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## **‘Knowing how it works for me’: a qualitative interview study of the use of personalised approaches to manage common challenges during Dry January**

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# 'Knowing how it works for me': a qualitative interview study of the use of personalised approaches to manage common challenges during Dry January

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## ABSTRACT

**Background:** Participation in temporary abstinence challenges such as Dry January is associated with benefits including enduring reductions in alcohol consumption. However, undertaking temporary abstinence requires people to negotiate certain challenges. Building on previous research, we examined how and why particular strategies were used to address challenges and how use developed following January. Given differences in reported outcomes, we also explored differences and similarities in strategy use between 'official' UK Dry January registrants and those attempting an 'unofficial' alcohol-free January.

**Method:** We conducted 16 online semi-structured interviews with individuals who participated 'officially' or 'unofficially' in Dry January 2022 and who, prior to this, were regular drinkers. Data were analysed using reflexive thematic analysis and themes constructed around the common challenges people faced and the strategies used to address them.

**Results:** Four themes were generated: breaking the routine, dealing with socialising whilst not drinking, avoiding loss of motivation, and dealing with the potential for 'failure.' People took personalised approaches to addressing these challenges, retaining the meaning of important rituals and practices whilst still changing their alcohol consumption. This personalisation was reflected in the variation in strategy use and adaptation of strategies over time. Despite overall variation in strategy use, many strategies were employed by both 'official' and 'unofficial' participants.

**Conclusions:** Dry January provides an opportunity for people to learn what strategies do and do not work for them. Capitalising on the flexibility of Dry January to offer additional opportunities for personalisation may help people get the most from their Dry January experience.

## ARTICLE HISTORY

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Alcohol; alcohol abstinence; behaviour change

## Background

Temporary abstinence challenges (TACs), during which people voluntarily abstain from alcohol for a short period, may contribute to reducing alcohol consumption at the population level (de Ternay et al. 2022). Dry January, a month-long TAC, is well-established in the UK with 175,000 people registering for the official campaign, organised by the charity Alcohol Change UK, in 2023 (ACUK; Alcohol Change UK 2024). Millions more participate 'unofficially,' attempting an alcohol-free January independently (Alcohol Change UK 2022). Participation in Dry January and similar campaigns has been associated with enduring reductions in alcohol consumption, physical health improvements and increased wellbeing (de Visser et al. 2016; Thienpondt et al. 2017; Bovens et al. 2020; de Visser and Nicholls 2020; de Visser and Piper 2020). Some outcomes, including increased belief in one's ability to refuse alcohol and improved health and wellbeing are more likely to be reported by participants

registering for the campaign than those participating 'unofficially' (de Visser 2019), indicating the necessity of understanding both 'official' and 'unofficial' Dry January experiences.

Despite the potential benefits, temporary abstinence is not without difficulties. Stress, drinking triggers, alcohol's dominance in society and social pressures are some of the challenges faced by those taking a break from drinking (de Visser and Lockwood 2018; Pennay et al. 2018; Thienpondt et al. 2024). The literature identifies several strategies used to manage these challenges including planning ahead of social occasions, reducing or avoiding socialising and publicly committing to an alcohol-free period (de Visser and Lockwood 2018; Pennay et al. 2018; Pados et al. 2020).

Additionally, because alcohol consumption is a highly routinised social practice (Blue et al. 2016; Meier et al. 2018) that coexists and is interwoven with other social practices, such as eating, socialising and watching television (Schatzki 2002;

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Blue et al. 2016; Meier et al. 2018), changes to alcohol consumption also affect these intertwined practices. Considering how use of strategies to avoid drinking influences interlinked practices is necessary to develop a more holistic understanding of people's Dry January experiences.

People temporarily abstaining from alcohol report using online supports including smartphone apps and social media (de Visser and Lockwood 2018; Pennay et al. 2018; Pados et al. 2020). ACUK provides a range of digital supports for Dry January participants including the Try Dry app, motivational emails and Facebook groups (Alcohol Change UK 2018). Apps such as Try Dry allow people to self-monitor and reflect on their alcohol consumption (Bishop 2018; de Visser and Lockwood 2018). Access to online groups enables people to give and receive support (de Visser and Lockwood 2018; Pennay et al. 2018; Pados et al. 2020) and to observe the experiences of others and normalise the difficulties they may be experiencing (de Visser and Lockwood 2018; Pennay et al. 2018). Access to ACUK's supports is the main factor differentiating the 'official' and 'unofficial' Dry January experience.

Whilst we have some understanding of what Dry January registrants do to avoid drinking, we know less about how and why particular strategies are employed. It is also unclear how strategy use progresses – whether it continues, develops or stops – following January and the impact this has on other social practices. Additionally, given the differences in access to structured supports and outcomes between 'official' and 'unofficial' participants (de Visser 2019) it is important to understand any corresponding differences in strategy use during and after January. Therefore, this study aimed to answer the following research question: How do 'official' and 'unofficial' Dry January participants avoid drinking alcohol during and following Dry January?

Focussing on the challenges of temporary abstinence and the strategies individuals use to negotiate them, this paper aims to develop a deeper, more nuanced understanding of how people avoid drinking during Dry January and beyond.

## Method

We conducted online semi-structured interviews with individuals who participated in Dry January 2022. The study was underpinned by a critical realist philosophical approach to recognise that we are accessing interviewees' perception of their reality and that this, and our interpretation of it, occurs within and is influenced by a particular cultural context and language.

## Participants

We recruited interviewees who had 'officially' or 'unofficially' tried to have an alcohol-free January 2022, were 18 or older, lived in the UK and typically drank alcohol at least once per week. We aimed to recruit 12–20 interviewees with an equal number of 'official' and 'unofficial' participants. This was primarily informed by the time and resources available but also took into consideration Malterud et al.'s concept of

information power (Malterud et al. 2016), whereby the amount of relevant information held within a sample can influence the number of participants required. This included features of the planned study which may have maximised the relevant information within our sample, including the specificity of our target population and relatively narrow study aims and those which may have restricted it such as the potential influence of the first author's novice interviewer status on dialogue quality. Interviewees were recruited from a prospective observational study of Dry January 2022, Twitter/X and participant recruitment site 'Call for Participants.' Twenty interviews were conducted, with data from 16 interviewees analysed (Table 1). Four interviews were not analysed to maintain data integrity: two revealed they did not meet the eligibility criteria and two demonstrated characteristics, including vague responses, repetition of stories and reluctance to use cameras, indicating they may not be genuine participants (Pellicano et al. 2023; Ridge et al. 2023).

## Data collection

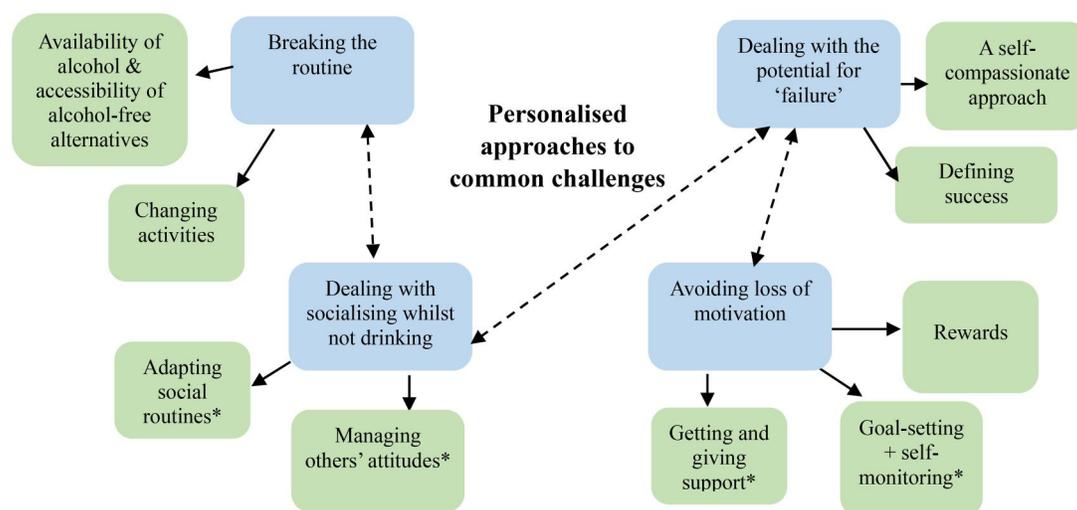
Ethical approval was received from the Department of Psychology Research Ethics Committee at the University of Sheffield (ethics no. 047230). The interview guide (Supplementary Material 1) was structured temporally from pre- to post-January to facilitate recall. It was flexible and responsive to individual narratives and developed iteratively throughout the study (Braun and Clarke 2013; DeJonckheere and Vaughn 2019). To minimise socially desirable responding and allow interviewees to highlight tools or strategies which were personally relevant, we avoided targeted questions about specific resources. All interviews were carried out between 9 September 2022 and 14 November 2022 following final data collection for the prospective observational study in August 2022. Interviews were conducted via Google Meet enabling inclusion of a geographically diverse group of interviewees (Archibald et al. 2019). Informed consent was obtained from interviewees prior to interview.

## Analytic procedure

Interviews were analysed using reflexive thematic analysis (RTA; Braun and Clarke 2006, 2021). RTA was selected due to its flexibility and coherence with our philosophical approach, research aims and method of data collection. We coded for semantic and latent meaning taking a hybrid inductive and deductive approach. This was primarily inductive with deductive analysis enabling us to ensure coding and subsequent theme generation were relevant to our research question (Byrne 2022) and reflected the influence

**Table 1.** Age and gender of interviewees according to Dry January status.

		'Official' Dry January	'Unofficial' Dry January	All participants
Age	Mean (SD)	52.38 (14.23)	33.38 (9.94)	42.88 (15.39)
	Range	28–68	22–51	22–68
		No.	No.	No.
Gender	Male	4	2	6
	Female	4	6	10



**Figure 1.** Thematic map showing the relationship between subthemes (green) and themes (blue) generated in analysis of interview data. Dashed lines indicate bidirectional relationships between particular themes. \*Subthemes where differences in 'official' and 'unofficial' Dry January approaches were most apparent, see text for details.

of conceptualising drinking as a social practice on our interpretation of the data. Further details of the analysis are available in [Supplementary Materials 2a](#).

### Reflexivity and positionality

The interview guide, developed and piloted within the research team, was based on research questions derived from the overarching aims of AB's PhD research. Interviews were conducted and transcribed by the first author who kept a reflective research diary throughout. Analysis was also conducted by AB with support from IK. Consistent with principles of RTA and our philosophical approach, this did not include consensus coding (Braun and Clarke 2021, 2024) but discussion of progress/uncertainties and reflection on potential themes. A detailed reflexivity and positionality statement is included in [Supplementary Material 2b](#).

### Results and discussion

Four themes were constructed around common challenges to non-drinking during and following Dry January: breaking the routine, dealing with socialising whilst not drinking, avoiding loss of motivation, and dealing with the potential for 'failure' (Figure 1). Whilst challenges were shared, approaches to managing them were diverse. 'Official' and 'unofficial' experiences overlapped in many places with just a few key points of difference (Figure 1). Selecting preferred strategies for specific challenges, adapting strategies to meet individual needs and tailoring their use of supports enabled people to take a personalised approach to Dry January.

#### Breaking the routine

Drinking practices were intertwined with other social practices as part of established routines. Dry January participants needed to break, and rebuild, these routines. Limiting the *availability of alcohol* and/or ensuring the *accessibility of*

*alcohol-free alternatives* such as no- and low- alcohol beverages (NoLos) and soft drinks helped break drinking routines particularly during the early stages of Dry January. Alcohol consumption was bound up with Sophie's post-work routine, but alcohol-free alternatives helped to disrupt this.

I just had a variety of flavours of tonic water in the fridge ready so if I got home from work I could just go to the fridge and there it is. (Sophie<sup>1</sup>, 43, 'Official')

Sophie's<sup>1</sup> experience reflects the often routinised nature of in-home alcohol consumption including use of alcohol to mark the transition between different parts of an individual's day and their different identities (Brierley-Jones et al. 2014; MacLean et al. 2022; Wright et al. 2022). Replacing alcohol with an alternative drink allowed her to maintain the routine, retaining the symbolic role of a drink in marking these transitions without consuming alcohol.

Other interviewees used NoLos to smooth the transition into Dry January before use gradually reduced. Some people recalled starting to consider the necessity of potential drinking occasions suggesting increased awareness of the routinised nature of previous drinking.

Jack continued to use NoLo alternatives post-January, developing a strategy to manage cravings.

... in the past [had] a bit of a habit of cracking open a beer as soon as Friday night and finished work came about and made a positive effort to change that. So would have an alcohol-free beer and maybe another one and then say to myself well I'll have an alcohol one if I still fancy. (Jack, 56, 'Official')

An alcohol-free beer allowed Jack to let the urge to drink pass and consider whether he actually wanted an alcoholic drink. Whilst consumption of both NoLos and alcoholic drinks within one drinking occasion may be uncommon (Davey 2021; Nicholls 2023b, 2023a; Perman-Howe et al. 2024), this 'strategic' use of NoLos (Nicholls 2023a) enabled Jack to maintain his end of week routine whilst also transitioning to more mindful alcohol consumption.

<sup>1</sup>All interviewee names are pseudonyms.

Others reverted to former drinking routines. Beth (22, 'Unofficial') reinstated her previous routine, albeit less frequently, of drinking wine when cooking. During Dry January wine had been replaced by grape juice. The dual role of alcohol in this practice, as ingredient and accompaniment to the cooking process, may have contributed to its retention, as the replacement might not have sufficiently captured the intended purpose.

*Changing their activities* also helped break routines. Moving out of spaces they associated with alcohol and participating in an alternative activity was helpful for some people. Kim (51, 'Unofficial') typically drank alcohol whilst watching television in her lounge. Deliberately moving to a different space in her home and undertaking an activity she did not associate with alcohol created distance between herself and the context where consumption was most likely to occur weakening the connections between the different elements of her drinking practice (Shove et al. 2012; Blue et al. 2016).

Neil similarly distracted himself with activities he did not associate with alcohol consumption.

... trying to exercise more in terms of activities cos then I think that distances you from ... they're two kind of divergent paths aren't they, going out and getting shitfaced and going out for a run instead would be the (laughs) two opposites. (Neil, 28, 'Official')

Participating in an activity he considered fundamentally incompatible with drinking helped Neil minimise the likelihood of consuming alcohol both during and following Dry January. Thus, increasing exercise was beneficial both for the positive outcomes associated with exercise itself and for its role in helping him avoid drinking.

In summary, in early January people broke drinking routines and smoothed their transition into temporary abstinence. To negotiate the challenge of entrenched drinking routines people used alcohol-free alternatives to disrupt practices whilst retaining their meaning. Undertaking alternative activities to avoid environments they associated with alcohol whilst distracting themselves from cravings, further weakened drinking routines.

### **Dealing with socialising whilst not drinking**

There was considerable variation in approaches to socialising whilst not drinking. Many people described *adapting social routines* to manage the challenges of alcohol-free socialising. This sometimes involved emotional and practical preparations before social events.

I just had to really psyche myself up a little bit before I went there to be like okay once I'm there I can perform. Almost like I can be me, oh this sounds really weird, be me but with a little bit of preparation whereas I guess before I'd relied on the alcohol effect to bring my personality out. (Rachel, 27, 'Unofficial')

Mental preparation fulfilled a role previously played by alcohol helping Rachel portray a version of herself she was happy for others to see. She reflected on how, prior to Dry January, her lack of confidence in her sober self prevented

her from engaging in certain activities without alcohol. As she gained experience in alcohol-free socialising (*'the more I did it the more I confirmed to myself that I could do it'*), the extent of preparations reduced. Increased self-esteem following successful alcohol-free social interactions (Conroy and de Visser 2018) during January, may have lessened the degree to which alcohol-free socialising challenged Rachel and reduced her need to prepare.

Adapting existing social routines during January led to some interviewees prioritising more meaningful interactions.

I'm in a relationship, a lot of my friends who have more of a lifestyle of just going out it's like they're trying to meet people cos they might be single, which I absolutely get, but it's also I more so want to connect with them as friends and not just to be someone they're sitting with while they're trying to meet people. (Fiona, 28, 'Unofficial')

Fiona, whose alcohol consumption reduced substantially post-January, reflected on how alcohol-focussed environments did not facilitate meaningful interactions at her life stage. Prioritising meaningful connection, including by deprioritising certain people, was primarily discussed by 'unofficial' interviewees in their twenties. This may be explained by the 'maturing out' of harmful drinking observed as young people transition into adult roles (Yamaguchi and Kandel 1985; Bachman et al. 2002). The purpose of socialising during this period is also suggested to change from facilitating interactions with new people to maintaining existing relationships (Järvinen and Bom 2019). Our observations may therefore reflect the age differences between 'unofficial' and 'official' interviewees (Table 1), rather than a difference in the groups' approaches to alcohol-free socialising.

Considering the response of others to their non-drinking led to distinct approaches as people decided how to *manage others' attitudes*. To mitigate others' feelings of discontentment several interviewees prewarned people that they would not be drinking. Preparing others for their non-drinking appeared to help reduce apprehension about alcohol-free socialising, potentially through removing some uncertainty.

Consistent with previous findings (de Visser and Lockwood 2018; Pennay et al. 2018; Thienpondt et al. 2024), interviewees sometimes experienced unsupportive attitudes.

... we went to a friend's house for a meal and she was doing cocktails, she said, 'get taxis' and I said, 'well actually I'll be your taxi cos I'm doing Dry January' but she said to me 'can I corrupt you, I need somebody to test my cocktails' and I said 'no I'm doing Dry January' and she tried a further four times to get me to try the cocktails which at the time... I was just puzzled at the time but my reflection on that is that I still find that really disrespectful but it was quite unexpected. (Sophie, 43, 'Official')

Refusing drinks despite persistent pressure enabled Sophie to demonstrate to herself that she could remain alcohol-free. Her experience supports suggestions that Dry January participation may help increase self-efficacy in refusing alcohol (de Visser et al. 2016; de Visser and Piper 2020) and indicates that repeatedly resisting pressure to drink may contribute to this increase.

Olivia's (28, 'Unofficial') approach differed to Sophie's. Whilst she also continued socialising, she opted to refuse alcohol without acknowledging her participation in Dry January. Managing others' attitudes by 'going stealth,' being open about not drinking but not disclosing why, helped Olivia avoid unhelpful external pressure to 'succeed' in Dry January, which she appeared to prioritise over avoiding pressure to drink.

This 'stealth' approach was only discussed by 'unofficial' participants including Phillip who avoided all socialising during January, in expectation of negative responses.

I'll make excuses [...] 'oh I can't come out tonight I'm sick' or 'I've got no money' or anything cos I think people kind of respond better to that. Funny, actually thinking about it they respond better to some kind of tragedy going on than simply saying 'actually no I just don't wanna drink.' (Phillip, 44, 'Unofficial')

Whilst disclosing TAC participation helped some people quickly explain their non-drinking (Cherrier and Gurrieri 2013; Bartram et al. 2017) for others discretion about changes to drinking was preferable, allowing them to avoid negative reactions (Herman-Kinney and Kinney 2013; Bartram et al. 2017). 'Going stealth' appeared as effective for those who took this approach as actively managing others' attitudes did for others. However, as Phillip acknowledged, avoiding socialising can increase feelings of isolation. Thus whilst a 'stealth' approach seemed an effective short-term strategy, the negative consequences of ongoing isolation on mental health (Leigh-Hunt et al. 2017) suggests, longer-term, this approach could prove more problematic.

To summarise, social routines were adapted to negotiate the challenges of alcohol-free socialising. As they settled into their 'new normal' with, in some cases, increased confidence in their ability not to drink, strategy use changed. People acknowledged, if not necessarily engaged with, others' responses to their non-drinking considering whether to actively manage other peoples' attitudes or adopt a 'stealth' approach.

### Avoiding loss of motivation

Interviewees' accounts highlighted the need to avoid losing motivation as January progressed with *getting and giving support* discussed by both 'official' and 'unofficial' participants. Participating with others enabled people to benefit from mutual emotional support.

... it was overall really positive, when we would call [each other] it was always really hyping each other up kind of thing instead of being 'ah I'm not gonna make it!' it was always just 'you've got this!' (Beth, 22, 'Unofficial')

Whilst Beth participated 'unofficially,' the positivity of her interactions echoes the positive approach to behaviour change taken by the 'official' Dry January campaign (Yeomans 2019). Mutual support may have not only served as a morale boost but also helped minimise feelings of isolation by enabling Beth to share her Dry January experience with someone else.

Other interviewees, such as Alan (68, 'Official'), also benefited from connecting to other Dry January participants. Alan found receiving support in an 'official' Dry January Facebook group beneficial with the feeling he was also helping others (*I was talking about my own experiences to encourage people and that helped as well*) providing additional motivation. He reflected on how membership of this online community helped him feel *'part of something,'* a concept previously reported as important by Dry January participants (de Visser et al. 2016; de Visser and Lockwood 2018). Only 'official' participants discussed use of online communities, potentially reflecting differences in people's desire to situate their temporary abstinence in the context of something bigger or as a shared experience, which may have contributed to their decision to officially register.

For Alan, and likely others, the motivational role of the group reduced post-January as he became less of an active contributor and more of an observer. Diversification of people's drinking intentions and goals after January and lack of an overarching shared experience may explain this.

*Goal-setting and self-monitoring* influenced motivation both during and following January with considerable variation in the nature and use of both strategies. Phillip engaged in informal, progressive goal-setting.

I strip it right back and literally go into that whole just not for today thing and just start with a day, and then two, and then three because, depending on how out of control I feel, 30 days just feels it's never gonna happen. (Phillip, 44, 'Unofficial')

Short-term goal setting like this may help people persist with behaviour change (Pearson 2012). For Phillip, it prevented demotivation from what, early in an alcohol-free month, felt like an impossible task.

Some interviewees avoided setting explicit goals. Neil (28, 'Official') approached Dry January and his intention to remain alcohol-free longer-term as a permanent change to adapt to rather than a goal to achieve. Failing to achieve a goal can lead to undesired consequences such as reduced self-efficacy (Pearson 2012). Therefore, whilst useful for some, for others, not setting a formal goal may help by minimising pressure and preventing demotivation should they fail to achieve said goal.

Reflecting on self-monitoring post-January also proved a source of ongoing motivation.

I was chatting to a friend just yesterday and I was like 'oh look at this, 31 days dry in January and 22 in February.' And it's like every month you can see it goes down, 18, 14, then 4 [dry days] and you're like 'geez!' (Louise, 39, 'Official')

Observing the change over time made it harder to avoid self-deception and motivated Louise to take another break from alcohol. Early identification of increasing consumption could prevent regression to pre-January drinking. Therefore, the motivational impact may be twofold. First, inspiring people to make a change and second, averting the potential loss of motivation should someone revert to previous drinking patterns.

Whilst discussed by the majority of 'official' Dry January interviewees, self-monitoring was reported substantially less by 'unofficial' participants with no 'unofficial' interviewee

reporting using a digital tool for self-monitoring. With alcohol reduction interventions including self-monitoring shown to have better outcomes (Michie et al. 2012) access to customisable tools which facilitate this may be advantageous. Advertising alcohol reduction apps (beyond Try Dry) at times when temporary abstinence is common could improve awareness of available resources and potentially increase uptake.

Rewards were also used to maintain motivation. Some individuals replaced alcohol with an alternative, immediate reward such as 'treat' foods whilst others favoured a delayed reward at the end of January.

I kind of motivated myself and thought [of] the money I would usually spend on going out and drinks. I just decided to get other items at the end of the month. (Matt, 29, 'Unofficial')

Matt's use of self-incentive, planning to reward himself after sufficient progress towards a behaviour or outcome (Michie et al. 2013; Knittle et al. 2020), motivated him to maintain his temporary abstinence. Creating a direct association between behaviour (not drinking) and reward by planning to use the money he was saving on his reward may have enhanced this effect.

Some interviewees did not use material rewards but instead gained a *sense* of reward from achieving goals or receiving badges on the Try Dry app.

... each night when the app would go "oh did you stay dry today" and you press yes and then it gives you the little confetti. I found that I was looking forward to that, it was real positive reinforcement each day. (Sophie, 43, 'Official')

The structure of the app enabled users to receive these extrinsic 'rewards' at different frequencies echoing the immediate versus delayed approach employed by those using physical rewards. Whilst the frequency and size of external and self-rewards differed between interviewees, their function, to maintain motivation, was the same. The diversity in reward patterns suggests interviewees themselves were best placed to identify the pattern of rewards which most suited their needs.

Sophie's experience and that of others illustrate how use of digital supports could change over time to support different strategies. Finding the daily stamps or badges motivational, some participants began to use them as incentives to reach the end of the day, week or month without drinking. Although the available evidence suggests the effect of self-incentives on behaviour change is fairly weak (Brown et al. 2018) they were nonetheless perceived to be useful by those who reported using them. Thus, for some people, whilst initially a tool for self-monitoring and goal-setting, the rewards received resulted in the app also becoming a tool for self-incentivisation.

To summarise, getting and giving support was important in sustaining motivation during Dry January. Many interviewees intended to reduce or limit their alcohol consumption post-January; strategy use was modified to reflect these changing goals. Use (or not) of goal-setting and self-monitoring in addition to self-incentivisation with personally relevant rewards also helped people avoid losing motivation.

### Dealing with the potential for 'failure'

There was variation in how interviewees *defined success*. Some only considered total abstinence during January as success. Others had a broader, more flexible understanding of a successful Dry January:

I'm not saying that we didn't do it completely [...] there were two occasions in January when we had a drink, one was my birthday and one was my husband's birthday and we just had a small amount, I had a small amount of champagne and that was it. But that was a planned decision. (Hazel, 66, 'Official')

Despite consuming alcohol during a pre-planned break, Hazel still considered her Dry January successful. More rigid definitions of success carry more opportunities to 'fail' and, as previously discussed, failure to meet a goal may have a negative effect on someone's motivation to persist with Dry January. This parallels the abstinence violation effect (AVE) whereby people may experience negative cognitive and affective responses following a lapse in abstinence (Marlatt and Gordon 1985; Curry et al. 1987). Those who attribute lapses internally, i.e. blame themselves, may experience a sense of failure and be at increased likelihood of returning to previous drinking behaviour (Curry et al. 1987; Collins and Lapp 1991). With respect to Dry January, this could lead to people ceasing their attempt at an alcohol-free month or not attempting further behaviour change. However, if the AVE can be averted a lapse can be a learning experience potentially increasing people's self-efficacy in managing challenging situations (Marlatt and Gordon 1985; Collins and Witkiewitz 2020).

Both *self-compassionate* and self-critical approaches to lapses during and following January were reported. Self-compassion, responding with care and compassion to oneself following mistakes or perceived failures (Barnard and Curry 2011), was demonstrated by some interviewees through a flexible approach to breaks, planned or otherwise. Acknowledging progress to that point and confidence in their ability to resume Dry January appeared to influence the degree to which people responded self-compassionately.

Focussing on their progress helped some interviewees avoid an all-or-nothing approach.

The other thing I'm tranna focus on, which I'm doing with loads of things, is progress not perfection. So actually even if over 30 days I had 20 days, 28 days no drinking I would see that as a massive positive whereas years ago I would have been like 'arrgh that's it I didn't do those two days' now I'd be more realistic and say 'well actually you did 28 days that's great that'll make it easier to do 30 next time' or 'that's 28 days you didn't have a drink'. (Louise, 39, 'Official')

Louise's changed approach to perceived 'failures' indicates that transition to a more self-compassionate approach is possible. Previous themes suggest the Dry January experience itself could increase participant's self-compassion. For example, adapting social routines helped people recognise their ability to socialise without alcohol thus increasing self-acceptance and their belief in their sober selves. However, having a more flexible definition of success may be necessary to react self-compassionately to lapses in abstinence.

Alternatively, being self-compassionate may itself contribute to someone defining ‘success’ more flexibly.

Several interviewees also engaged in self-talk, but with considerable difference in tone and content. In line with earlier work those taking a self-compassionate approach used positive self-talk focussing on resisting drinking and persevering with Dry January (de Visser and Lockwood 2018; Pennay et al. 2018). Conversely, more self-critical interviewees engaged in negative self-talk following alcohol consumption. Whilst the content of self-talk differed, its function, to motivate them to continue towards a particular drinking goal, was the same. This exemplifies the variation in strategy use between individuals, with the same strategy being enacted in different ways.

To summarise, definitions of ‘success’ differed between interviewees and may be shaped by the complex, individual factors influencing someone’s Dry January experience. Self-compassion and self-criticism were apparent in both ‘official’ and ‘unofficial’ participants. Some strategies, e.g. self-talk, were used in both approaches albeit being enacted in different ways.

## Conclusions

Each Dry January experience is unique. Whilst people face common challenges in breaking routines, negotiating socialising, maintaining motivation and dealing with ‘failure,’ they take personalised approaches to overcome them. The same strategy may be enacted in different ways to achieve different aims or address different challenges. Elsewhere, distinctly contrasting approaches, for example actively managing others’ expectations and ‘stealth’ approaches to socialising, appeared equally effective. Some strategies preserved the meaning of particular social practices emphasising the importance of facilitating personalisation within the formal Dry January campaign. Strategies were adapted and developed during January and maintained throughout the year in response to changing goals, pressures, knowledge and psychological capability. Our results suggest people evaluated the benefit of particular strategies at particular times, adjusting their behaviour accordingly.

Similar approaches were taken by those registered for the ‘official’ campaign and interviewees undertaking an ‘unofficial’ Dry January, with only a few notable points of difference. ‘Unofficial’ participants did not report using digital tools and discussed goal-setting and self-monitoring considerably less than their ‘official’ counterparts. They did, however, describe ‘going stealth’ to manage others’ attitudes and prioritising meaningful social interaction, neither of which were reported by ‘official’ interviewees.

This study had limitations. When comparing experiences of ‘official’ and ‘unofficial’ interviewees, we cannot assume that people not *mentioning* use of a particular tool or strategy meant they did not use it. Future studies might directly probe the use of specific tools or strategies in order to identify how official and unofficial Dry January participants differ in this regard. Additionally, to ensure we captured experiences after January, interviewing did not begin until

September, increasing the risk of recall bias. Future research could address this by employing longitudinal interviews to examine experiences of Dry January and ongoing change ‘in the moment.’

Strengths of this study include its unique insights into strategy use during and following January, and inclusion of ‘official’ and ‘unofficial’ Dry January participants. It also highlights constructs which, to the best of our knowledge, have not previously been discussed in the context of Dry January or other TACs, e.g. self-compassion. Future research should establish whether these constructs underpin changes in consumption associated with participation in Dry January. If so, these findings could be exploited by campaign organisers, for example, by incorporation into digital supports.

Our study also emphasises the need to take a nuanced approach to measuring and quantifying Dry January experiences. The notion of an individual’s Dry January being ‘successful’ or ‘unsuccessful’ according to whether or not they maintained total abstinence may be a false dichotomy. Future research should take a broader view of the measurement of ‘success.’ Finally, this work illustrates the importance of acknowledging and retaining the flexibility inherent in any type of dry January and demonstrates that registering for a campaign does not reduce this flexibility. Indeed, the availability of tools and numerous ways in which they can be utilised arguably increases opportunities for customisation. TACs, including Dry January, could and should capitalise on this by providing more tools and inspiration for people to personalise strategy use and build their own Dry January.

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## Data availability statement

Data are being deposited with the UK Data Service where it will be available on request under a CC-BY-NC-SA license.

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