death stakes are especially salient within reality TV shows that feature the transformation from addiction to recovery and sobriety.

Among the more popular shows engaged in this transformative reality TV is A&E’s Emmy-Award winning show Intervention, which features people “who struggle with addiction.”

The show Intervention has been a huge success when measured in terms of viewership, awards and in re-shaping cable networks’ schedules toward reality-based programming. Debuting on the A&E network in March 2005, Intervention is (at this writing) in its eleventh season, and it is consistently among the network’s highest-rated series. The initial episode of Season 11 (in 2012) drew 1.8 million viewers, 1.2 million in adults in the sought-after 18–49 demographic, and 1.1 million among 25-year olds to 54-year olds. In 2009, Intervention won the Emmy® for Outstanding Reality Series. It has also won five “PRISM” awards, given by Substance Abuse and Mental Health Services Administration (SAMHSA) and the Entertainment Industries Council to honor productions that are “not only powerfully entertaining, but realistically show substances abuse and addiction, as well as mental health issues.”

These awards speak to the way the show has been validated by both the entertainment and recovery industries for its portrayal of addiction. An
executive producer with *Intervention* has referred to the show as “a critical turning point” that created a “big change in the network’s entire approach to programming.” And, indeed it has. A&E’s *Intervention* has been joined by an entire programming schedule filled with other reality-based TV shows (e.g., *Hoarders*, *Billy the Exterminator*, *Storage Wars*). And that change has had a ripple effect on other networks that now feature their own addiction-related programming, such as TLC’s *My Strange Addiction*, about anxiety disorders, and VH1’s *Celebrity Rehab with Dr. Drew*. The success of *Intervention* signals the transformation of the media landscape into one in which reality-based TV has become a mechanism in the increasing demand for self-governance in the post-welfare state (Murray & Oullette, 2008; Ouellette & Hay, 2008). Embodied transformation through reality TV such as *Intervention* has become a domain through which television contributes to the neoliberal reinvention of government and the production of a self-sufficient, “healthy” citizenry (Ouellette & Hay, 2008, p. 477). I contend that the imagined neoliberal citizen on *Intervention* is white, that the perspective of the show is through a white racial frame, and that the narratives of addiction and recovery depicted on the show are rooted in discursive practices of whiteness.

In the chapter that follows, I review relevant literature on media stereotypes of race and addiction, with a particular focus on whiteness, then, I turn to the methodology and findings of the study. I find that whites are disproportionately represented on *Intervention* and that this suggests narratives of addiction and recovery are rooted in a white racial frame that contains individual tragedy, therapeutic recovery from addiction to “health,” and neoliberal self-sufficiency. I conclude by exploring some of the social and political implications of this frame for understanding whiteness and addiction.

**MEDIA STEREOTYPES OF RACE AND ADDICTION**

Stereotypes of race and addiction have been mapped on to particular racial and ethnic groups along with specific substances at particular historical moments (Chiricos, 1996). For example, Irish immigrants were so heavily associated with alcohol and public drunkenness in the mid-19th century that the police vans are still often referred to as “Paddy Wagons,” a lingering racial epithet for the Irish (Ross, 2003). Asian Americans, particularly Chinese immigrants in the early 1900s, were configured as “opium fiends,” in popular press accounts at a time when they were also described as
“spreading disease” in San Francisco (Shah, 2001). The portrayal of the “drunk Indian” in Hollywood films configures Native Americans as uniquely vulnerable to alcohol throughout the 1950s and 1970s, a period in which Native Americans were driven even further into government-created poverty and launched a powerful resistance movement (Aleiss, 2005). Propaganda campaigns in the 1920s and 1930s warned against the encroaching “Marijuana Menace,” and these efforts were joined with anti-Mexican sentiments (Meier, 1994).3 The U.S. government, through the Federal Bureau of Narcotics (now the Office of National Drug Control Policy) contributed to the hysteria, racism, and xenophobia by asserting that marijuana use led to violent crimes, most often by racial and ethnic minority group members (Meier, 1994). The association between Latinos and marijuana is so endemic in U.S. popular culture that it makes possible a self-directed spoof of that narrative in the film Up In Smoke (1978) in which Cheech Marin makes fun of the weed-addled Latino (List, 1992). Yet, these racialized – and racist – associations between a particular racial or ethnic group ignore the fact that the majority of drug use in the United States is by whites. These media stereotypes of race and addiction only work when set against a presumed norm of whiteness.

Whiteness, like other racial categories, is socially constructed and actively maintained. Thought of in this way, whiteness is not an immutable category but is accomplished through the active efforts of human beings who create and maintain social boundaries by, for example, defining who is white and is not white (Allen, 1994; Daniels, 1997; Roediger, 2007; Wray, 2006). A key feature of whiteness is the unmarked quality of “white” as a racial category (Fine et al., 1997; Frankenberg, 1993). This seeming invisibility of whiteness is itself a mechanism of privilege because it allows those within the category “white” to think of themselves as simply human, individual and without race, while others are racialized (Feagin & Vera, 1994; Dyer, 1998). A number of scholars from DuBois onward (Twine & Gallagher, 2008) have observed that “black folks have, from slavery on, shared with one another … knowledge of whiteness gleaned from close scrutiny of white people” (Hooks, 1992, p. 338). The aim of most studies of whiteness, like this one, is therefore to problematize the ways in which whiteness has remained unremarked and “normal.”

One of the pitfalls in many studies of whiteness is that they can be merely descriptive rather than analytic. Such overly simplified accounts of the behavior, tastes, and proclivities presume that whiteness inheres within a discrete set of people (Bonnett, 1996; Fiske, 1994). This is perhaps most obvious in the popular website and book by Christian Lander, Stuff White
People Like (Lander, 2008). However, whiteness is not just about white bodies and skin color (Nakayama, 2000; Shome, 1999). Whiteness is about the discursive practices that, because of colonialism and neocolonialism, privilege and sustain the global dominance of white imperial subjects and Eurocentric worldviews (Shome, 1999, p. 108). My own understanding of whiteness echoes these approaches and incorporates more recent work that extends these further to include a critique of elite whites who actively participate in shaping public policy and mainstream media through a white racial frame in which whiteness is the assumed norm (Feagin, 2006, 2010). Cross (2001) has demonstrated how assumptions about whiteness and science circulate very widely through broadcast media in television shows about the Human Genome Diversity Project (HGDP). Specifically, Cross argues that the implicit whiteness in these shows constructs the HGDP as objective, universal science when, in fact, it is located in specific, discursive practices (Cross, 2001, pp. 416–417). In the following chapter, I build on analyses like that of Cross to address the ways in whiteness helps to constitute particular representations of addiction on Intervention and the extent to which collective thinking about addiction may indeed be shaped by these notions.

METHODOLOGY

My analysis of Intervention utilizes a mixed methodology, incorporating elements of quantitative content analysis and more qualitative discourse analysis. As a methodological framework, I incorporate Griswold’s (1987) conceptualization of the cultural diamond in which she posits that the sociological analysis of any cultural product should include four elements: (1) text, (2) production, (3) social context, and (4) audience reception. This chapter is part of a larger work, and I have chosen to leave the examination of audience reception to future iterations of this research. Here, I focus primarily on the text of the shows, their production, and the social context in which they are viewed.

I conducted a systematic analysis of Intervention, including nine (9) seasons of one hundred and forty-seven (147) episodes featuring one hundred and fifty-seven individual main characters or “addicts” (157). For the quantitative content analysis, I logged details of each episode I watched including: a unique identifier for each episode, the name of the main character, the region, the original air date, substances to which the main character is identified as being addicted (both primary and secondary), their
race, gender, and (when available) their occupation, age, and sexual orientation.

For the qualitative analysis, I watched each episode more than once and took extensive notes on each episode, focusing on what particular characters (including “addicts,” interventionists, and family members) said and did. I kept track of the text cards (white text on a black background) used extensively in each show. Further, I noted how the main characters responded to the intervention and what the reported “final” outcomes were for each character. For example, each episode ends with an epilogue about where the character is now, (e.g., “Vinnie left treatment after 29 days and his mother flew him home first class.”), and I recorded each of these. Finally, I noted when there was a relevant subtext to an episode, (e.g., as when an episode in season two included this: “The producer tried repeatedly to keep Sylvia from driving,” an event that appeared in several mainstream press accounts about the ethics of the show). The results from both the quantitative and qualitative analyses appear in the sections that follow.

FINDINGS

The characters featured on Intervention are evenly split in terms of gender (female = 72, male = 71), though compared to rates of drug use by gender (11.6% of men and 5.9% of women report substance abuse or dependence in national surveys), women are over-represented on the show. The data on the race of main characters featured on Intervention reveals a distinct racial pattern. Non-Hispanic) whites make up 63.7% and Latinas/os make up 16.3% of the general U.S. population, yet Latinas/os only appear as characters in 6% of episodes of Intervention. African Americans make up 12.6% of the U.S. population, while only 4% of those appearing on Intervention are black. Asian and Pacific Islanders make up 5% of the U.S. population and appear on Intervention as main characters 1% of the time. Approximately 3% of the U.S. population identifies as “having two or more races,” yet biracial or multiracial people only appeared in 1% of the episodes in Seasons 1–9. Native Americans make up approximately 1% of the U.S. population and appeared in 1% of the episodes. According to national survey data in the United States, illicit substance use across racial groups is roughly the same. Thus, whites, who appear in 87% of episodes, are overrepresented, and African Americans, Latinas/os and Asian/Pacific Islanders are underrepresented on Intervention (Chart 1).
IN MY HEART, I KNOW IT WAS A SUCCESSFUL INTERVENTION: THE INTERVENTIONISTS

People who are featured on Intervention are described by their families and the professional interventionists as having “hit rock bottom” (Tiger, 2012). But, “rock bottom” is a slippery place on which to stand and shifts constantly. As the interventionists are fond of saying, “rock bottom is different for every person.” The staged intervention occurs in the last quarter hour of each episode. Although each intervention is a “surprise,” there is very little that’s surprising about it for anyone who has viewed more than one episode. The setting for each intervention is a hotel meeting room; these are strikingly similar in their beige blandness, even though they are drawn from disparate regions of the United States. The script for each intervention is set the day before in a meeting between the families and the interventionists. Each family member composes a partially pre-scripted letter that starts with “I love you, and I remember when…,” which is then completed with a story from a happier time. The family goes on, “Your addiction has affected my life negatively in the following ways…,” then there is a recounting of horrific betrayal, sometimes violence, and most often bitter disappointment. Each family member, instructed by the VanVonderen or Finnigan, the show’s interventionists, reads the same script, as the camera alternates between close-ups of family members, the “addict,” many of whom are often tearful, and the interventionists who, for the most part, remain calmly unemotional throughout.
The basic premise of the intervention is that people are given a stark choice: go to rehab or lose all connection to the people sitting in the room. If they are resistant to going to treatment, then the “intervention brings the (rock) bottom to the alcoholic or addict.”6 This is achieved through an ultimatum given by those in the intervention room: go to rehab or lose all material possessions; it is within the power of those in the room to control. For many, this means losing their housing, car, mobile phone, and ongoing financial support. Taken together, the threat of the loss of social connection combined with the loss of material resources are powerful mechanisms of social control. When used as leverage to get people to go into treatment, it is often difficult to resist, even when one does not think that treatment is necessary.

However, some do manage to resist the powerful social control of an intervention. When this happens, interventions rely on additional mechanisms of social control, including law enforcement. Several times during Seasons 1–9, Jeff VanVonderen called upon law enforcement to assist him with an intervention. For instance, in Season 3, Dillon a white, 20-year-old meth user from Oklahoma, was suspicious of the “documentary crew” filming him and told his family that he would refuse to go to treatment should they stage an intervention. With this information, VanVonderen and Dillon’s mother go to the local sheriff’s office. There we see VanVonderen talking to the sheriff, saying:

We are asking you to be part of our therapeutic effort because, you know, obviously, it’s better to be therapeutic than punitive. We’ll get more done in the long run. If he still says no, even after we’re all finished ... then, he’s all yours.

Sheepishly but without hesitation, the sheriff says simply, “Ok,” and then appears throughout the episode as an assistant to VanVonderen and the intervention effort. This extreme form of coercion is relatively rare when considering all nine seasons of Intervention. It is precisely this overall lack of punitive law enforcement involvement and the predominant therapeutic model that speaks to the whiteness of addiction on Intervention.

Many reality TV shows that are engaged in projects of individual transformation typically employ “experts,” including physicians, psychologists, home organizers, and physical trainers to help facilitate the transformation of the subject. Like other reality-based shows Intervention puts the impetus to succeed in recovery on the individual “addict,” yet it recognizes that “most need help to stop.” In this program, help comes in the form of experts in the Johnson intervention technique, known as “interventionists.” As Nikolas Rose points out, in the context of neoliberalism, “individuals will want to be healthy, experts will instruct them on how to be
so, and entrepreneurs will exploit and enhance this market for health. Health will be ensured through a combination of the market, expertise, and a regulated autonomy” (1998, p. 162). Here, it is the work of several professional “interventionists” who are the featured experts on this show: Jeff VanVonderen, Candy Finnigan, and Ken Seely (all white). Seely has recently left the show, and several other interventionists (one Latino, one African American) have joined, but it is VanVonderen and Finnigan who most frequently appear in Seasons 1–9 as the interventionists and who serve as recurring characters and shapers of the narratives of addiction.

VanVonderen’s and Finnigan’s work on the show is to orchestrate interventions that result in the main character going to treatment at the end of the episode. When this fails, VanVonderen and Finnigan shore up the rhetoric of the “successful” intervention anyway. For example, Marquel, who is Cuban American, featured in Season 7 for her alcohol and exercise “addictions,” literally runs away when she suspects that Finnigan is conducting an intervention with help from Marquel’s father, stepmother, and sisters. The text cards near the end of the episode read: “3 Months Later/Marquel has not gone to treatment./She has not spoken to her family since the intervention.” Undaunted by this, Finnigan says to the family and the larger audience, “I feel in my heart it was a successful intervention.” It is not immediately clear how this counts as a “successful” intervention, except that Finnigan is pleased that they were able to remove Marquel’s two small children from her home.

Whether through the threat of punishment or through discursive re-framing, the interventionists serve as neoliberal experts instructing individuals on how to be “healthy.” The interventionists also share a similarity with the “white saviors” in feature films (Vera & Gordon, 2003). White saviors are idealized versions of white Americans depicted as powerful, brave, cordial, kind, firm, and generous. Finnigan and VanVonderen are the white saviors of Intervention. The interventionists, then, serve multiple roles within the frame of the show, both as experts guiding people to “health” and self-sufficiency, while also serving as white saviors rescuing “addicts” from excess, self-destruction, and wasted whiteness.

LOOKING AT ADDICTION THROUGH A WHITE LENS

The viewing audience of Intervention is invited to gaze through a white lens that tells a particular kind of story about addiction. The people who appear
on the show to “share their stories about addiction” are disproportionately white (87%). This is rather remarkable given the long history (recounted above and elsewhere in this volume) of the association between racial and ethnic minority groups and media depictions of drug use. The over-representation of white bodies depicted on Intervention is particularly striking during the current “drug war” era in which African Americans and Latinos are especially strongly linked with illicit drug use in dominant media narratives and given the embodied, physical, and social costs to African American and Latino communities associated with the government-sponsored war on (some) people who use (certain types of) drugs (Alexander, 2010; Hansen & Roberts, 2012). If the producers of Intervention were interested in creating a representative portrayal of drug use in the United States, the consequences of drug use would include incarceration, since drug offenses are a huge driver of the mass incarceration of people of color, and all racial and ethnic groups would be featured on the show in roughly even numbers (or, in proportion to their percentage of population). My critique, however, is not one that is grounded in a multicultural call for greater “diversity” or “representativeness” of the people on screen because I do not claim that whiteness inheres only in bodies socially and culturally marked as “white.” Instead, I want to call into question the representational power of whiteness and how it functions to reinforce a system of domination (Nakayama, 2000). The issue is not only the representation of whiteness on Intervention but also what whiteness is used to do.

The producers of Intervention present a narrative of addiction that is embedded in a white racial frame (Feagin 2010). For example, Intervention’s executive producer Dan Partland explains how stories are crafted for the show:

> We have a very long list of different elements we try to find in a story. The most important one is, will the story in some way challenge the stereotype of what addiction is? [emphasis added]

Here, Partland explains that he looks for stories that “challenge the stereotype of what addiction is.” Given the strong association between racialized Others and addiction in dominant media narratives, what Partland is referring to here is, at least in part, whiteness. Ironically, within the white racial frame in which addiction is almost universally equated with racialized Others, countering that racial stereotype necessarily requires casting whites as the “addicts.” This illustrates the persistent power of the white racial frame as a justifying ideology. It works like this: elite whites operating within a white racial frame that creates a racialized mythology of
addiction as residing in black and brown bodies and then this mythology is widely circulated in and through media. This mythology becomes part of the dominant narrative in the culture and then it is this “stereotype of addiction,” to which Partland refers. Therefore, featuring “addicts” who are disproportionately white becomes the only way to counter the prevailing racial stereotypes about addiction. Without an explicit critique of whiteness that interrogates the origins of racialized mythologies of race and addiction and the ways that the white racial frame helps shape the production decisions, we remain trapped within its hegemonic, normalizing power.

The white lens through which we are invited to view Intervention occludes our vision from other realities of drugs and addiction. The putative war on drugs, begun in the 1970s and continuing through today, has been a war on African American and Latina/o people who have disproportionately borne the brunt of draconian drug and law enforcement policies (Alexander, 2010). In 2009, the United States incarcerated some 2.4 million people in federal, state, and local prisons and jails. One in every 99.1 adults in the United States is incarcerated, the highest incarceration rate in the world. Of those incarcerated in state prisons for a drug-related offense, fully 75% are African American or Latina/o, even though whites make up a majority of the population in the United States, and whites use and sell drugs at roughly similar rates compared to other racial groups. In 2010, over 1.6 million people were arrested on non-violent drug charges. Yet, all the carnage and destruction created by the punitive “drug war” is missing from view in the therapeutically imbued Intervention.

The white lens through which the viewing audience is invited to see Intervention creates a narrative that is consistent with the social construction of addiction in the United States. In that it encourages a bifurcated approach to addiction in which there are “deserving addicts” who are worthy of treatment and “undeserving addicts” who should get punishment (Acker, 2002; Dingelstad, Gosden, Martin, & Vakas, 1996). While “deserving addicts” are featured on Intervention, “undeserving” drug users and dealers are featured on shows such as Cops (Brenton & Cohen, 2003; Doyle, 1998) or MSNBC’s seemingly limitless supply of reality-based prison shows, such as Locked Up. One writer has referred to this programming as “prison porn” (Parker, 2010). These media representations are deeply racialized and are heavily laden with assumptions about addiction and its consequences and about the appropriate responses to drug use. For the people of color almost exclusively featured in shows such as Cops or Locked Up, regimes of punishment are the only solutions available within the logic of these programs. On such shows, characters often appear without
back-stories, childhoods, and families or lost potential. They are inherently criminalized, irredeemably lost to society and utterly lacking in humanity. In contrast, the mostly white characters appearing on Intervention are given back-stories, lost childhoods, and caring families. The white drug-using people featured on Intervention are ideal types of unrealized potential, always on the brink of redemption through renewed will power and self-sufficiency. They, in contrast to those inherently lost souls on Locked Up, can be or have anything, if only they can overcome their addiction.

WASTED WHITENESS

Intervention crafts stories that audiences care about through the deployment of individual tragedy (Kosovski & Smith, 2011). These tragedies are racially inflected with concerns about white status decline. Each episode tells a portion of the main character’s story in flashback. The recreation of the past through a montage of family photos suggests to the viewer that the character “wasn’t always like this.” In what might otherwise be a remarkable and humanizing move (were it not for the way this reinscribes white privilege), the degraded image of the “addict” is contextualized by childhood photos that give the character dimensionality. Take, for example, the episode that features Kristen (Season 2), a twenty-four year old white woman from Wisconsin who identifies as “an alcoholic and a heroin addict.” The title cards at the beginning of the episode speak to the contrast of squandered potential referring to Kristen first as “The Mother” (she has a 6-year-old daughter,) and then as “The Heroin Addict.” Kristen’s mother, Janet, faces the camera and asks:

What happened to the little girl I knew? She was in the gifted and talented program. She always wanted to do something with art, something creative.

This idealized memory of Kristen as a child described by her mother is intercut with images of a smiling, blonde girl, seemingly carefree, riding her bicycle. This happy childhood was “shattered” when, at age 13, Kristen parents divorced. Every episode of Intervention features an idyllic childhood, shattered by some personal tragedy, as central to the eventual addiction. In the narrative of Intervention, the arrow between personal tragedy and addiction is drawn as if it were direct, unambiguous, and causal (Kosovski & Smith, 2011, p. 855). Kristen’s sister, Erin, offers a stark contrast to this lost past with her assessment of Kristen’s present reality: “I don’t know how you can get any worse than an alcoholic, heroin-addicted prostitute.”
The construction of Kristen’s story from a happy childhood to an adulthood that could not “get any worse” speaks to lost potential. The fact that this is viewed as a tragedy that could not be “any worse” suggests a whiteness in crisis. The social and cultural grandeur that whiteness sets itself up to (not) achieve brings with it a constant anxiety about the inability to achieve those heights (Hughey, 2010). Both the crisis for Kristen’s family and the tragedy within the televisual framework of Intervention are predicated upon the high expectations that go along with being young, gifted, female, and white in this society. Kristen is not only wasting her potential, she is wasting her whiteness.

While the show is framed around the issue of substance use, episodes like this one in which female drug users are also involved in sex work seem equally concerned with intervening on this activity. While Kristen clearly frames her involvement in prostitution as one rooted in the political economy of low-wage labor (“I worked one shift and paid my rent; I couldn’t go back to a job where I make six dollars an hour”), the producers of the show frame it differently. Toward the end of the episode as Kristen is seen checking into a residential treatment facility, they include an interview with her doctor at the recovery center who says: “I think the biggest challenge with Kristen is that she’s gone down to such a low level, morally.” This reference to Kristen’s “low level, morally” is a rather striking move from “sickness” to “badness,” a reversal of the usual process of medicalization (Conrad & Schneider, 2002) in that it moves away from a medicalized definition of addiction toward one rooted in moral failing. As if to reinforce Kristen’s moral failure (as a woman and as a “healthy” citizen), the producers of the show choose to include part of her farewell speech as she graduates from rehab after 120 days. Kristen says to one of her counselors:

I remember when you said the only hope you had for me was that I could become a lady and a productive member of society. I just love you so much. (emphasis added)

The counselor nods her head in agreement with Kristen as she says these words and they embrace. The coupling of Kristen’s twin goals to become a “lady” and a “productive member of society” speaks to the regimes of gendered dominance and neoliberal notions of self-sufficient citizenship that shape her life chances. These regimes are also racialized and presume whiteness. The way that Kristen will become “a lady” and a “productive member of society” is by adhering to codes of conduct proscribed for white, young, heterosexual women who are the mothers of young children. If Kristen relapses, within the narrative of Intervention this will be a tragedy
due primarily to a failure of her individual will. It will also be a tragedy of wasted whiteness.

This tragedy of wasted whiteness is, as Sears and Johnston (2010) suggest about predominantly white “stoner” films like *Up In Smoke*, “the specter of seeing white domination go “up in smoke” – via wasting, as opposed to hoarding, white privilege” (Sears & Johnston, 2010). They argue that this amounts to racial treason and helps explain why (straight) whites in stoner films find drug use so menacing. Similarly, Murakawa (2011) argues that both the meth “epidemic” and “meth mouth” are constructed as symptom and cause of white status decline, with dental decay the vehicle for anxieties about descent into “white trash” status. Thus, it is anxiety about squandering white privilege that characterizes both white “stoner” films and the faux epidemic of “meth mouth.” Virtually every episode of *Intervention* follows this form of wasted whiteness and squandered white privilege as a way constructing stories that “in some way challenge the stereotype” of addiction, as producer Dan Partland explained. But these are not the only stories on *Intervention*.

**“WONDER BREAD LAND”: WHITENESS AND THE ERASURE OF SYSTEMIC RACISM ON *INTERVENTION***

The narratives of whiteness on *Intervention* expand to include the small percentage (from 1% to 6%) of racial or ethnic minority group members who appear on the show. When Native Americans, African Americans, Asian Americans, or Latinas/os appear on the show, they both reaffirm and subvert the usual white-framed dominant narrative. For the most part, people of color are grafted onto whiteness when they appear on *Intervention*. They are extended the privileges of individuality associated with whiteness, and their addiction is framed as a “diseased response” to an individual personal tragedy (Kosovski & Smith, 2011, p. 854) just as it is for white people on the show. When race “erupts” in episodes that feature people of color, producers work to re-frame those moments within the white dominant narrative in ways that erase references to systemic racism (Feagin, 2006).

Gabe (Season 6) is a 20-year-old young man living in Minnesota. He introduces himself in the episode by explaining that he was born in Calcutta, India and adopted at an early age into a family with five other children.
He also says he is addicted to heroin and cocaine. Gabe says to the camera in the opening “there are 3 million street children in the city where I’m from,” and he allows that he “should feel grateful” to have been taken from life on the street in Calcutta, but he does not. Instead, he feels a persistent emptiness and loneliness. This opening narration from Gabe is intercut with scenes with his adopted family, who are white, evangelical Christians. Gabe’s brown skin and darker hair stand out in the crowd of fair-skinned, light-haired siblings and parents.

The episode follows the usual narrative of a happy childhood (after Gabe is adopted) that is now lost. In interviews about their childhood, one of his brothers (Matt) says: “I didn’t think of him as different. I mean, they told me he was different, but I didn’t really, like, realize it.” Then, there is a cut away to a childhood photo of Gabe and Matt, which shows a contrasting dark/blonde pair of young boys. His father says in voiceover: “He’s just part of the family, and I explained that to him. I said, ‘you’re my son, just like the rest of the kids.’ Why would it be any different?” The father smiles as he says this, and then there is a cut to a family photo from Gabe’s childhood, the one dark brown child among a crowd of seven white faces. The family and the producers of Intervention tell Gabe’s story in a color-blind framework that refuses to acknowledge difference. This does not work for Gabe, however.

In Gabe’s memory of his childhood, he acknowledges the effort his family put into making him feels included, but this effort could not withstand the system racism Gabe encountered both outside and inside the family. As tells the audience: “Whenever we would go out, people would see me and see the family, and ask me questions, about ‘how do I feel, not being part of the family?’” Gabe goes on to recount an especially painful story about a childhood scuffle with one of his brothers that their Grandfather stopped. He then told Gabe he “shouldn’t be part of this family.” While Gabe is clear about locating his unhappiness and his drug use in the racism he experienced as a child, for the most part, his family seems ill equipped to understand or deal with the racism he faces. His father’s explanation for Gabe’s trouble is this: “There is deeply within him a victim mentality. It’s always someone else’s fault.” Here, Gabe’s father is the embodied voice of the white racial frame, unable to understand his own son’s experience with racism, and the production of Intervention amplifies this view. This is clear when, during the intervention, Candy Finnigan interrupts the family members’ testimonies to say, “I was handpicked to do this because, well … I’m adopted, and drugs and alcohol were just a symptom for me,” and she begins to cry. This dramatic and unexpected moment in the highly formulaic show moves the
focus away from any discussion of the racism that Gabe has dealt with or the problematic (for Gabe) whiteness of his adopted family and puts the focus instead on the supposed lingering psychological and individualized trauma of adoption. This erasure of systemic racism from view in Intervention also reinforces and normalizes whiteness.

Even when characters on Intervention raise systemic racism as a feature in their addiction, this is diminished through the power of the show’s larger narrative arc. For example, when Gloria (Season 6) a 53-year-old African American woman living in San Francisco explicitly frames her drinking around racial oppression, this is dismissed in favor of a more individualized tragedy. Gloria says she drinks because: “African Americans don’t have it very good in this country and that’s just what we do.” Gloria’s explanation of her drinking recognizes systemic racism and places problems with drug and alcohol in that frame. It is, therefore, a remarkable eruption of race-talk in the usual color-blind paradigm of the show. However, Gloria’s narrative of systemic racism is immediately overwritten by the producers through the following text card:

She has survived giving birth to a stillborn baby, domestic violence and breast cancer and sees herself as a passive victim in life instead of an active participant.

Here, the producers re-frame Gloria’s assessment of her drinking as tied to racial oppression and instead situate it within the familiar narrative of the show, that addiction is the result of an individual, personal tragedy disconnected from larger systems. By doing this, the show’s producers denude the episode of racial meaning, minimize the role of systemic racism, and place drinking problems back in the rhetoric of individual tragedy and struggle against inner demons. This shift expands the boundaries of whiteness within Intervention to include Gloria’s re-framed narrative at the same time it excludes the possibility of systemic racism as part of what Gloria must struggle against.

Antwahn (Season 2) is a 39-year-old African American man living in Los Angeles who is introduced to the viewers through title cards as “The Basketball Player” and then “The Drug Addict.” Antwahn, a former NBA player, is now a crack cocaine user. For the most part, Antwahn’s story is grafted on to whiteness and told through a color-blind framework devoid of any discussion of systemic racism. It is Antwahn who names the dynamic of whiteness at work in Intervention. In a follow-up episode, Antwahn has left rehab, along with a young, white woman. As we meet them, they are leaving a motel where they have been living and have run out of money. As night falls, Antwahn suggests that they stay in a homeless shelter while the young,
white woman resists the idea. There is some small drama between them as they debate going into the shelter, and Antwahn turns and speaks directly into the camera: “She comes from Wonder Bread Land.” It is a striking moment in the nine seasons of *Intervention*, not only as an eruption of race, but for the way it exposes the whiteness of all the other episodes on *Intervention*. In effect, Antwahn here is referring to the other 87% of the characters (or “addicts”) on *Intervention*. His white, female companion cannot imagine herself even entering a homeless shelter, much less staying there. The reason she cannot imagine this is because, as Antwahn observes, she “comes from wonder bread land.” In other words, she comes from a world of expectations that she as a young, white woman does not belong on the streets or in homeless shelters. Antwahn goes on to set up a stark contrast between himself and his Wonder Bread friend. Gesturing to the homeless shelter, he says: “I come from this. *This* is who I am.” Antwahn actually does not come from the streets or homeless shelters (he grew up in a middle-class home), but he uses this identification with the streets to distance himself from Wonder Bread Land and the expectations of whiteness.

*Intervention*’s televisual, therapeutic approach to addiction embodies whiteness. Whiteness, as Richard Dyer argues, obfuscates itself and its relationship to the particular traits it is said to embody, including temperance, rationality, bodily restraint, and industriousness (Dyer, 1988, p. 3). Certainly, the traits of temperance, rationality, bodily restraint, and industriousness are woven into the narratives of whiteness and addiction on *Intervention*. And, along with these traits, the key features I have identified: individual tragedy, therapeutic recovery from addiction to “health,” and neoliberal self-sufficiency are embedded in these narratives.

**CONCLUSION**

The analysis of *Intervention* presented here examines the role of whiteness as a mediator of narratives of addiction. In this chapter, I have argued that the imagined neoliberal citizen is white and the narratives of addiction and recovery are rooted in a whiteness that contains individual tragedy, therapeutic recovery to “health,” and self-sufficiency. This analysis finds that there is a fairly even representation along gender lines on the show, yet a stark racial pattern in which whites are significantly overrepresented, while people from racial or ethnic minority backgrounds appear much less frequently on the show. My critique, however, is not to call for more racial
diversity among the nonactors who appear on Intervention. Instead, I have attempted to offer a critique of what whiteness is used to do.

The representation of addiction on reality TV occurs within a broader social context in which race is heavily implicated in discourse about drugs. The characters, narrative tropes, and treatment options depicted on Intervention sit in striking opposition to the broader social context of the criminalization of drug use by African American and Latina/o people and the disproportionate incarceration rates in the United States. In contrast, Intervention frames the characters’ stories of addiction as individual “tragedies” rather than collective “social problems” associated with drug use by African Americans and Latinas/os (Gowan & Whetstone, 2012). Instead of the punitive approach meted out to drug users through government-sponsored drug wars and on shows such as Cops or Locked Up, Intervention’s televisual, therapeutic approach to addiction embodies whiteness.

The producers of Intervention present a narrative of addiction that is embedded in a white racial frame. The interventionists, then, serve multiple roles within the frame of the show, both as experts guiding people to “health” and self-sufficiency while also serving as white saviors rescuing “addicts” from excess, self-destruction, and wasted whiteness.

The viewing audience of Intervention is invited to gaze through a white lens that tells a particular kind of story about addiction. Intervention crafts stories that audiences care about through the deployment of individual tragedies are racially inflected with concerns about wasted whiteness and the squandering of white privilege. The therapeutic model valorized by Intervention is underpinned by neoliberal regimes of self-sufficient citizenship that compel us all toward “health” and becoming “productive members of society,” and, as discussed here, these regimes are also racialized and presume whiteness. Failure to comply with an intervention becomes a “tragedy” within the narrative of the show, and tragedy of wasted whiteness. On the relatively rare instances when people of color appear on Intervention, they are grafted onto whiteness and extended the privileges of individuality associated with whiteness. When race “erupts” in episodes that feature people of color, producers work to re-frame it within the white-dominant narrative in ways that erase references to systemic racism.

The white lens through which we are invited to view Intervention occludes our vision from other realities of drugs and addiction. Missing from view in the therapeutically imbued Intervention is the devastation created by the punitive “drug war.” In its place, we are left with the partial view of addiction in “wonder bread land,” in which everyone had a happy
childhood, shattered by a tragic event, that led to the tragic waste of whiteness that is addiction.

UNCITED REFERENCES

Bonner (2008); Fernandez, Begley, & Marlatt (2006); Kershaw (2009); Reinarman (2005); Salmon (2004).

NOTES

1. "This TV show saved my life," he said. "I get choked up when I think about it," A former contestant says of The Biggest Loser. Quoted in Harvard Magazine, January–February 2012. Available online at http://harvardmagazine.com/2012/01/biggest-loser-contestants-share-tips. This is not the universal experience of contestants on such transformation reality TV shows, but it is the one producers want to push forward. Many former Biggest Loser contestants have regained the weight lost on the show, and some have spoken out about the health-damaging effects of the experience. Kai Hibbard, former contestant, says "I have people that come up to me and ask me why they can’t lose 12 pound in a week when I did. When I didn’t. It didn’t happen. It’s TV," she said. "I helped perpetuate a myth that’s dangerous." From: http://www.cbsnews.com/8301-504763_162-20008214-10391704.html

2. Ibid.

3. The head of the Federal Bureau of Narcotics, Anslinger, claimed that "fifty percent of the violent crimes in districts occupied by Mexicans, Spaniards, Latin-Americans, Greeks or Negroes may be traced to this evil" (Bonnie & Whitebread, 1974, p. 100).


5. According to the National Household Survey on Drug Use, in 2010, among persons aged 12 or older, the rate of current illicit drug use among Asians was similar to that among Native Hawaiians or Other Pacific Islanders (3.5 and 5.4 percent, respectively), but the rate among Asians was lower than among other racial/ethnic groups. The rate among persons of two or more races was similar to that among American Indians or Alaska Natives and among blacks (12.5, 12.1, and 10.7 percent, respectively). The rate was 8.1 percent among Hispanics and 9.1 percent among whites. http://www.samhsa.gov/data/NSDUH/2k10NSDUH/2k10Results.htm#7.1.3.


REFERENCES


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