

So You Think You're Not An Energy Addict?

[Note: In a former life I worked for a number of years at a community mental health center in Chicago. During lunch one afternoon I performed a small "thought experiment." I took the diagnostic definition and criteria for alcohol dependence, and, everywhere the word "alcohol" appeared, I substituted the word, "electricity." To my shock, the clinical diagnosis worked remarkably well – demonstrating to me both our (at least) psychological dependence, if not outright addiction to electricity and energy AB-use. It has convinced me that only through major and radical personal behavior change on the part of individuals – not through inventing or implementing new technologies – will we be able to confront and reverse the harmful effects of climate change.
– Dave Kraft, Director, NEIS]

303.9x Alcohol Dependence (1)

[NOTE: This classification is more severe than Alcohol Abuse, 305.0x; from the (1) APA's "Quick Reference to the Diagnostic Criteria from DSM-III"; pp. 92-94. The DSM-III is the manual used by psychiatrists and mental health professionals to diagnose and treat psychiatric disorders and psychopathology.]

Diagnostic criteria:

A. Either a pattern of **pathological** use or **impairment in social or occupational functioning** due to alcohol use. (*Emphasis ours. --NEIS--*)

Pattern of pathological alcohol use: daily use of alcohol is a prerequisite for adequate functioning; inability to cut down or stop drinking; repeated efforts to control or reduce excess drinking by "going on the wagon" (periods of temporary abstinence) or restriction of drinking to certain times of the day; drinks non-beverage alcohol; goes on binges (remains intoxicated throughout the day for at least two days); occasionally drinks a fifth of spirits (or its equivalent in wine or beer); has had two or more "blackouts" (amnesiac period for events occurring while intoxicated); continues to drink despite a serious physical disorder that the individual knows is exacerbated by alcohol use.

Impairment in social or occupational functioning due to alcohol use: e.g., violence while intoxicated, absence from work, loss of job, legal difficulties (e.g., arrest for intoxicated behavior, traffic accidents while intoxicated), arguments or difficulties with family or friends because of excessive alcohol use.

B. Either tolerance or withdrawal:

(1) *Tolerance:* need for markedly increased amounts of alcohol to achieve the desired effect, or markedly diminished effect with regular use of the same amount.

(2) *Withdrawal:* development of Alcohol Withdrawal (e.g., morning "shakes" and malaise relieved by drinking) after cessation of or reduction in drinking.

2006.00 -- Energy Dependence

[Note: This classification is even more severe than Alcohol Abuse, Alcohol Dependence, and most other psychiatric diagnoses, in that it can and will wipe out large portions of humankind and a sizeable chunk of the environment if not treated and cured -- and soon. "Withdrawal symptoms" and their devastating personal, economic and environmental complications can be markedly reduced by an intelligent, yet firmly implemented treatment plan and methodical approach towards reducing demand and need for the addictive substance. If left untreated, the inevitable consequences range from environmental neuropathy, to systemic poisoning and death, personal and environmental.]

Diagnostic criteria:

A. Either a pattern of **pathological use** or **impairment in social** or **occupational functioning** due to energy, especially electricity use.

Pattern of pathological electricity use: daily, near constant use of electricity is a prerequisite for adequate functioning; inability to cut down or stop using; repeated efforts to control or reduce excess electricity use by "going on the wagon" (periods of temporary abstinence, greater reasonable environmentally compatible use as advocated by environmental groups) or restriction of electricity to certain times of the day is strenuously resisted; uses non-environmentally compatible forms of electricity generation; goes on binges (remains intoxicated throughout the day for at least two days, or as long as supplies are high and prices low); occasionally uses 25% of worldwide supplies (or its equivalent in wine or beer) for 4% of the population; has had two or more "blackouts" (either kind; but especially "amnesiac period for events occurring while intoxicated during times when supplies are high and prices are low"; contrast with "Energy Crisis"); continues to abuse despite serious environmental disorder and damage that the individual (as well as the pusher utilities and their governmental backers) knows is exacerbated by electricity abuse.

Impairment in social or occupational functioning due to electricity/energy use: e.g., violence while abusing (e.g., Ken Saro-Wiwa; the U'Wa; Gorleben), progressive absence of nature, loss of environmental quality, legal difficulties (e.g., rate-hike fights, arrest for intoxicated behavior, fines, accidents [e.g., Exxon Valdez, Chernobyl, TMI] while abusing), arguments or difficulties with family or friends, environmentalists or regulatory agencies because of excessive energy use and cost.

B. Either tolerance or withdrawal:

(1) **Tolerance:** need for markedly increased amounts of electricity/energy to achieve the "desired" effect (both personally perceived satisfaction, and corporate profits), or markedly diminished effect with regular use of the same amount.

(2) **Withdrawal:** development of Energy/Electricity Withdrawal (e.g., morning "shakes," panic and/or malaise relieved by plugging back in) after cessation of (power outages, blackouts, computer crashes) or reduction in (e.g., going on vacation) electricity/energy use.

C. One of the hallmark indicators of "addiction" and "dependence" is the user's **denial that a problem exists**. Are you still saying to yourself, "No, I'm not!" ?

To sign up for treatment, contact:

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