

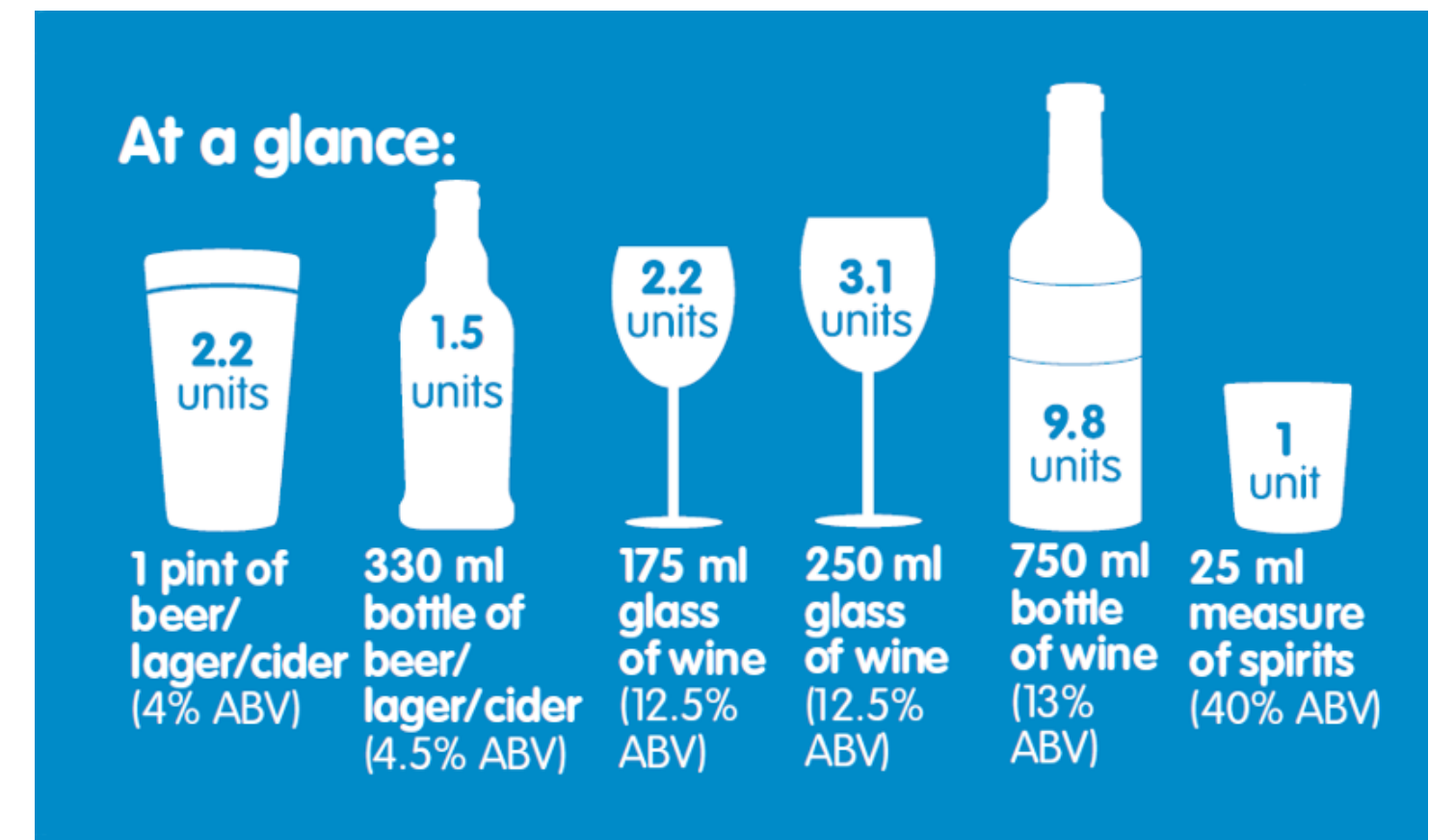
Supporting adherence to UK lower-risk alcohol guidelines amongst middle-aged risky drinkers: A randomised trial of a brief intervention

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#BSPHN26

Risky alcohol intake

- Risky intake associated with short-term and long-term consequences (e.g., accidents, injuries, cancer, lower life expectancy, and heart disease)
- Updated low risk drinking guidelines and advice in 2016
- Changes in guidelines \neq substantial behaviour change
- In 2022, around 24% of adults drank at risky levels
- In our survey of 18+ residents in Cambridgeshire, 49% of adults reported alcohol intake at risky levels



Middle-aged adults

- An overlooked demographic:
 - Men and women between 35-44 at 12% and 13% risk of alcohol-related harm
 - Men and women between 45-55 at 30% and 18% risk
- Most research explores young people (e.g., university students)
- Lack of evidence on interventions for middle-aged risky drinkers

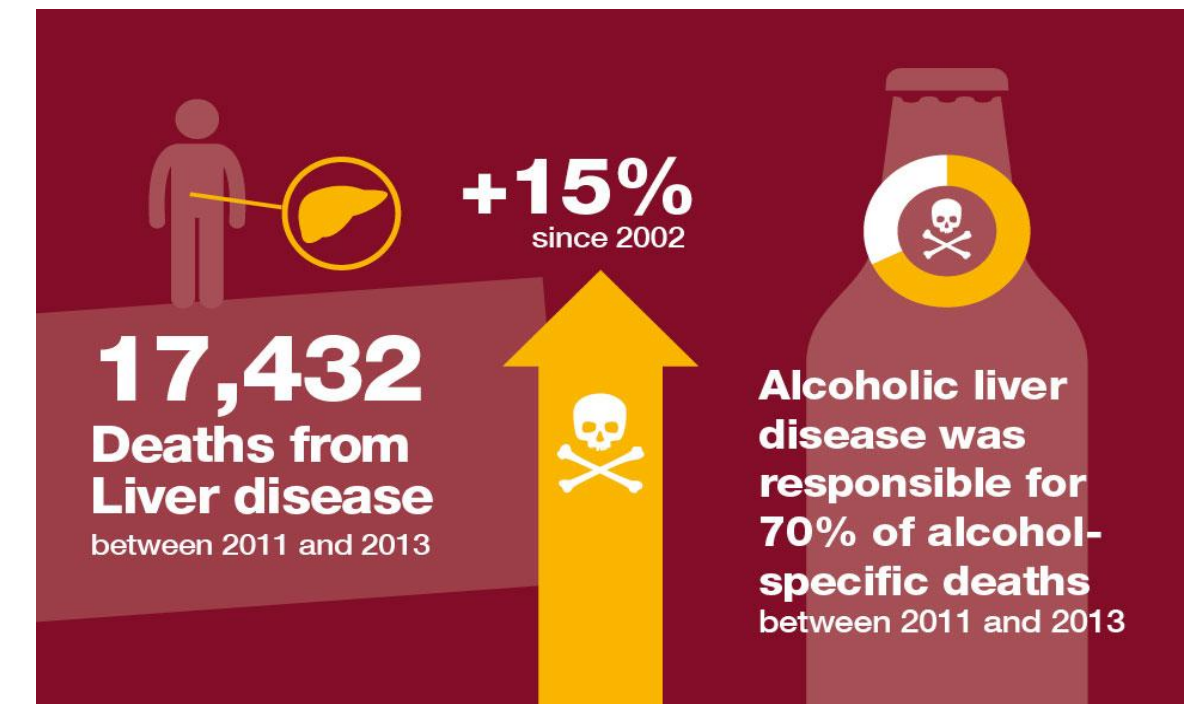


Sharing health information - Message framing

The way in which health information is presented is important. Gain-framed and loss-framed messages are two ways of presenting the same information, but with a different emphasis on outcomes.



Loss framed messages emphasise the costs of not taking action e.g. **the risks** of excessive drinking. These work better for detection and risk or urgency.



Gain-framed messages emphasise the benefits of taking action e.g. the **benefits** of cancer screening. These work better for prevention.



“I know everyone says it’s bad for you, but unless you’re a complete alcoholic, I don’t see that much negatives” - participant 9

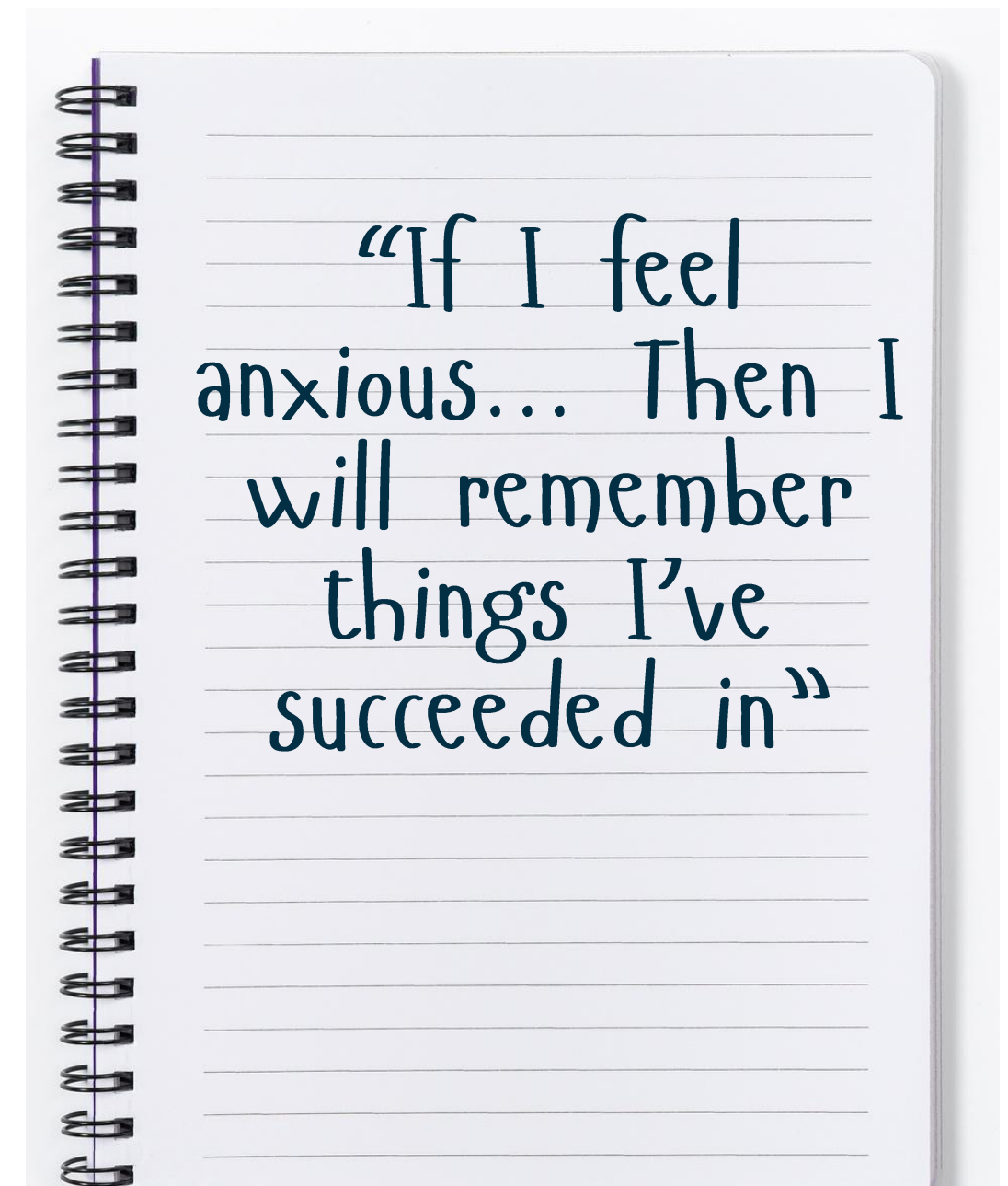
“If it did become a problem, I’d be aware of it, I would, but I can’t see it becoming a problem” - participant 3

Unrealistic optimism and defensiveness

- Unrealistic optimism **underestimates the negative effects** of risky alcohol consumption (e.g., alcohol-related harm)
 - Defensive processing kicks in:
 - This isn’t relevant to me
 - Excessive drinking harms others but not me, a social drinker
 - This can blunt the effects of risk messaging
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Self-affirmation to bridge the gap

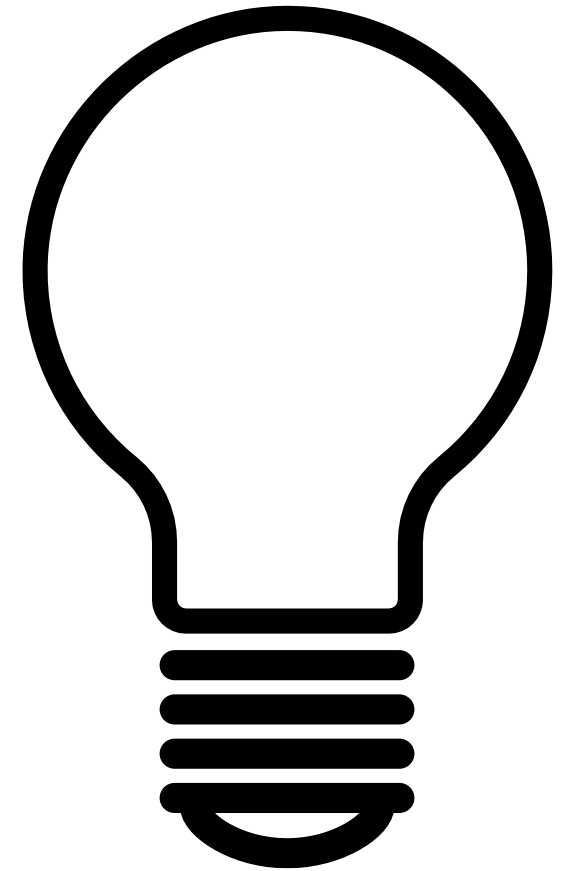
- Self-affirmation interventions can increase responsiveness to health messages
- It reduces defensiveness and helps people stay open to threatening health information
- Self-affirmation is underexplored as an intervention for middle-aged risky drinkers



Objectives and research questions

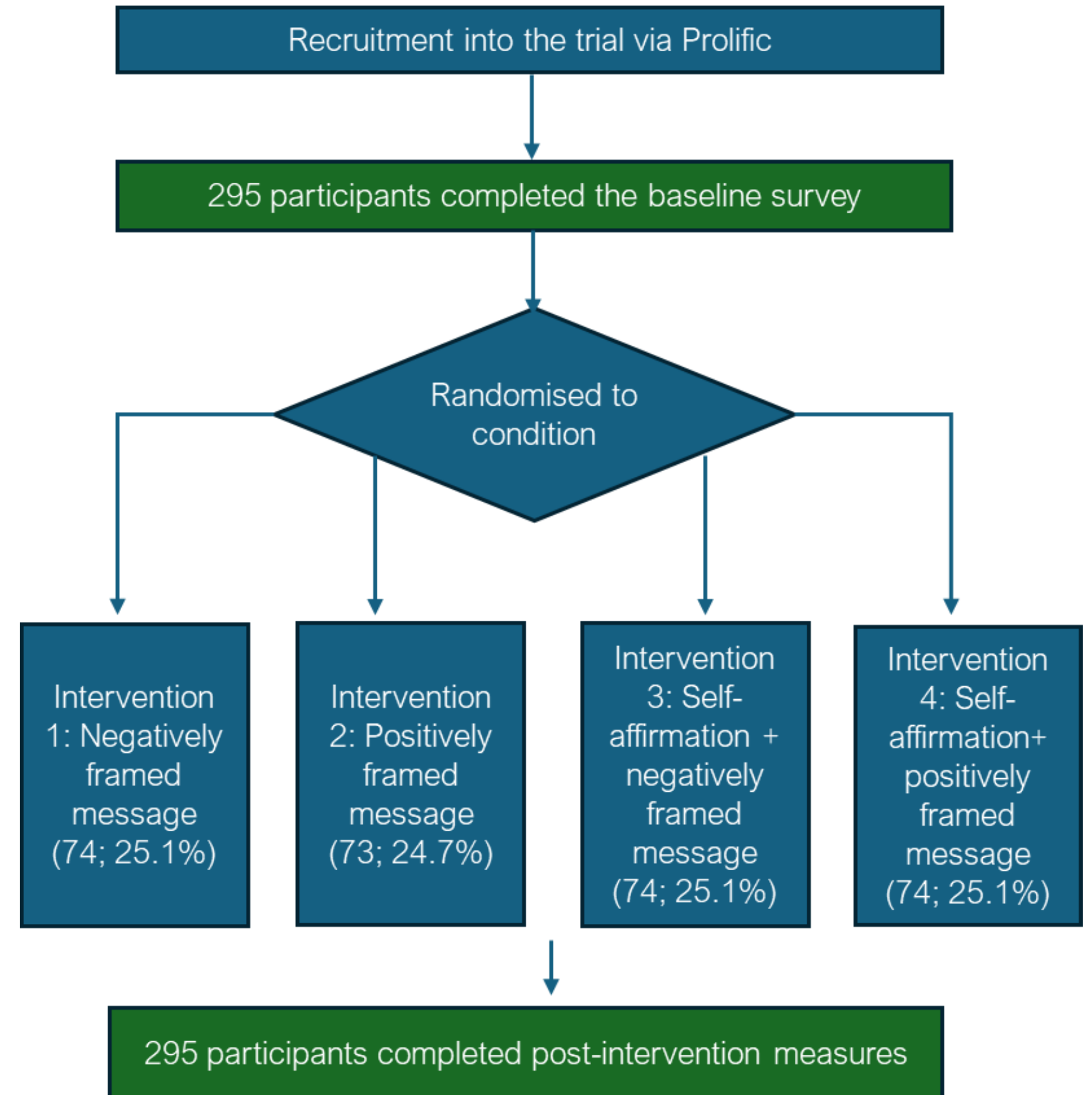
To test gain or loss framed health messages about alcohol consumption (with and without a self-affirmation activity) on intentions to drink alcohol within UK lower risk guidelines amongst middle-aged risky drinkers.

1. Can a brief intervention increase intentions to drink alcohol within UK lower risk guidelines?
2. Can a brief intervention increase message acceptance, personal relevance, positive affect, and reduce defensiveness?
3. Can a brief intervention increase perceived risk and coping?



Method

- Middle-aged (35 – 59 years) risky drinkers recruited on Prolific
- Postcodes in Cambridgeshire and surrounding areas
- Four conditions (active control = treatment as usual)



Results - Demographics



A sample of 295 middle-aged adults ranging from 35-59 ($M = 45.87$; $SD = 7.41$)



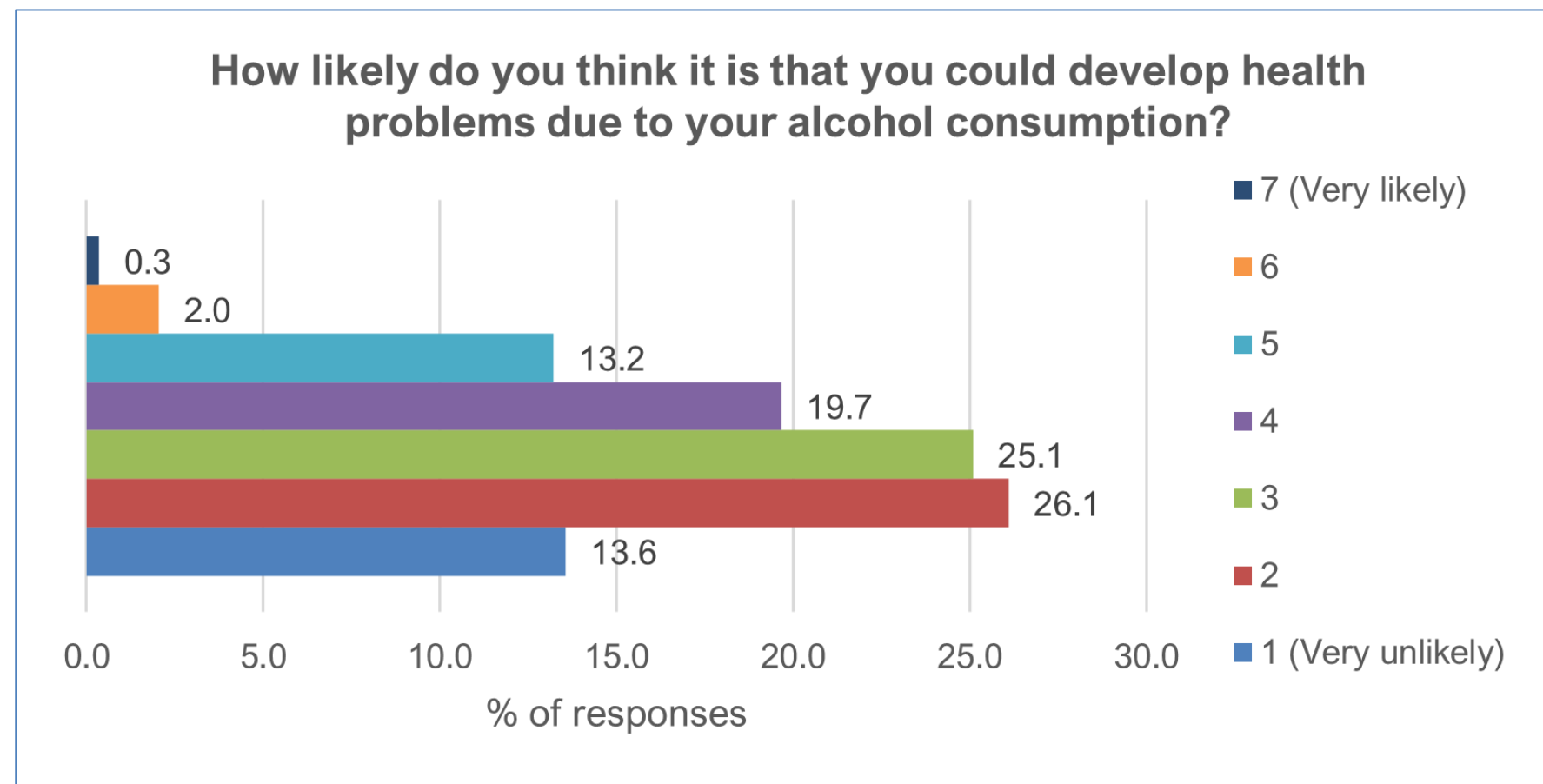
Mostly white British (89.49%), employed (86.78%), and around half were women (55.25%)



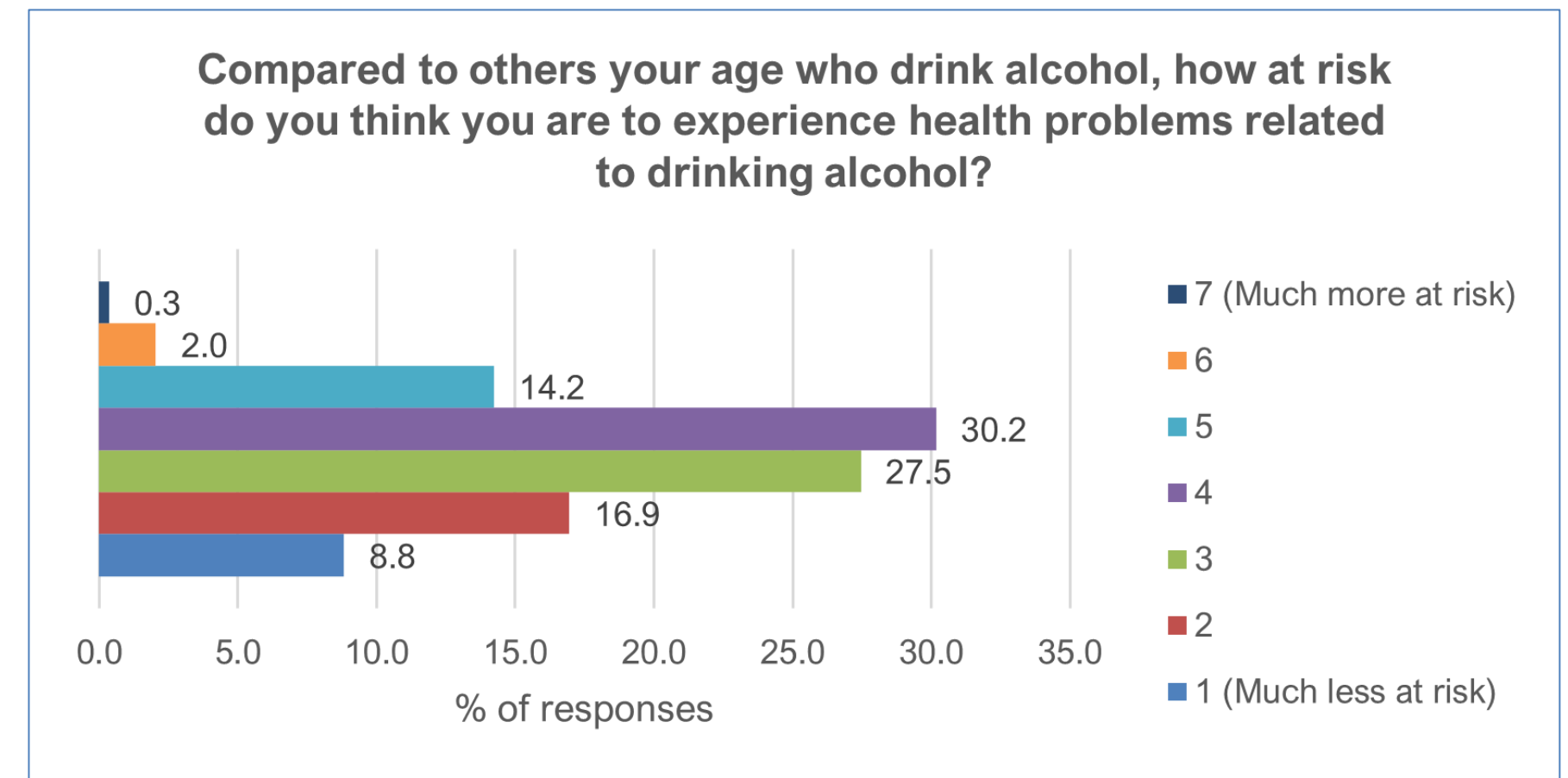
Majority were educated to undergraduate degree (38.64%) or A-level/GCE/BTEC equivalent (29.83%)

Results – Pre-intervention

Before the intervention, participants were asked questions about their **perceived susceptibility** of health risks due to alcohol consumption.



A considerable proportion of the sample perceived their risk of developing health problems as a result from their alcohol consumption to be very unlikely (13.6%), unlikely (26.1%) or somewhat unlikely (25.1%).

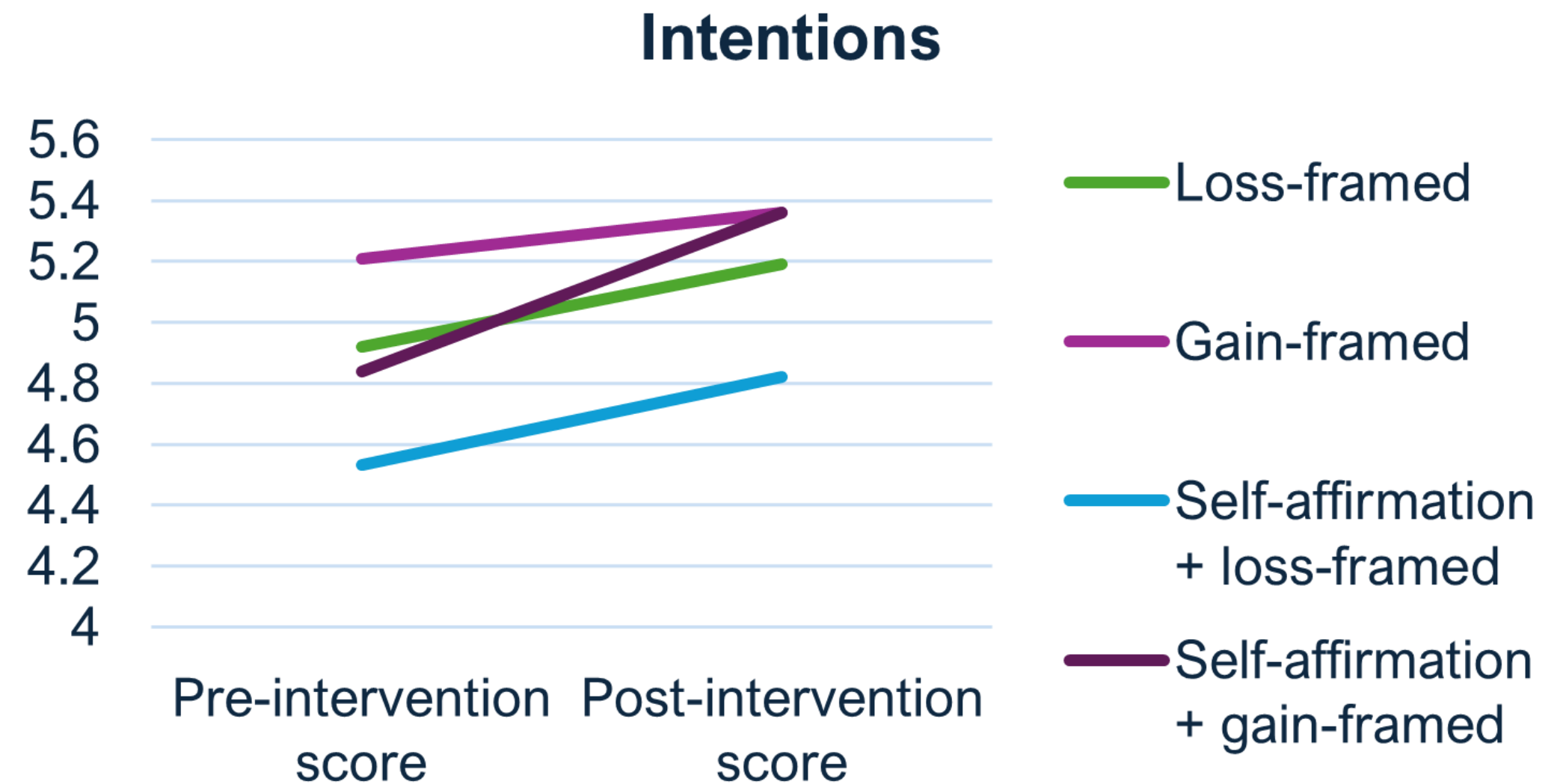


A considerable proportion of the sample perceived their risk of developing health problems as a result from their alcohol consumption compared to others their age to be neutral (30.2%) and a bit less at risk (27.5%).

Results - Key Finding #1

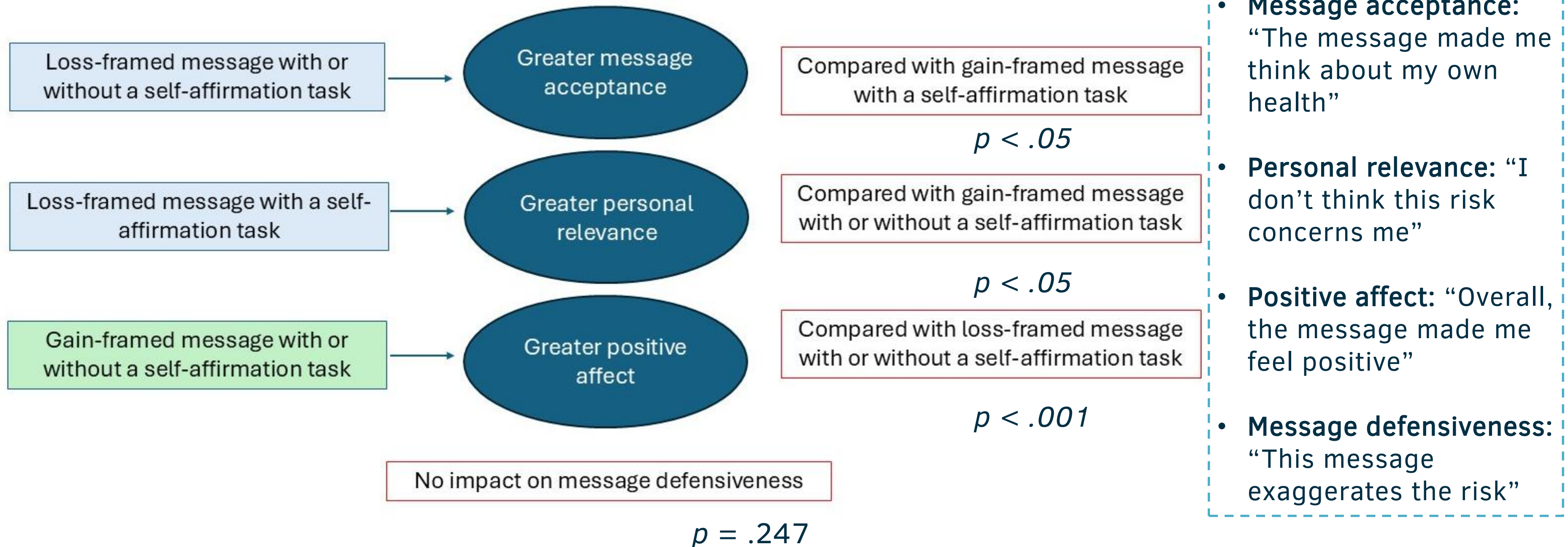
Intentions to drink within guidelines

- All intervention conditions showed higher intentions to drink within guidelines ($p < .001$), but there were **no differences between interventions** ($p = .168$).



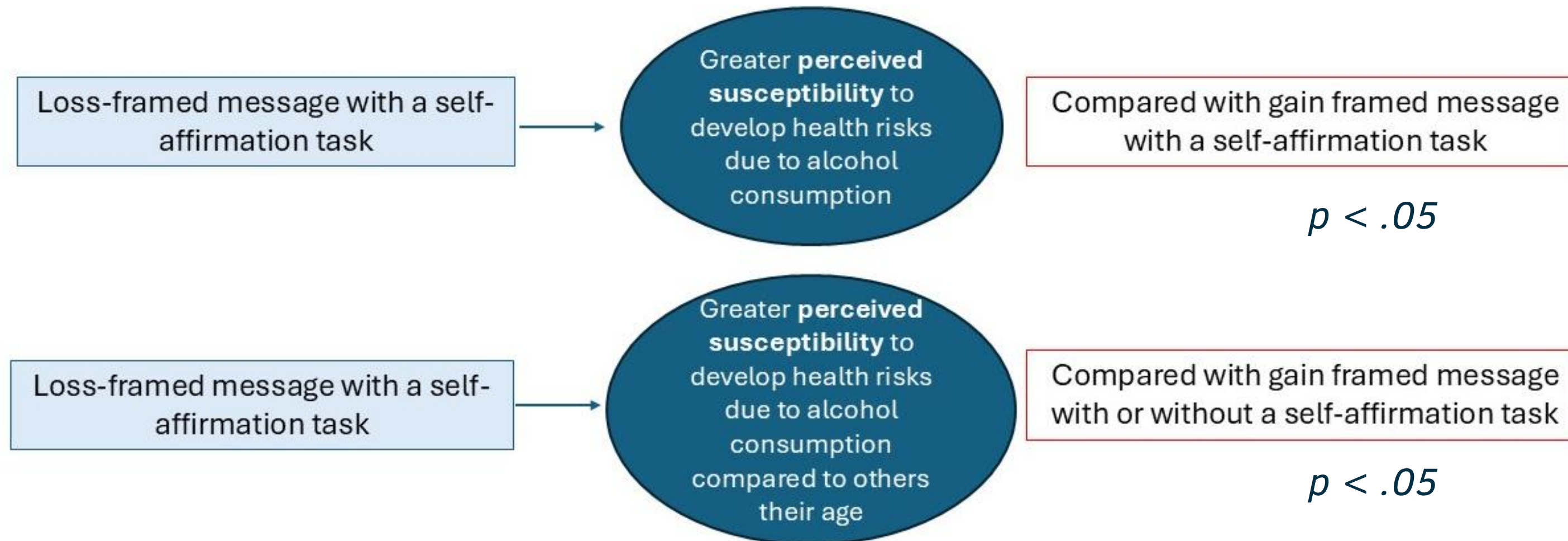
Results - Key Finding #2

Message-related outcomes



Results - Key Finding #3

Perceived susceptibility to risk



- **Perceived susceptibility:** "How likely do you think it is that you could develop health problems due to your alcohol consumption?"
- **Comparative susceptibility:** "Compared to others your age who drink alcohol, how at risk do you think you are to experience health problems related to drinking alcohol?"

Discussion

A brief low-cost intervention using **self-affirmation and loss-framed messages** about the harms of alcohol consumption can:

- Increase perceived personal relevance of health messages and encourage individuals to reflect on their own health risk.
- Strengthen awareness of personal susceptibility to alcohol-related harm and address unrealistic optimism.
- Help people more accurately compare their risk of harm to that of peers their own age.

Gain framed messages with or without self-affirmation are linked to positive affective responses, which could improve engagement.

Implications

- Brief-self-affirmation statements that asks participants to reflect on their core values or strengths could be included on standard alcohol risk messaging.
- Self-affirmation activities could be incorporated into supportive conversations delivered by trained alcohol-support professionals
 - However, self-affirmation cannot be used exclusively in this context.

Future research

- Measuring real behaviour change
- Goal-setting alongside self-affirmation
- Examining how different people may engage and respond to the intervention

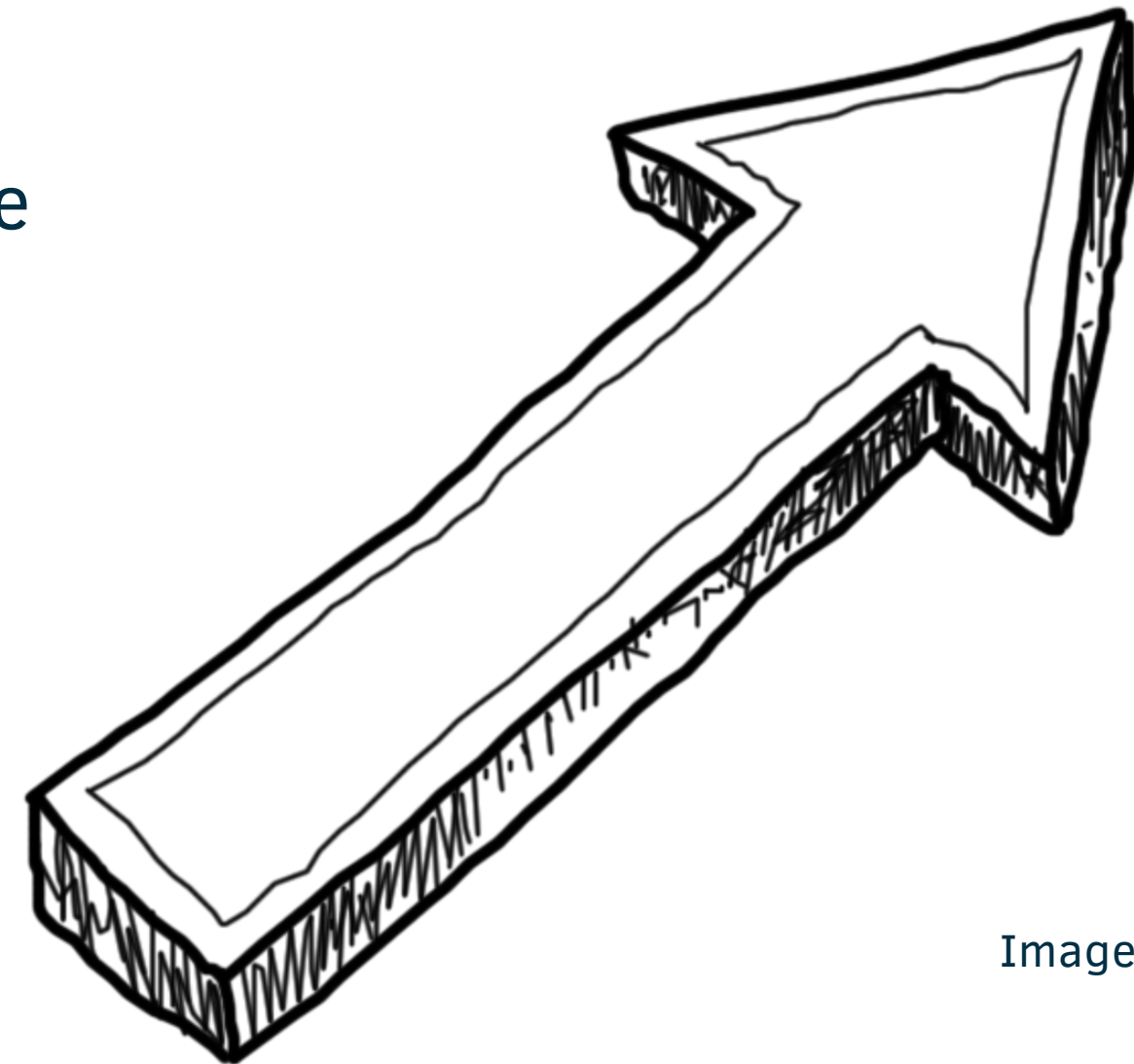


Image: Pixabay

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Thank you for listening

Any questions?

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