

The DRAM, Vol. 21(5) - Behaviors related to low-risk drinking among Australian adults

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Editor's note: Today's review is part of our month-long [Special Series on Education to Promote Lower-risk Drinking, Gambling, and Substance Use](#). Throughout May, The BASIS investigates the public's awareness of, perceptions toward, and adherence to low-risk guidelines for alcohol and substance use and gambling.

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People often drink alcohol during [social occasions](#). [Research](#) has focused extensively on understanding occasions, such as being in a bar or in a drinking group, where people drink heavily. Comparatively, the social dynamics associated with low-risk drinking behaviors are not well-understood. Knowing why and when people engage in low-risk drinking behaviors can help to inform public policy and health messaging efforts. This week, as part of our Special Series on Education to Promote Lower-risk Drinking, Gambling, and Substance Use, The DRAM reviews a [study by Janette Mugavin and colleagues](#) that explored low-risk drinking behaviors among Australian adults.

What was the research question?

What are the social dynamics of Australian adults who engage in low-risk drinking?

What did the researchers do?

The researchers used Facebook to recruit a [convenience sample](#) of 2101 Australian adults. Of these, 252 qualified for the study by stating that they had not consumed five or more alcoholic drinks on any occasion in the past year. The participants were primarily women (89%), were 52 years of age on average, and were affluent. They were asked to complete a survey containing five open-ended questions that were designed to promote discussion about the role that alcohol

plays in their everyday lives. The researchers qualitatively coded participants' responses to understand social practices that were related to low-risk drinking behaviors. Specifically, the researchers used [social practice theory](#) to code how drinking behaviors were associated with different materials (e.g., physical quantities of alcohol), meanings (e.g., using alcohol to be more social or as a reward), and competencies (i.e., understanding when, where, and with whom it is socially acceptable to drink alcohol).

What did they find?

Regarding materials, the researchers found that participants typically consumed 1 to 2 drinks per occasion, primarily wine at home or with dinner. Participants often sought quality over quantity, valued the sensory experience of drinking, and aimed for relaxation rather than intoxication. For meaning, participants stated that they saw drinking as a symbolic transition between work and leisure and as part of socializing. Participants actively distanced themselves from getting drunk and viewed intoxication negatively. Finally, regarding competencies, the participants used strategies like counting or measuring drinks or setting consumption limits to moderate their drinking. They also stated that they limited their drinking because they were satisfied with consuming smaller quantities of alcohol and because they wanted to be mindful of their health and wellbeing. Low-risk drinking behaviors were commonly associated with age- and gender-related drinking norms, such as setting a good example for teenage children. See Figure for representative quotes.

Representative Quotes of Participants' Low-risk Drinking Behaviors Related to Materials, Meanings, and Competencies

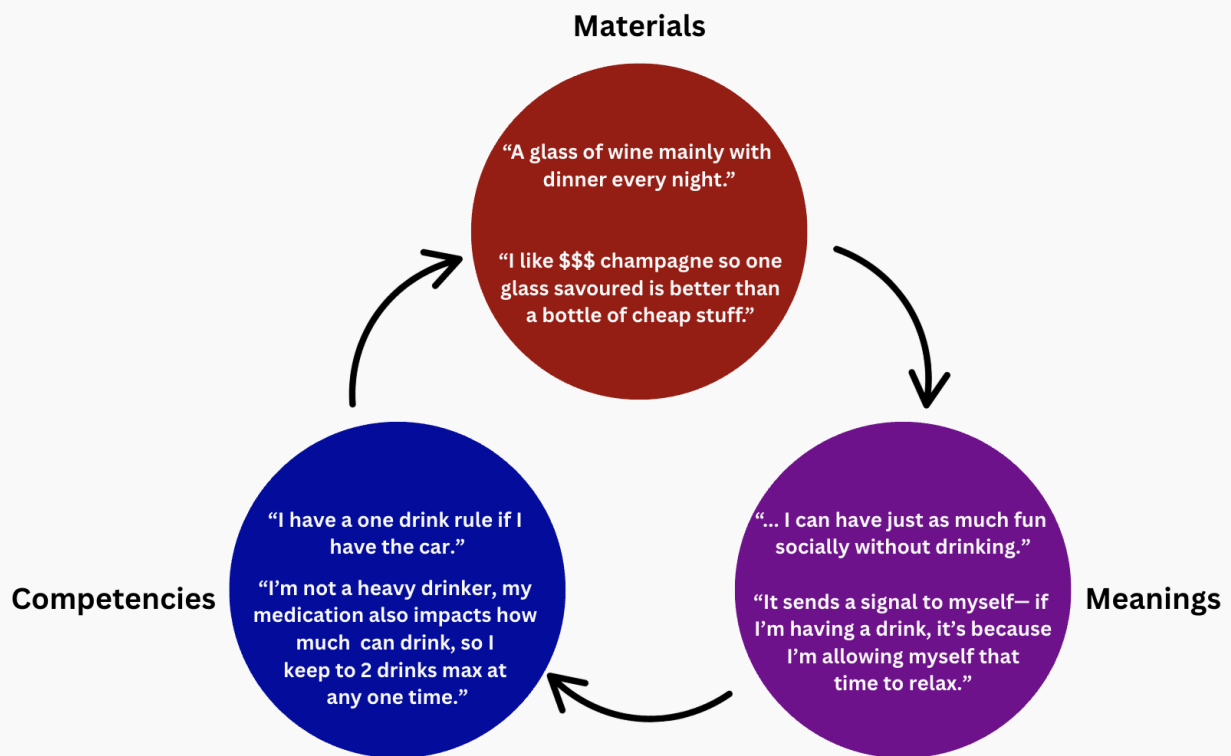


Figure. Representative quotes from participants' low-risk drinking behaviors related to materials, meanings, and competencies. Click image to enlarge.

Why do these findings matter?

By identifying the elements that support low-risk drinking practices, particularly among middle-aged adults, policymakers and health professionals can develop more effective, targeted interventions that build on existing positive practices rather than focusing solely on risk reduction. Understanding these elements could inform messaging that resonates with cultural values and norms rather than relying on abstinence-focused campaigns. This sort of [norm-based approach](#) has been effective in [other contexts](#).

Every study has limitations. What are the limitations in this study?

This study was limited to a convenience sample of Australian adults, which was not representative in a number of ways. For instance, the sample was predominantly older women who had high household incomes. Because of this, the results of the study should be interpreted knowing that they cannot be generalized to other populations. It is likely that there are other low-risk drinking behaviors beyond those described in this study. The study also qualitatively analyzed participants' responses to open-ended questions. This could lead to participants providing less detailed responses than they might through qualitative

interviews.

For more information:

If you are worried that you or someone you know is experiencing addiction, the [SAMHSA National Helpline](#) is a free treatment and information service available 24/7. For more details about addiction, visit our [Addiction Resources](#) page.

— Seth McCulloch, PhD

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