A GALLUP POLL TAKEN IN 1970 COUNTED three million Americans who claimed to run regularly, defined as thirty minutes at a time, three or more days a week. A similar poll conducted in 1980 counted ten times that number of regular runners.¹ For the average American, this booming popularity of long-distance running demanded an explanation. The most obvious explanation was the heightened interest in aerobic fitness and cardiac health promulgated during the 1960s and 1970s by doctors and scientists such as Kenneth Cooper of NASA, who advocated vigorous exercise as a prophylactic against heart disease and other afflictions seemingly caused by sedentary living.² Running seemed especially suited to the pursuit of fitness in the modern world because it delivered maximum aerobic benefits in a minimum of time. A busy professional could satisfy Cooper's demands for aerobic fitness in fifteen to twenty minutes a day. Moreover, the person thus protected against heart disease could be expected to spend more healthy years in productive labor, while his employers could expect to pay less for his physical upkeep and maintenance.

The millions of people who began running in the 1960s and 1970s often ran far more than Dr. Cooper recommended, however. Scores of road races of varying distances sprang up in cities and towns across the United States catering to the swelling population of runners, and though not all runners were marathon runners, the 26.2-mile race occupied a special place in running culture. The number of starters in America's most venerable race, the Boston Athletic Association (BAA) Marathon, which stood at 197 in 1960, surged to

Even people who never would run a marathon trained as if they would, logging hours on the road. If, as Cooper had stated, anyone running more than fifteen minutes a day was running for reasons other than health then health was not a primary goal of vast numbers of runners. The challenge of athletic competition was one reason people ran marathons, and the open nature of the marathon allowed average people to participate in a world-class athletic event. Until qualifying standards were introduced in the mid-1970s any man in the United States could try his luck at the Boston Marathon, the premier running event in the country. After 1972, the rules of the marathon were liberalized to allow women the same chance to run.

These explanations cannot tell the whole story, however. Books and magazines written for and by runners suggested other motivations, among them the pursuit of one’s individual human potential, what psychologist Abraham Maslow called “self-actualization.” Enraptured as they were with the idea that running could help them to reach their full human potential, many runners began to proselytize their creed to their non-running peers. Needless to say, this did not endear them to people who did not run, and the evangelical zeal of some runners helped fuel a backlash against running.

When the BAA Marathon attracted just two hundred entrants in the early 1960s long-distance runners were lonely, indeed. Though track and field was familiar to most Americans, long-distance road running was not. Marathons races had been run in the American Northeast since 1896 when the first Boston Marathon was contested, and a small cadre of runners competed in other Northeastern road races, but elsewhere in the U.S., the sport of road racing was virtually unknown. When runners began to appear more frequently on roadsides and in parks in the late 1960s and early 1970s, stories about running began to appear in mainstream newspapers and magazines. These early stories had a bemused sort of “man bites dog” tenor. By the mid-1970s, the tone of the commentary had turned bitter, and a public dialogue began between proponents of running and their critics on the merits of running. On the one hand, advocates of running argued that running could ameliorate and/or cure a variety of physical, mental, emotional, spiritual, and even social ills. On the other hand, legions of skeptics countered that running had the potential to cause a multitude of problems along those same axes of health and well being.

It was in this context of evangelical running, backlash and rancorous debate that the idea of running addiction took shape. In his 1976 book Positive Addiction, psychiatrist William Glasser proposed that daily long-distance running of an hour or more could produce a state of euphoria and mind expansion he termed the PA (positively addicted) state. As with any addiction, the PA state was associated with psychological withdrawal symptoms such as irritability, restlessness, depression, anxiety, and guilt. Despite the potential for withdrawal symptoms, the PA state strengthened the addict, making him or her better able to cope with the challenges and stresses of life. Though the PA state could be reached using other methods, Glasser surmised that running was the surest and easiest way; he thought virtually anyone who ran one hour or more every day could attain positive addiction.
In 1978, William P. Morgan, a physical educator and sport psychologist, rebutted Glasser's positive addiction hypothesis. Morgan asserted that, just like alcohol and drug addiction, running addiction inevitably had negative consequences. Recreational long-distance runners overcame the pain of running by dissociating from their bodies. Dissociating led them to ignore warning signs of potentially debilitating orthopedic injuries. Worse, commitment to long-distance running and immersion in the running subculture also led many people to dissociate from their non-running lives, ignoring work, family, spouses, and other social obligations.

Reputable newspapers and magazines trumpeted Morgan’s “discovery,” and reputable psychologists pursued the running addiction hypothesis. Stories in the popular press tended to warn of the dangers of too much running, while those in the scholarly press tended to seek a definitive cause for the presumed psychopathology. In neither case was the idea of positive addiction given much credence. The current project will, in contrast, give positive addiction privilege of place, regarding it as an important, albeit overlooked, reflection of the meaning of running during the boom era. The focus on positive addiction will fill a gap in the understanding of the running boom and will challenge an increasingly common perspective among sport historians and sport sociologists who champion theorist Michel Foucault’s dark visions of disciplinary society.

The project begins with the argument that running was a reaction to what cultural historian Martha Verbrugge calls social dis-ease—an uneasiness or anxiety about social change, a sensation that Americans have treated with an increased attention to health and fitness. In sections two and three the rhetoric of the running boom and the positive addiction hypothesis are linked through the discourse of the Human Potential Movement, a loose association of ideas from a wide variety of intellectual fields. Section four demonstrates how Morgan opposed positive addiction with rhetoric that resonated with conservative opposition to counterculture and New Left thought. The paper ends with a discussion of how the history of running addiction—negative and positive—confounds the logic of sport scholars who embrace Foucauldian thought.

Running and Dis-Ease

Sociologists Jack Whalen and Warren Flacks state the youth revolt of the 1960s was, in part, about redefining adulthood. The young believed they could reinvent themselves as new people separate both from their parents’ values and social expectations. The New Left “addressed itself to a fundamental schism in American experience, the gap most people feel between their daily lives and history.” Believers hoped separation from parents and conventions would provide opportunities for young people to “make his or her own life as freely as possible.” Such freedom required young people to make their own history, or so they thought, and direct political action was viewed as the tool from which history and freedom were made. The 1960s counterculture embodied rebellion against middle-class values and lifestyles, too, but reflected “romantic and bohemian artistic traditions” rather than oppositional politics. Life was art, and mind-altering drugs helped to refine “awareness and expression.” Inner life and personal experience were important, not politics.

Theodore Roszak, noted chronicler of the counterculture, calls it a reaction to the economic prosperity of the thirty years after World War II. Rather than simply enjoying
the affluent consumerist lifestyles of their parents, young people began to question the value of conspicuous consumption and the consequences of unbridled industrial production. Confronted with the alleged horrors of affluence young people began to search for ways to make their lives more meaningful and sampled a wide variety of mystical, philosophical, religious, and psychological practices. Often the practices chosen involved some sort of bodily discipline or control—for example, Gestalt therapy, Rolfing, Transcendental Meditation, and running—that ultimately required, and/or promised, radical lifestyle changes and altered states of consciousness.20

However, if social forces of the 1970s did shape contemporary social and political life, as cultural historian Bruce J. Schulman contends,21 then one might argue, as Mary C. Brennan does, that with the conservative takeover of the Republican Party, the conservative turn in cultural discourse, rather than the more glamorous counterculture movement, ultimately defined the era.22 Conservatives were not just reactionaries, but their political and cultural rhetoric were shaped in large part as a reaction to the counterculture, which they saw as a dysfunctional, albeit inevitable, result of liberalism. In that spirit, Christopher Lasch attributes the turn inward to a culture of narcissism—an anxiety-ridden personality disorder in which one loses touch with the past and hope for the future. Narcissism was epidemic in a “culture of competitive individualism which in its decadence has carried the logic of individualism to the extreme of war of all against all, the pursuit of happiness to the dead end of a narcissistic preoccupation with the self.”23 Certainly many people agreed with Lasch, especially those who attributed the counterculture movement to the permissiveness of middle-class parents who failed to teach their children responsibility and the value of hard work.24 As Brennan ably demonstrates, conservative rhetoric echoed traditional themes of hard work, sublimation of personal desire for the greater good, and delayed gratification.25 According to this mode of thought, people who wasted their time running, or Rolfing, or meditating, were not merely selfish individuals, they were a concentrated force threatening the fabric of American life. From this perspective, a little bit of Cooperesque jogging might make one a more healthy and efficient worker but making running one’s top priority was clear evidence of a psychopathology with dire consequences for the entire society.

The polarities of the running addiction debate revolve around this liberal/conservative axes. Though it would be an error to assume Glasser and Morgan were liberal/counterculture and conservative, respectively, their use of rhetoric locates them within the spectrum of cultural and political debate. For Glasser it is his use of terminology derived from the Human Potential Movement that identifies him as “liberal” and that simultaneously connects him to the rhetoric of the running boom. For Morgan it is his rejection of deeply committed running as a self-centered waste of time and a threat to society that identifies him as “conservative.” The ideas of Glasser and Morgan and their connections to broader political and cultural rhetoric are developed in the following sections.

Running and Human Potential

The Human Potential Movement was an informal but significant convergence of intellectual forces that arose out of such diverse fields as evolutionary biology, particle physics, philosophy, theology, medicine, and psychology.26 According to physicist/phi-
Philosopher Fritjof Capra the science of quantum physics completely and for all time undermined the mechanistic Cartesian/Newtonian worldview that forms the foundation of mainstream science, subverting the commonsense notion that the world and the universe are composed of separate, discreet objects working together as does a machine. Instead quantum physics suggests one may only speak of interconnectedness and wholeness. These arcane yet provocative ideas might have remained the playthings of physicists but for the developing commitment of some physicists and other scientists to an emerging socio-political worldview in which medium-sized objects, like people, were as interconnected and mutually reliant as elemental particles.

Among health professionals, the idea of universal interconnectedness challenged reductive and mechanistic models of the body and of health care. The 1948 Constitution of the World Health Organization (WHO) defined health as “a state of complete physical, mental and social well-being and not merely the absence of disease and infirmity” and affirmed optimal health as a “fundamental” right of all people. In the same spirit, Halbert L. Dunn coined the term “high-level wellness” in the late 1950s to describe a “dynamic process in which people can grow toward their own greater potential, rather than only a passive state of absence of disease, . . . an integrated method of functioning involving body, mind, and spirit in a positive progression.”

In the mental health realm, the human potential, or “third force,” perspective involved a simultaneous rejection of the two dominant perspectives in psychotherapy: the psychoanalytic perspective associated with Carl Jung and Sigmund Freud and the behaviorist perspective associated with E.B. Watson and B.F. Skinner. Psychoanalysis was rejected for its negative assessment of human being and its goal of normalizing patients to accept social norms. Behaviorism was rejected for its mechanistic assumption that human being was nothing more than a collection of conditioned responses to external stimuli. To third force psychologists, mental health was much more than the sublimation of atavistic urges to socially acceptable goals and/or the learning and expressing of positive behaviors.

According to Abraham Maslow, the single figure most closely associated with humanistic psychology, every human being is born with “an active will toward health, an impulse toward growth, or toward actualization of human potentialities.” However, most people do not reach their potential, and neurosis is one result of thwarted will, stated Maslow. The neurotic is struggling to find health, moving toward growth, but “in a timid and weak way, under the aegis of fear rather than of courage.” The self-actualizing person, in contrast to the neurotic, is striving in a positive way to fulfill his or her personal and biological destiny. The self-actualizing person is not selfish, even when acting in his or her self-interest, because the only way to truly serve others and the social welfare is to become a self-actualizing human being. Goodness is the result of responding to one’s own human nature rather than to social and cultural demands and expectations.

If social and cultural norms prevented people from being happy and living peacefully with one another then the way to fix society and people was to reshape human consciousness. Intellectuals, like Pierre Teilhard de Chardin, a Roman Catholic cleric and paleontologist, and Ken Wilber, a transpersonal psychologist, argued that human consciousness is evolving. The idea that consciousness is evolving was linked in popular and in intellectual culture to an overarching interest in the wisdom of the ancient East and related physical
and mental disciplines. To maximize human potential would mean nothing less than the incorporation of Eastern philosophy and Western science into a new paradigm linking personal health and wellness to full consciousness of the connections between oneself and the universe.

The human potential perspective on running built upon this foundation an ideology that challenged medical authority and proselytized a creed that flouted Cooper’s conservative exercise prescriptions in the name of a state of being allegedly transcending mere health. George Sheehan, a cardiologist from Red Bank, New Jersey, considered a sort of poet laureate of the running boom, opened his first book, *Dr. Sheehan on Running* (1975), with this striking statement: “At the age of reason, I was placed on a train, the shades drawn, my life’s course and destination already determined. At the age of 45, I pulled the emergency cord and ran out into the world. It was a decision that meant no less than a new life, a new course, a new destination. I was born again in my 45th year.”

Sheehan perceived himself wandering in a life without meaning, doing what society told him to do, while his body and soul were dying. Sheehan responded to his personal spiritual crisis by turning to physical exercise because the “body mirrors to soul and the mind, and is much more accessible than either. Become proficient at listening to your body and you will eventually hear from your totality—the complex, unique person that you are.” Sheehan’s unique complexity, as he saw it, was a combination of “athlete, poet, philosopher, even saint.”

For similar reasons, Thaddeus Kostrubala, who wrote *The Joy of Running* in 1976, left a thriving psychiatric practice in Maine for the West Coast because he felt his life had no meaning. In California he took up running when his doctor told him he was in danger of a heart attack. Kostrubala initially loathed the running clinic his doctor had prescribed—comparing cardiac patients to “Lazarus resurrected. Somewhere between Jesus and Frankenstein”—and remained uncomfortable until he decided that his comfortable identity—successful, sedentary doctor—was inauthentic. His authentic identity was one he had lost in childhood, the boy who could run freely, easily, and happily. Through running he regained those feelings of freedom and ease and much more. During a run along the beach at Torrey Pines in Southern California, he “looked up and saw a seagull. . . . I had a glad, flying, delightful, deep inner penetration of my mind and soul. . . . I had found something beautiful within myself.”

It is difficult to imagine Cooper or one of his adherents describing running it those terms. However, it is easy to imagine readers of *Runner’s World* magazine speaking that way. Joe Henderson, the editor of that magazine in the 1960s and 1970s, used the letters “LSD” to describe long, slow distance running to foreground its consciousness-altering effects. If one ran every day at a slow, comfortable pace, “without hope of success and without outside pressure,” one might become “hooked,” said Henderson, and “running leaves the same relaxed feeling of peace with the world as some drug trips, only it’s safer and cheaper.”

According to Kenneth Cooper anyone who ran more than fifteen minutes a day was running for reasons other than health. Sheehan agreed: “Cooper’s tables measure . . . everything except what makes life worthwhile . . . everything except why people run and cycle and swim and enjoy using their bodies.” The “why” of running, said Sheehan is not
merely to improve heart functioning, and moreover, the best running is far different than
the brief bursts of activity recommended by Cooper. Under the rubric of training Sheehan
opined:

If you want to run a marathon you must train six miles a day. If you are looking
for the natural high that distance runners talk about, you must do the same.
And if you prefer to die of something other than a heart attack, the daily six
miles is physiological magic.
But know this: Disaster will pursue you to the very gates of heaven unless you
do the Magic Six.42

Kostrubala called the marathon “impossible” and “horrible,”43 but felt by running
the race he was, “glorifying life, defying death in all its forms. Right in the snapping teeth
of death, I dance and laugh.” Running fast was not important to Kostrubala. Indeed, he
called Cooper’s twelve-minute run test—in which the runner attempts to run as far as she
or he can in twelve minutes—an “invitation to disaster . . . a competition . . . [a run]
against those twelve minutes.”45 Time, said Kostrubala, is “an evil god . . . [who] kills his
worshippers.”46

The solution to the time constraints of Cooper’s method, according to Joe Henderson,
was to slow down and to run more miles. Though Henderson participated in long-dis-
tance road races, up to and including the marathon, he believed, “To race—to compete
with other runners or just with the clock and the distance—is to beat yourself up both
physically and psychologically. . . . [T]he legacy of racing is often chronic pain and disap-
pointment.”47

Despite their distaste for running fast, Henderson, Sheehan, and Kostrubala saw no
problems running high daily mileage, or with the practice of running every day. Undeni-
ably, many runners who practiced what these men preached ended up with overuse inju-
ries and heightened psychological stress, as high-mileage running, no less than high-speed
running, demands much effort of the participant. However, these reputed experts on run-
ning rarely suggested that runners ought to run less or take time off from running when
injured. In fact, they had a tendency to warn readers to avoid doctors, especially orthope-
dists, when they were injured and to run through most aches and pains. Sheehan described
doctors as “[il]logical,” “[un]predictable,” “gullible,” and “stupid” in their “high-minded,”
“noble,” and “altruistic” attempts to save the runner from the “hazardous and wasteful”
activity of jogging.48

Doctors who recommended rest for injured runners were misguided victims of a
worldview that regards the absence of disease as the definition of health. This narrow
definition means that an overweight and unfit individual might be regarded as healthy,
while a fit runner with an orthopedic problem would be regarded as unhealthy. To Sheehan,
“true normal is really the equivalent of a well-trained, physically fit athlete—the obvious
example of the human body at its maximum efficiency.”49

Positive Addiction

The idea of positive addiction was consistent with the ideologies and philosophies of
running promulgated by Henderson, Sheehan, and Kostrubala. Glasser theorized that
people who practiced a mental or physical discipline for an hour a day could achieve a
positive addiction. He formulated his hypothesis as he studied people who practiced
Transcendental Meditation. Transcendental Meditation adherents reported an altered state of consciousness that Glasser dubbed “spin out”; they claimed that Transcendental Meditation had led them to make choices that changed their lives for the better; and they claimed to experience withdrawal symptoms such as depression, anxiety, and guilt, if they missed a day of practice.

As Glasser toured the West Coast lecturing on positive addiction, runners in his audience told him that they, too, were addicted. Intrigued by those anecdotal reports, Glasser decided to study the psychology of the runner and contracted to place a questionnaire in the October 1974 edition of Runner’s World magazine. The results of the survey confirmed to Glasser’s satisfaction that many runners fit the criteria for positive addiction. Not a surprising result as editor Joe Henderson had been telling his readers for years that running was an addictive, consciousness-altering drug that would change their lives for the better. Nonetheless, Glasser concluded that running was the surest way to achieve positive addiction, and the words of his subjects supported his contention that the PA state was real and gave runners the mental strength to change their lives for the better.50

“Your mind is there but it is not there—it’s in a sort of transcendental, trancelike state,” said one man from Toronto.51 A “farmwife and part-time teacher” asserted that during her “meditative” runs she had “flash[es] of insight” in which solutions to personal problems appeared to her.52 A man who had been running six days a week for five years claimed his problems, too, “fade into inconsequence” while he experienced “heightened awareness of light, temperature, and odors, sometimes an inexpressible joy. I want to stick out my arms and float.”53

The theme of floating was reiterated often. A man named Jim said his running mind set, “is not cognitive or rational, instead it is ego-transcending. I simply perceive as I run. . . . I float. I run like a deer. I feel good. I feel high.”54

The pleasure of the PA state was not just a transient or inconsequential high, however, according to Glasser and his subjects. One man said, “[R]unning has. . . changed my outlook on life, material things aren’t important anymore. Besides my family responsibilities I can’t think of anything more vitally important to myself than a good hard 15-mile run.”55 Another claimed, “Running has been responsible for reducing [my] frenetic nervous drive, compulsive overwork, and impatient demand for immediate social change.” This man also felt that if everyone ran, the world would be a better, more just place: “[Running] would drown hates, aggression, make people happier, create a greater sense of self-worth. . . . If everyone ran, the revolution would be accomplished, the automobile eliminated, idiotic luxuries and compulsions abolished, proper priorities established, the environment saved, classes of racism ended.”56

One way in which the PA state allegedly improved peoples’ lives was by making them less likely to define themselves by their work or to let work dominate their lives. Glasser believed that all people had an innate need or drive for happiness, but he recognized that many people were unhappy. He concluded people were unhappy because they did not have enough psychological or emotional strength to do the things that would make them happy. Instead, they did the things that society told them to do, in hopes that by doing so they would make others happy:

By our parents, later by our teachers, employers, friends, ministers, neighbors, politicians, editors, we are bombarded with what we should and shouldn’t
We should learn to judge for ourselves what is worthwhile, but it takes a good deal of strength. Most of us spend our lives in a series of compromises between doing what we believe in and doing what pleases [others]. Happiness depends on gaining enough strength to live with a minimum of these compromises.

Positive addictions such as running were strength-building exercises that ought to be encouraged and cultivated, even if they sometimes appeared to interfere with one's social and personal obligations and responsibilities. By Glasser's definition a person who cultivated a positive addiction would gain the strength to do what was right, even if doing right meant sacrificing job, family, and social obligations. Glasser implied that sometimes those things had to be sacrificed in the name of mental strength and personal growth, and that sacrifice was justified because personal growth would ultimately produce people who would produce a better society.

Negative Addiction

William P. Morgan launched a full attack on Glasser's thesis from a philosophical position that resonated with the medical model of mental health and, not coincidentally, with a more conservative perspective on cultural and social norms. Morgan observed that jogging was "similar to smoking in its early stages—it is often perceived as noxious." If the runner persisted despite the discomfort, however, he or she might begin to experience a sort of euphoria. If he or she had an addictive personality then soon that runner would do anything to get high. Inevitably, addiction led to a downward spiral. As with drug or alcohol addiction, "the euphoria associated with running can often be maintained only by increasing the dosage, which translates into more mileage."

Morgan admitted that, whereas beginning runners might experience positive changes in self-esteem and self-awareness, more committed runners tended to, "reorder priorities with greater importance put on the self. . . . In the case of addiction, the inward shift is negative," as the addicted loses interest in his or her job, spouse, and social obligations. Addicts were "less concerned with external issues such as rewards generated in the work place, there is less interest in vocational achievements," and even "monetary rewards . . . are not attractive or relevant." In short, the psychological changes wrought by running addiction made the runners "quiescent, at terms with the environment, and at peace with himself." Despite the apparent value of being at peace with oneself, Morgan did not believe this was a positive shift.

More importantly, Morgan did not believe that rearranging one's priorities to reduce the importance of work was a positive consequence of running addiction. Said Morgan, "[O]ne might argue that drinking on company time is a negative addiction, whereas running on company time represents a positive addiction," he said, but "in either case, it is the company that is short-changed." Work was paramount in Morgan's worldview, and therefore, the proper state of consciousness was sober rationality. He termed the runner's mental state, "[a] kind of self-hypnosis called dissociation," and he compared the addicted runner unfavorably to the elite athlete who, "attempt[s] to associate with pain and discomfort" in order to achieve peak performance. Morgan admitted he did not know if dissociation caused the legendary "runner's high," but he asserted with confidence that hallucinations came along with the
running trip. He recalled one runner who, “encountered intolerable pain [during a race]. . . . The young man became totally incoherent and began to experience visual hallucinations. . . . His body ‘left’ him and . . . he could not feel his feet hitting the ground; he could not feel the wind against his chest; he was unaware of his breathing; and he had the sensation of being ‘the mainsail on a Yankee clipper flying across the sea as if in a vacuum.’”62

Translated, addicted runners were like drug users—“out of it”—while elite athletes were “with it,” in touch with harsh reality. The way to achieve in American society was to live as an athlete—play by the rules and accept the pain, discomfort, and self-sacrifice society demands, and most of all never stop striving and competing in the name of getting ahead. If positive addiction reflected ideologies associated with the Human Potential Movement, Morgan’s negative running addiction reflected the growing antipathy of Americans toward a subpopulation of people they viewed as self-indulgent and narcissistic.

Cultural commentator Barbara Ehrenreich argues that in the 1950s and 1960s middle-class Americans began “to see America’s material affluence as a hideous, smothering weight, a pall upon the collective spirit.”63 Based on the feeling that affluent culture was vacuous, some Americans, young and old, began a decades-long search for activities that would add meaning to their shallow existence. However, other Americans, equally disturbed by the culture of affluence, reacted quite differently and as a result regarded the pursuit of meaning as symptomatic of the problem of affluence rather than as its potential cures. The underlying problem of affluence, according to this logic, was a spirit of permissiveness that signaled the “moral failure of the middle-class.”64 According to the permissiveness thesis, drop-outs, student activists, drug advocates and resisters of every sort were “engaging in the kind of behavior to be expected of spoiled children anywhere”—rebelling and refusing to acknowledge moral or civil authority of any sort.

One of the most eloquent and influential critics of the 1970s was Christopher Lasch, who called the inward turn in American society narcissism. According to Lasch, the narcissist was an anxiety-ridden individual with no sense of the past and no hope for the future produced by an inward turn that led away from social engagement and toward self-contemplation. This personality disorder was epidemic in a “culture of competitive individualism which in its decadence has carried the logic of individualism to the extreme of war of all against all, the pursuit of happiness to the dead end of a narcissistic preoccupation with the self.” Not surprisingly Lasch equated “jogging” with other projects of “psychic self-improvement . . . getting in touch with . . . feelings, eating health food . . . the wisdom of the East . . . learning to ‘relate,’ [and] overcoming the ‘fear of pleasure.’”66

Morgan’s negative running addiction resonated with concerns about the decline and fall of the American character, particularly the concern that the United States had lost the will to be a great nation. Literary critic Eve Kosofsky Sedgwick connects the idea of running addiction to what she called an “epidemic of will” that plagued the American conscience in the 1970s and 1980s. Sedgwick, who is not known for incisive commentary on running and sport, says nineteenth-century medical science made addicts into the objects of “medical-juridical authority,”67 and in a “taxonomic frenzy,” late twentieth-century medicine made addicts out of everyone with a strong habit.68 The traditional understanding of addiction posited that addicts imagine that substances foreign to the body have magical properties, imbuing the subject with “consolation, repose, beauty, energy” whilst
the healthy individual relies on free will to find these conditions in him or herself. According to this logic, the person who runs ought to be the opposite of an addict. The idea of running addiction, therefore, demonstrates that free will itself has become a dangerous substance: “Activities newly pathologized . . . are the very ones that late capitalism presents as the ultimate emblems of control, personal discretion, freedom itself . . . work (‘workaholism’) . . . consumer choices (‘shopaholism’) . . . sexual variety (‘sexual compulsiveness’) . . . [and] sustained relationships (‘codependency’ or ‘relationship addiction’).”69

How to make sense of this pathologizing of valued attributes? Sedgwick’s analysis is not entirely helpful for the purposes of this paper, but her concept of dysfunctional will is useful. In his political career Ronald Reagan made good use of the rhetoric of will. According to this rhetoric, the United States had gone astray during the 1960s and 1970s because it had lost the will to assert itself as a military, economic, and political power. The counterculture figure of the “hippy” as much as the 1970s figure of the narcissist represented this lack of will. Instead of dedicating their energies to increasing national power and pride, these supposedly debased individuals squandered their energies in useless and egotistical pursuits. The linking of energy waste and failure of will among runners was made clear in popular culture, and it was a linkage that angered and galvanized many people. Examples are plentiful. One man suggested in a letter to the New York Times, “[T]he energy crisis has a logical solution utilizing vast, currently untapped energy resources. In communities throughout the country, electric generators should be built and attached to treadmills upon which our 24 million runners could run productively and safely, rather than aimlessly traveling city streets.”70

A second letter writer opined, “[I]n view of the energy shortage few acts are more selfish than the jogger’s waste of energy” because runners are more food than was necessary and food production required fuel energy. Instead of jogging, such people ought to “volunteer to perform physical tasks for those who are incapable of doing so themselves.”71 A third suggested runners ought to pursue “useful physical recreation like gardening, carpentry, and repairing run-down old buildings. . . . It doesn’t reflect much credit on our society that armies of intellectuals jog themselves to exhaustion,” he concluded.72

The editors of the New York Times got into the act themselves when they castigated Gary Muhrke, the winner of a run to the top of the Empire State Building who retired from the New York City Fire Department in 1973, claiming a permanent disability. “Anyone who can run up 85 stories . . . in less than 13 minutes would seem to be qualified to do anything that does not require judgment.”73

The equation of jogging with energy depletion was overtly politicized in the case of President Jimmy Carter who “wobbling, moaning, and pale with exhaustion—dropped out” of a ten-kilometer run in September of 1979.74 Carter’s inability to finish was used as a metaphor for his inability to fulfill his duties as president, and his physical weakness equated with is weakness as a leader. The fact that he ran out of energy in the race represented a nation running out of fossil fuels due to the poor decisions of a man who lacked the emotional and spiritual energy to lead a great nation.75 In short, Carter’s failings were represented as a failure of will, of mind over matter, and Reagan was able to capitalize on this theme.
Sport sociologist Cheryl L. Cole, for her part, calls the 1980s, “a conjunctural moment in which conservative forces manufactured the war on drugs . . . the fitness boom” and other “popular and modern categories of recovery, will, and opportunity.” During this era, hard bodies were valued for exemplifying will and therefore representing “national interests” in the face of widespread cultural anxieties about deviant bodies. From our present perspective it is all too easy to lump running bodies into the category of “hard bodies” and to imagine running to be what Cole terms “nature’s Prozac,” a sort of wonder drug that could create super-workers free of anxiety and doubt and devoted entirely to productivity. However, as Cole rightly points out, the committed runner was instead imagined as a “deviant subject” that perverted the natural activity of running in an unnatural form. In this context, according to Cole, the profession of psychology mobilized the discourse of addiction as a “mechanism of classifying and producing both the normal and the pathological/deviant/excessive.”

Running Addiction, Deviance, and the Disciplinary Society

Based on his theory of negative addiction, Morgan can be cast in the role of a disciplinary expert who normalizes some forms of exercise by pathologizing others. However, Cole’s examination of exercise addiction is fraught with problems. In the contemporary era when exercise seems to be demanded of every individual in the name of personal and national health, it is almost inconceivable that medical community ever regarded running as anything other than a positive habit. Yet, Morgan’s negative running addiction hypothesis clearly shows that to be the case. Committed running, as it was manifested in the 1970s, far exceeded the boundaries of normal behavior, and therefore, Morgan interpreted it as pathological. However, by making committed running into a pathology, Morgan and other researchers created a category of person—the addicted runner—that was the legitimate subject of what philosopher Michel Foucault calls “biopower”—the systematic organization and control of bodies.

The social and health sciences play a pivotal role in the establishment and extension of bio-power, according to Foucault, by collecting information through surveillance (research) and disseminating knowledge for the purposes of better regulating bodies. In the process, the sciences work to produce docile bodies—bodies that are compliant and productive—extending social control into the most intimate aspects of daily life and maximizing productive forces through the implementation of bodily practices. People tolerate bio-power, even though it reduces human freedom, because it hides behind a façade of public interest. In other words, people follow the advice of disciplinary experts—doctors, lawyers, and psychiatrists—because they have accepted the benevolent guise of bio-power, believing that the experts offer advice in good faith.

When Cole calls exercise “Nature’s Prozac,” the implication is that exercise, like Prozac, can change the brain’s chemistry to eliminate vexations like depression and anxiety, leaving the patient better able to cope with life’s ambiguities and better able and more willing to participate in social and economic life. It follows, logically if not reasonably, that coping skills produced by the manipulation of brain chemicals necessarily create docile bodies, people that are both productive and compliant with the status quo. In their compliance, such docile bodies lose the spark of resistance to social, political and economic injustices. They become happy participants in an unhappy system.
Sedgwick, for her part, contends that the idea of exercise addiction eliminates the need to identify an addictive agent, thereby producing a situation in which all citizens are legitimately the objects of medico-juridical authority. As such, all citizens are subject to surveillance and other forms of social control that once again render them as docile bodies. To combine the logic of Cole and Sedgwick, addiction has become a free-floating signifier that can be attached to any body, regardless of whether an addictive agent can be identified, and therefore, all bodies inherently fall under the regime of bio-power. So we all must submit to authority, for our own good.

It would be tidy to conclude that negative addiction represented the forces of bio-power and positive addiction the spirit of freedom, but that simple binary would distort the history of running addiction just as much as the generalizations of Cole and Sedgwick. In the late 1970s Glasser and Morgan were on different sides of a cultural debate, as has been demonstrated above. However, the passage of time has rendered moot the terms of that debate. The positivistic disease model of mental health has “won,” to a certain degree, but the humanistic model lingers. To a great degree the discourse of human potential has been marginalized. Many of the pronouncements of advocates such as Capra and Maslow would sound like so much intellectual buffoonery to serious members of their professional disciplines. At best, the discourse of human potential sometimes reads like a feel-good codicil to the real substance of medical science. For example, one might regard “Nature’s Prozac” and other more prosaic psychotropic drugs as methods of achieving one’s potential by controlling the emotional responses that might interfere with happiness and achievement, but under the logic of psychological medicine, the drug is the inevitable key. Psychiatrists and psychologists still apply therapeutic techniques and those may include meditation, exercise, and other physical disciplines intended to foster relaxation and insight, but few would feel responsible prescribing those techniques without prescribing drug therapy as well. Strangely, though, the humanistic model of mental health is as responsible for the proliferation of drug therapy as the disease model, because the humanistic model proclaims personal happiness is more important than mere functional behavior. Psychotropic drugs promise that the patient will not only function more efficiently but that she or he will be happier at the perceived existential level.

This promise allows the current scientific-medical regime to partition health into physical, emotional, spiritual, and psychological dimensions, each of which can be addressed by a different professional. The field of wellness illustrates how this works. According to the President’s Council on Physical Fitness and Sport (PCPFS) wellness is “a multidimensional state of being describing the existence of positive health in an individual as exemplified by quality of life and a sense of wellbeing.” Despite the breadth of this semi-official definition, critics complain that in practice, wellness has become too narrowly associated with the dimensions of physical fitness and health. Physical fitness is the most emphasized component of wellness on college campus, in corporations, and in public hospitals. Healthy People 2010, a testament of government health-care policy, reinforces the importance of physical exercise in the maintenance of physical and mental health, putting physical activity at the top of its list of leading health indicators. As a result, wellness programs are often little more than fitness centers for persons with physical health problems. Nonetheless, they also are the contemporary home of positive addiction, though
that term is unlikely to be bandied about. The promise of wellness, as it is practiced today, is that physical discipline will allow the practitioner to transcend mental and physical problems: according to the PCPFS wellness is a state of being promoted by physical fitness and other healthy lifestyle choices.85

Conclusion

Patricia Vertinsky would agree that “serious speech acts”86 by disciplinary experts both exert influence over popular understandings of health and fitness and reflect popular opinion in any given historical period. However, Vertinsky and Martha Verbrugge87 both understand that institutional discourse cannot control completely individual interpretations of health prescriptions nor can it control the trajectory of health information, once that information has entered the popular imagination. Vertinsky warns that when scholars regard institutional discourse as “a kind of ideological capital in which the commodity produced (medical prescriptions) concealed the ideology produced (medicine as medical knowledge) which concealed the capitalist relations which had produced it” then scholars may be caught in their own prison of knowledge/power, producing “formularistically irrefutable conceptual categories which are empty of usable content and [can] only pass muster as long as they remain confined to their own conceptual world.”88

The present analysis of the running addiction hypothesis in the context of the running boom and the Human Potential Movement challenges the argument that exercise addiction is primarily an outgrowth of monolithic disciplinary bio-power. Instead, running addiction reveals fault lines in the medical-juridical edifice that allegedly disseminates and benefits from bio-power. Historians, sociologists and cultural theorists have been enamored with the dark and sexy theories of Michel Foucault for almost three decades.89 That interest has contributed much to our understanding of sport and exercise, but perhaps it has obscured as much as it has revealed. The present study suggests a new avenue of cultural and historical inquiry into the relationships between the counterculture, the New Age, and the Human Potential Movement and the spreading interest in exercise during the 1970s, 1980s, and 1990s. Such inquiries should not regard those movements as points of light in an otherwise dark universe of bio-power, but they should challenge the hegemony of Foucauldian theory by revealing the complex interactions between dominant and oppositional forces within and between medicine, science and society.

1Raymond Krise and Bill Squires, Fast Tracks: The History of Distance Running since 800 B.C. (Brattleboro, Vt.: Stephen Greene Press, 1982), 199.


POSITIVE ADDICTION


Fall 2004

311


19Ibid., 14.


24Ehrenreich, *Fear of Falling*, 57-96.


27Fritjof Capra expands the themes of wholeness and interconnectedness in *The Turning Point: Science, Society, and the Rising Culture* (New York: Bantam, 1983) and *The Tao of Physics* (Boston: Shambhala, 1975). See also Bohm’s *Quantum Theory* and *Wholeness and the Implicate Order*; and Heisenberg’s *Physics and Philosophy*.

28It is important to note that as expressed in the literature of the 1960s and 1970s, the analogies between people and particles did not reduce human experience to the level of inanimate matter.


33Sheehan, *Dr. Sheehan on Running*, 14.

34Ibid., 15.

35Ibid., 19.

Ibid., 97.


41 Sheehan, *Dr. Sheehan on Running*, 27.


44 Ibid., 146.


46 Ibid., 40.


49 Sheehan, *Dr. Sheehan on Running*, 85.


51 Glasser, *Positive Addiction*, 47.

52 Ibid., 106.

53 Ibid., 110.

54 Ibid., 113.

55 Ibid., 108.

56 Ibid., 111.

57 Ibid., 3.


59 Ibid., 46.

60 Both quotations are from Morgan, “Negative Addiction in Runners,” 59.


62 Ibid., 46.


64 Ibid., 59.

65 Ibid., 66.


68 Ibid., 583.

69 Ibid., 584.


74 “President Poops Out after 4 Miles in Race,” *Chicago Tribune*, 16 September 1979, sec. 1, p. 2.

75 Ed Ayers, writing for *Running Times* magazine in December of 1979, said of the press reaction to Carter’s run, “[W]hat [the public] heard was that Jimmy Carter had failed again. Already staggering under the burdens of runaway inflation, recession, and declining popularity, the president had now


77Ibid., 261.

78Ibid., 264-265.


81Sedgwick, “Epidemics of Will,” 584.


87Verbrugge, Able-Bodied Womanhood, 3-10. In her introduction Verbrugge makes the argument that while health is a moral imperative and ideas about health are shaped by the medical establishment, women and men are able to sift through the moral and physical prescriptions offered them to make their own informed decisions.
