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Risk, Control and Hyper-Moderate Drinking Amongst Generation Z

Introduction

In recent decades, excessive drinking and young people have been inseparable in public, political and academic debates on alcohol in the UK. The association of young people with problematic drinking has been apparent since at least the 1960s (Yeomans, 2014) and attracted increased attention in the early twenty-first century. During this time, an expansion of the night-time economies of many city and town centres (see Hollands and Chatterton, 2003; Hadfield, 2006) coincided with the emergence of 'binge drinking' as the preferred description of excessive youth drinking practices (Cricher, 2008; Berridge et al, 2009; Hayward and Hobbs, 2009). Binge drinking was widely condemned in the 2000s; Prime Minister Tony Blair called it a "new British disease" (BBC News, 2004) and newspaper columns were filled with lurid descriptions of 'booze Britain', as well as salacious images of drunken young people – usually female – in various states of public intoxication (Cricher, 2008; J. Nicholls, 2010). Despite these representations of unbridled hedonism, academic studies found a different reality. Although actively pursuing intoxication, young people were making situational adaptations in order to mitigate certain risks by, for example, ensuring they retained the capacity to safely negotiate the journey home, avoid violent confrontations or take action to minimise hangovers (Measham, 2004; Measham and Brain, 2005; Szmigin et al, 2008). Binge drinking thus came to be understood as at least partly calculated; not pure hedonistic abandon but a "controlled loss of control" (Measham and Brain, 2005: 273). This chapter revisits the connections between risk, control and young people's alcohol consumption in an era of declining drinking.

Alcohol consumption in the UK began a sustained decline in the mid-2000s. Surveys have found consistent declines in self-reported drinking (e.g. Health Survey for England; Scottish Health Survey, 2020) while the British Beer and Pub Association concluded that overall consumption fell by 17% from 2004 and 2016 (BBPA, 2017). Within this broader decline, there has been a more pronounced reduction in drinking amongst young people in the UK and many other Western countries. The fact that this decrease in drinking is mirrored by concurrent reductions in smoking, un-

protected sex and other 'risky' behaviours has led to 'Generation Z', or those born roughly between the mid-1990s and the early 2000s, being dubbed a 'Generation Sensible' (BBC, 2018). It is, therefore, an opportune moment to re-examine the role of risk and control within the drinking behaviours of young people. The intuitive means to achieve this might be to replicate the sort of research that was conducted with young drinkers in the 2000s by interviewing them about how they consume alcohol or observing them as they embark on nights out or other heavy drinking occasions (see, for example, Martinic and Measham, 2008; and Griffin et al, 2009). But, from our perspective, the most striking aspect of recent changes to young people's drinking is not the decline in excessive drinking but the dramatic growth of moderation. UK survey data has found decreasing levels of heavy drinking as well as increased teetotalism amongst 16-24 year olds (NHS, 2018; ONS, 2018). A new range of low alcohol or alcohol-free drinks have entered the market (see Anderson et al, 2020) as manufacturers have sought to profit from this emergent trend. Remarkably, the 16-24 age bracket now contains a higher proportion of non-drinkers and low risk drinkers (81%) than any other age group except the over-75s (NHS, 2018). For this reason, this chapter deviates from the orthodox preoccupation of alcohol studies with excess (Thurnell-Read, 2016) and instead concentrates upon moderation. Taking this less trodden path leads us to an intriguing set of questions. What is moderation? How is it understood by young people today? How do these understandings shape the drinking habits of Generation Z? These questions are central to the analysis and discussion presented here.

Inspired by the work of Karl Mannheim ([1923] 1952), this chapter conceptualises 'Generation Z' (those born roughly between 1995 and 2005) as a 'social generation' - that is, a birth cohort experiencing similar social conditions with attendant implications for cultural expression and individual subjectivity. A social generational approach does not seek to establish uniform attitudes and dispositions across a whole generation and recognises that social conditions are not experienced in a uniform manner (Woodman and Wyn, 2015). Rather, gender, class, ethnicity, and other forms of social difference shape the perspectives, experiences, and life chances of members of a social generation. Moreover, as Philip Abrams (1982, p. 261-2) argued, cut-off points and distinctions between generations are opaque and may only become visible over time. Though experienced in uneven ways and with

considerable overlap with the situations facing preceding and succeeding cohorts, members of 'Generation Z' nevertheless experience similar overarching conditions with regard to education, the labour market, housing, family life, and so forth. In the UK, the economic recession of 2008 and the years of austerity that followed have created a context in which youth transitions are understood to be less predictable than they were in previous decades (Hall, 2019), a situation worsened by the rising costs of attending university. In the wake of these events and processes, there is emerging evidence regarding the distinct nature of the experiences of 'Generation Z' as a social generation, including the idea that collectively they engage in less of the risky practices associated with youth than many previous generations of young people.

This chapter examines understandings of moderation amongst young people aged 18-25 in the UK who drink little or no alcohol through a survey and an accompanying set of focus groups conducted with members of non-drinking student societies at UK universities. This chapter is, as far as we are aware, the first study of how any specific generation understands moderation, but its particular value derives from its concentration on Generation Z and those within this cohort who actively avoid or routinely moderate their alcohol consumption. Eschewing the abstract constructions of moderation that dominate scientific and policy discourse, it builds on a growing body of mainly qualitative research that examines the meanings attached to drinking by 'moderate', 'sensible' or 'light' drinkers themselves (e.g. Thurnell-Read, 2016; Caluzzi et al, 2020; E. Nicholls, 2021). In doing so, it provides insights which are relevant to ongoing efforts to explain the continuing decline in youth drinking across many Western countries (see Room et al, 2019; Mansson et al, 2020). It also advances the generational study of drinking by demonstrating the value of a social generations approach in making sense of emerging practices of alcohol consumption.

Moderation and Hyper-moderation

Moderation is usually defined as the "avoidance of excess or extremes in behaviour" (Oxford English Dictionary, 2021). It follows that moderate drinking must exist somewhere between the extremes of excessive drinking on the one hand and total, permanent abstinence from alcohol on the other. It is common to turn to

official government guidelines on recommended maximum alcohol intake to identify exactly where, between these extremes, moderate drinking is located. The current UK guidelines recommend that men and women should not regularly consume more than 112 grammes of pure alcohol per week (14 UK units)¹. Controlling personal consumption in this way will, it is explained, reduce the health risks associated with drinking (UK Government, 2016). Exactly how much drinking is 'too much' remains unclear, however. The association between quantities of alcohol consumed and risk of illness varies between different health conditions. Drinking seems to have a linear relationship with some health conditions in which risk rises in proportion to increases in consumption, but the relationship with other conditions is curvilinear or shaped by a threshold of risk reached at a certain level of consumption. The relationship between average risk within a population and the risk to any one individual, with their unique genetics, health and other characteristics, further complicates attempts to define what level of drinking is definitively unsafe (Furtwangler and De Visser, 2013; Yeomans, 2013). These aetiological complexities are part of the reason why drinking guidelines vary so much internationally. Furtwangler and De Visser's survey of drinking guidelines in 57 countries concludes that there is "a remarkable lack of agreement about what constitutes harmful or excessive alcohol consumption" (2013: 11). Moderate drinking is therefore an amorphous concept that takes different forms in the drinking guidelines of different countries.

Constructions of moderation also vary through time. The Royal College of Physicians' (RCP) 1987 recommendation that women limit their drinking to 112g of alcohol per week (14 units) and men to 168g (21 units) superseded earlier, more generous expert guidance and became the basis for UK policy (see Thom, 1999). The UK guidelines were tightened further in 2016 when the Chief Medical Officer asserted that neither women nor men should exceed 112g of alcohol per week (14 units) (UK Government, 2016). The specific advice given to women who are pregnant or trying to conceive also changed in 2006 when a recommendation of abstinence replaced the previous, more liberal guidance (Lowe and Lee, 2010). For particular groups and for the general population, moderation in alcohol consumption is thus being gradually reconstructed as something defined by progressively smaller quantities of alcohol consumption. This process, whereby the definition of

¹ All references to 'units' refer to UK units. A UK unit of alcohol is 8 grammes of pure alcohol.

moderation in alcohol policy is morphing from a notional midpoint between the extremes of excess and abstinence into something increasingly proximal to abstinence, has been termed 'hyper-moderation' (Yeomans, 2013).

Hyper-moderation might seem an unsurprising process if changes in official advice followed advances in scientific knowledge highlighting new or greater risks inherent in previously acceptable quantities of alcohol consumption. But it is not consistently apparent that this is what is occurring. Lowe and Lee (2010) demonstrate that guidance for pregnant women was altered in 2006 despite the absence of new evidence on the risks of drinking during pregnancy. The RCP (1987) issued the recommendation that drinkers limit their consumption to 14/21 units per week (which became the basis of UK policy) despite concluding that there was insufficient evidence from which to make a conclusive judgment about what level of drinking is safe. The downward revision of these guidelines (to 14 units) was implemented in 2016 after a review of relevant evidence by an expert panel (see Committee on Carcinogenicity, 2015). Increased knowledge of how the average risk of developing cancer increases with any level of alcohol consumption is cited as the main reason for lowering the limit for male consumption (UK Government, 2016) although, given that risk increases with any consumption, it is not entirely clear why 14 units is selected as the upper limit (for both women and men). The connection between changing scientific understandings of the risk of harm and official constructions of moderate drinking is often questionable and, in some instances, clearly overridden by a precautionary governmental impulse.

Shifting understandings of risk are one of the mechanisms driving this trend towards ever-lower drinking guidelines. Echoing the description classically set out in the cultural theory of risk (Douglas, 1992), there is a specific tendency for risk to be viewed as a hazard or danger, rather than an expression of the probability of that hazard or danger resulting in harm. Keane (2011) examined the construction of intoxication within Australian alcohol policy and found that, instead of a temporary psychoactive state that leads to increased risk of certain harms, intoxication was constructed as something to be avoided, a harm in itself. Lindsey's study of healthy living guidelines detected an "unacknowledged slippage between different meanings of 'risk' as they are deployed within the guidelines from understanding 'risk' as an abstract probability to understanding 'risk' as a danger to the individual" (2010: 477).

So, in certain public health discourses, risk – or, indeed, uncertainty about the existence or degree of risk – is constructed as a danger in itself. Risk ceases here to be a probabilistic tool to manage the likelihood of harm and instead becomes a language through which to advertise danger to be avoided.

While the policy trend towards precautionary-driven hyper-moderation has been studied, little is known about whether there is a concomitant behavioural dimension. The suggestion here is not that changes in official drinking guidelines may have altered drinking behaviour. Studies have found that they have little to no impact over the everyday decisions that people make about alcohol consumption (e.g. Kerr and Stockwell, 2012; Lovatt et al, 2015; Furtwangler and De Visser, 2017). Drinking guidelines have been criticised for being overly stringent and setting advised upper limits to regular consumption at points too far beneath typical levels of consumption (Lindsey, 2010; Lovatt et al, 2015). Many drinkers simply disregard the guidelines. Others struggle to understand how many units are contained in the actual drinks they purchase, or how guidance on regular drinking should be interpreted by those who drink heavily but relatively infrequently, such as weekend binge drinkers. There is a pervasive sense that drinking guidelines are disconnected from normal social life and exist within an “idealised, individualised world where lifestyle change is a straightforward matter of putting knowledge into practice” (Lindsey, 2010: 475; also Hackey et al, 2008; Lovatt et al, 2015). In reality, individual decisions about drinking are not made in a social vacuum but within everyday contexts shaped by social norms, cultural expectations, commercial messaging, inter-personal obligations, personal or group identities, and the individual or collective pursuit of pleasure through drink or intoxication.

In light of this, the present study is grounded in lived experiences of drinking and non-drinking and allows us to investigate whether there is evidence of hyper-moderation in drinking practice as well as alcohol policy. The decline in drinking from the early 2000s onwards makes such a connection plausible. Various studies have interpreted these ongoing shifts as a ‘long wave’ of supranational, generational social change driven by factors such as new technology (especially social media), changing parenting styles and the growing importance of health and fitness (Pennay et al, 2018; Room et al, 2019; Kraus et al, 2019). These studies acknowledge the

need to better understand the nature, extent and causes of this generational decline in drinking.

Exploring lived experiences and understandings of moderation provides a window into the reasons why many young people are drinking less. There is an existing literature around young people who drink little or no alcohol, much of which positions light or non-drinking young people as the exception and explores how they negotiate or manage their own non-consumption within cultures or contexts in which drinking and drunkenness are normalised (Nairn et al, 2006; Piacentini and Bannister, 2009; Conroy and De Visser, 2014; Supski and Lindsey, 2016; Frank et al, 2020).

However, as generational trends in consumption have become more pronounced, researchers have begun to investigate drinking and non-drinking amongst young people in the contrasting context of the ongoing decline of youth drinking. It is notable that, while forms of 'care for the self' do sometimes feature in studies of non-drinkers as exceptions (e.g. Supski and Lindsey, 2016), a perceived need to maintain health and retain control tends to be attributed greater importance within studies that examine moderate or non-drinking within a context in which they are increasingly prevalent (e.g. Caluzzi et al, 2020b; Frank et al, 2020; Månsson et al, 2020). These emerging findings could be reflective of a growing obligation – identified within wider studies of the sociology of health in the contemporary era – that expects or requires individuals to be proactive in the management their own health and wellbeing (e.g. Crawford, 1980; Lupton, 1995). Indeed, Caluzzi et al (2020a) argue that the decline in youth drinking may be connected to the internalisation of 'healthism' – a socio-cultural practice first identified by Crawford (1980), which transforms health into a state of risk requiring constant individual management through everyday decision-making. While Caluzzi et al (2020a) do not examine constructions of moderation as such, their concern for understandings of risk and the potential connection between individual drinking practices and wider socio-cultural trends resonates with our focus here. The original empirical research presented in this chapter thus extends existing knowledge of how moderate drinking is understood and practised by contemporary young people in the UK, as well as providing insights that help make sense of the ongoing generational shift in drinking habits.

Methods

This chapter is based on evidence from two empirical sources. Firstly, a survey among those aged 18-25 who consider themselves moderate or non-drinkers was conducted across June and early July 2020. The survey consisted of an online, self-completion questionnaire with mostly multiple-choice questions but also a small number of open questions. 517 people completed the survey, of whom 96% were aged 18-25 (while the remaining 4% did not disclose their age). We distributed the survey through university mailing lists and social media platforms. 79% of the sample were female, 17% male and 1.7% non-binary. High female participation has featured in other surveys of light or low risk drinking (e.g. Mugavin et al, 2020). 60% of the sample reported having no religion, 20% were Christians, 6% were Muslims and small numbers belonged to other faiths. Judging from the last job of their main income-earning parent, the majority seemed to be broadly middle class in their socio-economic backgrounds, although this sample characteristic is less likely to reflect the characteristics of the target population and more likely to derive from the use of university mailing lists and academic social media accounts to recruit respondents. The analysis of survey findings presented here consists of descriptive statistics.

Secondly, four focus groups were conducted with members of non-drinking student societies in June and July 2020. A growing number of 'sober' or 'high on life' societies are attached to students' unions within UK universities. They are not religiously affiliated and generally aim to provide opportunities for socialising and recreation that do not involve alcohol. We identified sober societies from the webpages of various students' unions, contacted them through publicly available email addresses and arranged focus groups with those willing to participate. We conducted one focus group with sober society members studying at a university that is medium-sized (with respect to student numbers) and situated in a small city in northern England. We conducted another focus group with sober society members studying at a medium-sized institution in southern England and two separate focus groups with different sober society members at a large university in a medium-sized city in northern England. A total of thirteen participants took part in the four focus groups (10 female, 3 male). The focus groups took place during the coronavirus pandemic and so were conducted online (via Zoom). As a result of the unusual circumstances during data collection, participants were asked about how they did or

did not consume alcohol both before and during the pandemic. The resulting qualitative data was analysed thematically.

This study is limited somewhat by the convenience sampling strategy which drew primarily upon the online networks of the researchers and was biased towards young people who were former or present university students. The focus groups also targeted sober societies in a non-probability, purposive fashion due to our interest in emergent forms of moderation or non-drinking. This is not, however, a significant concern. Given how little is known about this group and the resources we had available, we did not seek (and could not have obtained) a representative sample of UK young people who drink moderately or not at all. Nor did we apply deductive reasoning or seek generalisable conclusions. Instead, we conducted an exploratory, primarily inductive study. We used two distinct methods to research young people who drink little or no alcohol and, as will be apparent in the analysis sections, placed greater emphasis on the qualitative data derived from the focus groups. The survey findings are used primarily to describe and contextualise young people's moderate or non-drinking from a broader perspective. The focus groups provided the opportunity for deeper, interpretive analysis of the meaning of drinking and non-drinking within young people's lives. Hence, the sort of non-probability sampling and inductive orientation employed more generally within qualitative studies (Lewis-Beck et al, 2004) is entirely appropriate.²**Results**

Occasional Drinking

In our survey, 18% of participants reported never consuming alcohol. The majority (77%) did consume alcohol but only 'occasionally' (33%) or 'very occasionally' (34%). 'Occasional drinker' was also the most popular term for self-identification amongst our survey, preferred by 46%. 'Light drinkers' was preferred by 26% and 'non-drinker' by 21%. When asked to select the contexts in which they would drink, the most popular answers were 'at a party' (33%), 'at a pub' (27%) and 'only at celebrations like a wedding' (16%). An occasional drinker from a focus group explained these habits further and indicated that different drink options are relevant too:

² The research was granted ethical approval by the SRC Ethics Panel of the University of Kent School of Social Policy, Sociology and Social Research (reference: SRCEA id 258).

...occasionally I'll drink it if there's some cocktails that I think... I can actually appreciate it, but I've never gotten drunk or anything like that, so I'm usually a non-drinker. (Tom, southern university)

These results echo the findings of Mugavin et al (2020). Using survey data on 'low risk' Australian drinkers, they characterised the majority of these (65%) as 'special occasion' drinkers who were usually abstinent but would drink between a half and four drinks during celebrations or other events on a small number of days each year. Like our participants, Mugavin et al's occasional drinkers tended to be younger than other low risk drinkers and to prefer drinking in pubs or at parties.

Most of our participants viewed their current habits as unlikely to change. When asked whether they thought their drinking habits would change when they reached the age that their parents are now, 37% of our survey participants thought their drinking habits would change while 39% said no. This latter group could be underestimating the likelihood of their habits changing: a qualitative study of young Swedish drinkers found some evidence of abstinence being replaced by occasional drinking over time (Månsson et al, 2020). They were, however, more likely to associate alcohol with being a teenager (37%) than being an adult (28%). Participants in our focus groups emphasised the permanence of abstinence or occasional drinking; this is perhaps unsurprising given that they are members of sober student societies. Few reported that they anticipate increased drinking at any point in their lives and several stated clearly that they intend not to do that.

Sometimes I think about it because it's a normal thing, but I just don't want to, and so I don't think I will change it. (Elise, southern university)

Two focus group participants acknowledged that their habits might alter as their circumstances change:

I can see myself having to drink more as life gets more and more stressful, but I also think that life is getting more and more stressful since I was about six years old, so I'm not really sure if I will start drinking more because life has gotten more stressful.... (James, southern university)

The last point is worth emphasising. Månsson et al (2020) identified going to university, making new friends and spending more time in bars and clubs as reasons

why some young people abandon moderation. Our participants, however, had already made that transition at the time of data collection. They had, moreover, endured several months of lockdown during the coronavirus pandemic and it is quite plausible that this experience might have increased stress or heightened other factors that inclined them towards drinking. But 55% of our survey participants said their drinking was unaffected by lockdown. Only 11% reported an increase in their drinking while 32% reported a reduction or complete cessation of drinking during lockdown.

Our data was collected during one sweep only and, of course, only time will truly tell how Generation Z's drinking habits develop through their life courses. But our findings provide no sense that drinking habits will alter as our participants age or, indeed, as wider social change occurs. Occasional drinking is thus central to how our participants from Generation Z relate to alcohol.

Understandings of Moderation

Our survey participants were asked 'what does moderate drinking mean to you?' and were given options that could be selected or added to. 145 participants defined moderation as 'consuming a certain number of units per day or per week'. When asked to specify this number, 58% of these participants identified moderate drinking as consuming up to 5 units (40g) per week and 22% selected 6-10 units (48-80g) per week. Those who favour a quantitative conception of moderation therefore define moderation as significantly lower than the threshold of acceptability set out in the UK drinking guidelines and, for the majority, actually closer to total abstinence than to the upper limit of official low-risk consumption (14 units/112g). Our focus groups echoed these views. As one participant explained, moderate drinking is:

...drinking because you like the taste of the drink or you have... like one bottle of cider and that's it, and it would be maybe like on the weekends or on a special occasion. Like, I think as soon as you get over maybe like more than twice a week, it starts to get into, oh, that's just a regular habit, rather than a moderate amount occasionally. (Alison, small northern university)

Such views show the salience of hyper-moderate views of drinking within our sample. Moderation is confined to the consumption of only small amounts of alcohol on an occasional basis. The occasional nature of such drinking means that moderate

drinking among this cohort is not a 'habit', but rather a latent potentiality embedded in specific kinds of occasions.

Overall, most participants favoured non-quantitative conceptions of moderation. 'Drinking with others but not alone' (18%), 'drinking alcohol but never to the point of being drunk' (18%) and 'drinking alcohol but remaining in control of my actions' (25%) were the most popular responses to our survey questions on meanings of moderation. Similarly, when our focus groups discussed moderate drinking, they made no mention of alcoholic units or official guidelines. Instead, several focus group participants confirmed and extended the point that moderation is intimately connected with efforts to avoid drunkenness and remain in control. As one participant put it:

[A moderate drinker] means someone who has a couple of drinks but they're not actively drinking to get drunk. They may be just like, 'I fancy the taste of it or something'. (Isabel, large northern university)

The salience of non-intoxication and focus upon taste was confirmed by others, for example:

...well, for me at least, if I drink, it's because like it's something that I like the flavour of or just happens to be that I want to drink something at that point. But I don't – like, a lot of the time, I decide not to just because I'm not interested at all in like the experience of being drunk, or like drinking alcohol. (Jennifer, small northern university)

Additionally, participants raised the importance of knowing not to drink every day and knowing "when to start and... when to stop" (Kate, large northern university). Moderate drinking is, therefore, contrasted to both drunkenness and the daily consumption of small, potentially non-intoxicating amounts of alcohol.

For our participants, moderation bears little resemblance to official drinking guidelines. Instead, moderate drinking is understood as bounded by occasional patterns of consumption, a refrain from intoxication and the pursuit of disciplined, sensory pleasure through the taste of certain drinks consumed in certain contexts. It is these experiential or phenomenological boundaries, not any quantitative formulation of recommended upper drinking limits, that give moderation meaning to

the young people we researched.

Risks of Drinking

Why do our participants understand drinking in this way? It might be possible to conceive of our participants as straightforward rational actors using available information on the risks and harms connected to drinking to make decisions that maximise their long-term personal wellbeing. This vision of behavioural change through informed decision-making is the working assumption behind official drinking guidelines (Lindsey, 2010). And it is apparent that concerns about health were prominent within our survey. 70% of our survey participants reported concerns about the specific consequences of drinking alcohol and, when asked to specify, 'health issues' emerged as the single biggest category of answers (21%), ahead of 'loss of control' (13%) and 'change in behaviour/embarrassment' (10%). Long-term health problems, particularly damage to the liver, were mentioned in all four focus groups. However, only one group really elaborated:

Like, you go out, you drink, you get a little bit relaxed, you think, oh, I'll have a couple of cigs, I'll have a smoke of that, I might snort some of that, and you're just wrecking your body. And if it's a long-term thing, you're just destroying your insides. In moderation, everything's fine, with enough rest time and good healthcare between that. (Hannah, large northern university)

Alcohol consumption is here constructed as damaging to health due to its direct long-term effects as well as the short-term manner in which drinking might lead to other behaviours that risk long-term health. In both senses, the value of moderation to long-term health is reaffirmed.

However, on balance, our findings suggest that short-term risks are more salient. Only 26% of survey participants said they would drink more alcohol if it posed no long-term risk to health whereas 59% said this would not affect their (non)consumption. Similarly, the focus groups attributed less importance to long-term health than to other potential consequences of drinking. Several participants discussed the negative effect of alcohol on mental health as an important consideration. A participant who used to drink frequently explained that:

I don't really drink because – I don't think – yeah, being drunk isn't a great state of being... I would just get really, really sad, and my mental health is up and down at the best of times. I'm not medicated, but just drinking, I'd never really have a good time. (Hannah, large northern university)

Others explicitly stated that protecting their mental health is a bigger motivation for non-drinking than protecting their physical health:

I feel like it mentally is a better thing for my mental health to not drink. In terms of physical health, less so... I'd say it more plays into mental health than physical health. (Sophie, small northern university).

These concerns about protecting mental health were also decidedly short-term. The quote above on the immediate effects on mood plus another participant's account of post-drinking anxiety display limited temporal parameters:

I have OCD. I have a bit of a history of mental health issues. I would be concerned about how getting drunk or – not necessarily getting drunk, but like the aftermath maybe would affect me. I'd be worried that, I don't know, I'd say something and then I'd have to, you know, deal with the consequences of that, or that – I do know quite a few people who – that have mental issues that definitely do seem worse the day after, that, you know, all of their symptoms are just exacerbated a bit. (Alison, small northern university)

The other short-term risk that strongly featured in our findings was the risk of being a victim of crime. Over half (51%) of survey respondents see a connection between their decision to drink moderately and their vulnerability to crime. Sexual assault is the crime that the highest number of respondents ranked as a concern, especially the young women in the sample.

Overall, participants were concerned about the impacts of alcohol on their health, as conceived holistically to include mental, physical and general wellbeing. While the long-term risks of drinking were discussed, short-term risks to physical health, mental health and personal safety featured more strongly in our results.

Control and Risk Avoidance

Several quotes in the previous section imply that the consequences of drinking that loom large in the thinking of our sample derive from a loss of control over yourself or your immediate situation. The fear of losing control underpins anxieties about taking

additional psychoactive substances, saying or doing embarrassing things, making bad decisions or becoming more vulnerable to sexual assault or other violence. It was reported explicitly by our survey respondents who identified it as a key consequence of drinking heavily (see Table 5). For focus group participants, the fear of losing control was cited as a key reason for light drinking or abstinence. In one case, staying in control was highlighted as especially important in certain drinking spaces:

...I don't like not being in control. [...] I think like a lot of it ties into like the clubbing culture. There are a lot of clubs that I don't really like and I don't feel comfortable in. So, if I'm already in an environment that I don't feel comfortable, I don't want to drink and become even more out of control in that environment. (Courtney, large northern university)

The unpleasant bodily sensations of being out of control are key to this:

...I've just never really enjoyed not feeling in control [...] even like if I was in my own flat, like I just wouldn't want to drink to get drunk. (Courtney, large northern university)

The bodily consequences of losing control stretch forward in time through the 'hang over':

...it's just the kind of general like loss of control, like the hangover, which just kind of ruins you for a day... you've only lost a day, but then if you've got four lectures that day and you're not really able to pay attention in any of them then you're then catching up for another day, and that impacts the next day, and it just doesn't really seem worth it. (Courtney, large northern university)

In addition to finding the bodily sensations of losing control as a result of intoxication unpleasant, both survey respondents and focus group participants linked specific short-term risks of drinking squarely to losing personal control:

...I'd noticed that one of our flatmates had like disappeared as we were walking round the club, and I said, 'Oh, does anybody know where she's gone?' They were like, 'Oh no, she'll turn up, don't worry.' I was like, 'Well, maybe we should worry, because she's very drunk and has just wandered off on her own.' But they were also way too drunk to really care. [...] I just would

never want to put myself in that situation... (Courtney, large northern university)

This point was re-iterated by another participant:

[Intoxication means] making yourself vulnerable and more susceptible to stuff. Like I have very sensible, straight talking friends when they're sober, you get on really well with them, and then you'll watch them have a few drinks, get a little bit loose, and then as the night wears on, "Oh yeah, I might just try a little bit of MD[MA]," or, "I might just try a little bit of that," you know, tiny quantities, and thank god, they've done it and been fine, but then you hear way too many stories about it just not working out for people. And I just think the risk is too great, outweighs the reward. (Hannah, large northern university)

The need for control therefore underpins much of how our participants understand drinking and intoxication. Losing control is seen as unpleasant in itself as well as unpleasant consequentially as it might act as a gateway to vulnerability, victimisation and other harms.

Of course, members of Generation Z are not the first to notice that drinking alcohol can be harmful. The important distinction is how the risk of harm is managed. As discussed earlier, the binge drinkers of the 2000s were generally found to practise a 'calculated hedonism' that was intended to enable the pursuit of intoxication while managing the risk of suffering various harms through the observation of certain situational constraints (Measham, 2004; Measham and Brain, 2005; Szmigin et al, 2008). For our participants, however, control does not come from managing the situational risks of drinking but from avoiding these risks entirely. One participant explicitly set out her avoidance strategy with regards to the risk of addiction or dependence:

I think with alcohol, there's like a temptation that... well, I feel stressed, so I'm just going to drink the stress to go away and I'm like because I don't even want to risk that happening, I'm like let's just not go anywhere near it because I'm like I don't want to take the chance that I'm then dependent on it. (Isabel, large northern university)

In some respects, this construction of alcohol consumption resembles the 'slippery slope' of drinking popularised by the Victorian teetotal temperance movement (Yeomans, 2014) and similarly posits that consuming even small quantities of alcohol starts the drinker on an inexorable trajectory toward harm. For our participants, the steep incline of the drinker's path compresses the semantic distance between the possibility of an individual suffering a certain alcohol-related harm and the actual occurrence alcohol-related harm. Viewed through this lens, risk is not something probabilistic that can be managed through situational adaptations and instead appears as a danger to be avoided. As one participant explained:

I go to bed and get up at the same time each day. I'll make sure I always eat fruit and veg. I exercise or do yoga every day and go for walks, and I think a lot of my life does revolve around trying to stay physically and mentally healthy, but that's just what I need to do to survive and so if I feel like something isn't making me physically or mentally healthy, then I will avoid it at all costs 'cos I just don't want to risk anything. (Kate, large northern university)

For many members of Generation Z, the avoidance of alcohol - as well as potentially other apparent dangers - has thus become a central part of a restrained, controlled lifestyle.

Conclusion

Our findings shows that moderation is principally understood as a qualitative rather than quantitative concept. Official drinking guidelines have little, if any, resonance with the decisions about alcohol that are made by the young people in our sample. When described quantitatively by those who drink little or no alcohol, moderation is typically seen as the regular consumption of a quantity of units that is closer to abstinence than to the upper limit of UK drinking guidelines. But the idea of counting units and observing certain quantitative limits barely featured within our data. This study affirms the findings of previous research that has found a disconnect between official drinking guidelines and lived experiences of drinking (Hackley et al, 2008; Lindsey, 2010; Lovatt et al, 2015). Our participants were mostly occasional drinkers and the occasionality of consumption was a key part of how they differentiated moderate drinking from other drinking habits. Equally, a refrain from intoxication and an enjoyment of alcohol purely through the pleasure of taste were crucial

considerations. So, while scientific and policy discourse define moderation with regards to certain limits on the number of alcoholic units consumed, popular or lay conceptions of moderation have a more qualitative character. Specifically, based on our findings, it is occasionality, non-intoxication and the enjoyment of pleasure through taste that give meaning to moderation within the lived experiences of Generation Z members who drink little or no alcohol.

Aspects of our findings are consistent with the results of wider studies of young people who drink little, or no alcohol conducted elsewhere in the world, notably with regard to the prevalence of occasional drinking (e.g. Mugavin, 2020; Frank et al, 2020; Caluzzi et al, 2020) and concern for health (e.g. Caluzzi et al, 2020; Frank et al 2020). The eminence of health within the lives of our participants and their individual efforts to maintain health by limiting their drinking are partially supportive of Caluzzi et al's (2020) argument that 'healthism' has been internalised by younger generations. However, it is clear that how risk is understood and how control is valorised are also significant. Specifically, an understanding that risk constitutes danger rather than probability, and so must be avoided rather than mitigated, was strongly evident amongst our participants. The contemporary centrality of avoidance to controlling risk starkly contrasts the perceptions and practices of previous generations of young binge drinkers whose 'calculated hedonism' enabled them to pursue and enjoy intoxication while retaining some measure of control over certain risks through selected situational adaptations (Measham, 2004; Measham and Brain, 2005; Hackley et al, 2008) and also diverges from orthodox understandings of moderate drinking as a mid-point between the extremes of excess and total abstinence. Based on our findings, the moderate and non-drinkers of Generation Z articulate and enact *hyper-moderate* drinking practices in which control is sought through risk avoidance.

This study has thus found a behavioural parallel to the policy trend towards hyper-moderation that was described earlier. As stated already, this behavioural hyper-moderation does not show the effectiveness of alcohol units guidelines and, indeed, there is no evidence that it results from any change to policy or law. Instead, we assert that the growing salience of a particular conception of risk (as danger to be avoided) is reconstructing how alcohol is understood at a policy level and how drinking is managed at a personal level. We have identified hyper-moderation within

the thoughts and actions of our sample of non- and light drinkers of Generation Z; it is a crucial part of how our participants perceive alcohol and rationalise their own mostly non-drinking behaviour. Given this, it is also reasonable to suggest that their greater adherence to hyper-moderation might be a key reason why Generation Z currently drink less than most other age groups and less than many preceding generations of young adults. Further research is needed to conclusively demonstrate this. Future research on Generation Z that uses samples that are more diverse than ours with respect to social class, ethnicity and gender could illuminate the commonalities and vicissitudes of the place of hyper-moderation in this generation's experience of alcohol. Broad transnational studies as well as further in-depth case studies of certain age groups and types of drinkers or non-drinkers within particular geographic or cultural contexts would be useful in this regard. Comparative research with members of older generations who abstained or drank lightly in previous decades would also be essential to establishing hyper-moderation as a generationally specific phenomenon. Nevertheless, in spite of the methodological limitations of the present study, the symmetry of behavioural hyper-moderation with policy hyper-moderation and the consistency of some of our findings with an emerging international body of knowledge, support the possibility that shifts in how risk and control are perceived are reshaping how drinking is understood and practised more widely. In short, hyper-moderation could help to explain the puzzle of declining drinking amongst recent generations of young people.

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