

A guide to reducing alcohol-related risks and harms

CONTENTS

Introduction	1
Alcohol and you	2
How much is too much?	
What is a drinking problem?	16
Do I need to change my drinking?	18
Preparing for change	24
Taking action	32
Staying on track	36
Tips for staying low risk	40
Information for your support person	42

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INTRODUCTION

Alcohol is one of the most commonly used drugs in Australia. There are many reasons why people choose to drink, such as to be sociable, to relax, celebrate and for enjoyment. Some people also drink when they feel sad, bored or to help them cope with problems in their lives.

Research shows that the more you drink, the greater the risk of harm to your health. Drinking too much, even on one-off occasions, can cause problems for you at home, at work, with your friends or with the law.

Regular alcohol use can result in dependence, but people don't have to be dependent on alcohol to experience problems.

This booklet aims to help you think about your alcohol use and the risks to your health, relationships or lifestyle. It provides information on:

- Low risk drinking
- Risk and harms from your current drinking pattern
- Ways to assist you to make changes and reduce your risks and harms

The information in this booklet is designed for you to use by yourself, or you can work through it with someone who might help you, such as a health professional.



As you work through this booklet, if you need assistance, ring the Alcohol and Drug Support Line, a state-wide, free, confidential counselling and information help-line on (08) 9442 5000 or toll-free 1800 198 024 for country callers. If you are calling from a mobile phone, they can call you back.

You can also chat to a counsellor online, go to https://www.mhc.wa.gov.au/about-us/our-services/alcohol-and-drug-support-service/live-chat-with-an-alcoholdrug-counsellor

ALCOHOL AND YOU

The effects of alcohol

Alcohol is a depressant drug that slows down the messages to and from the brain and body. Alcohol can affect your problem solving skills, judgement, concentration, reaction times and coordination.

How alcohol affects you is influenced by individual factors, such as your age or gender, your reason for drinking, how much you drink, and your physical and mental health. Medication and drug use can also impact on the effects of alcohol. When and where you drink and who you are with may also have an influence. For example, a young person celebrating with a group of friends may have a different experience to an older person who is feeling down and drinking alone.



What happens when you drink?

How alcohol affects you depends to a large extent on your blood alcohol level, in addition to individual factors such as age, weight and health. Your blood alcohol level is also affected by how much you drink, how quickly you drink and whether you have eaten.

When you drink alcohol, it is rapidly absorbed into the bloodstream through the stomach wall and small intestine. Once in the bloodstream, alcohol goes to all parts of the body including the brain.

If there is food in your stomach it can slow down the speed that alcohol gets into your blood.

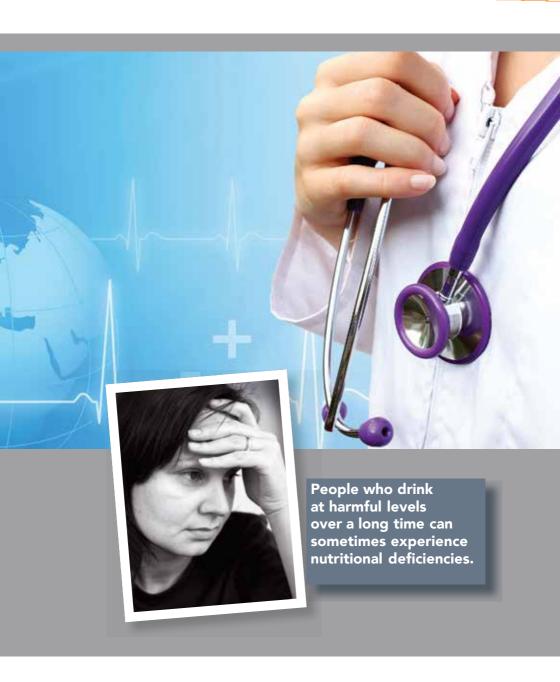
Short-term effects of alcohol

Depending on the individual, the following effects can be experienced after 1-2 drinks. The likelihood of these effects is influenced by how much you drink:

- Feeling relaxed
- Sense of well-being
- More confidence and less self-conscious
- More sociable
- Increase of existing mood: happy, sad, worried
- Reduced concentration
- Slurred speech
- Slowed reaction time and reduced coordination

Larger amounts of alcohol on a single occasion can lead to:

- Confusion
- Blurred vision
- Poor muscle control
- Feeling sick and vomiting
- Increased risk-taking behaviour
- Increased risk of injury, violence, falls and accidents
- Alcohol toxicity
- Unconsciousness
- Death



Long-term effects

Alcohol is a toxic substance. Over time, alcohol causes long-term damage to our body, affecting organs and tissues. This can result in a range of health problems, including:

- Stomach upsets, nausea and diarrhoea
- Stress
- Sleeplessness and tiredness
- Sexual problems
- Hangovers
- Blackouts
- Liver inflammation

You may also develop more severe problems like:

- Brain damage
- Heart disease
- Liver disease
- High blood pressure and increased risk of stroke
- Increased risk of many cancers including breast and bowel cancer
- Weight-gain and obesity
- Alcohol tolerance and dependence
- Mental health problems
- Type 2 diabetes

People who drink at high-risk levels over a long time can sometimes experience nutritional deficiencies. This might be because they spend less time ensuring they have a quality diet, but also because the alcohol contributes to poor absorption of some nutrients. For example: some of the most serious forms of alcohol-related brain damage arise from thiamine (vitamin B1) deficiency.

HOW MUCH IS

The Australian guidelines to reduce health risks from drinking alcohol (National Health and Medical Research Council, 2020) aim to help you make an informed choice about your alcohol use to reduce the risk of alcohol-related harm. The Guidelines are based on research from Australia and around the world on the effects of alcohol.

Guideline 1: Reducing the risk of alcohol-related harm for adults

To reduce the risk of harm from alcohol-related disease or injury, healthy adults should drink no more then 10 standard drinks a week and no more than 4 standard drinks on any one day. The lifetime risk of harm from drinking alcohol increases with the amount consumed.

Following this guideline lowers the risk of harm but does not remove all risk. Emerging research shows there is no safe level of alcohol use for overall health, and even small amounts of alcohol use increase the risk of negative health outcomes¹. Young adults (18-25 years), people aged over 60 years old, people with mental or physical health conditions, people with a family history of alcohol dependence, and people who use other drugs that interact with alcohol are at an increased risk of alcohol-related harm.



Healthy adults should drink no more than 10 standard drinks a week and no more than 4 standard drinks on any one day.

¹ Griswold, M. G., Fullman, N., Hawley, C., Arian, N., Zimsen, S. R., Tymeson, H. D., ... Gakidou, E. (2018). Alcohol use and burden for 195 countries and territories, 1990-2016: A systematic analysis for the Global Burden of Disease Study 2016. The Lancet, 392(10152), 1015-1035. https://doi.org/10.1016/S0140-6736(18)31310-2

Guideline 2: Children and people under 18 years of age

There is no safe level of alcohol use for children and people under 18 years of age. Under 18 years of age there is an increased risk of alcohol-related harms including injury and harm to brain development. Alcohol increases the risk of injury, including alcohol poisoning. It is the leading cause of premature death and disease amongst young people. Using alcohol from an early age increases the risk of developing longer-term alcohol-related harms such as alcohol use disorders, including alcohol dependence.

Guideline 3: Pregnancy and breastfeeding

To prevent harm from alcohol to their unborn child, pregnant people or those planning a pregnancy should not drink alcohol.

- If a person drinks during pregnancy, the alcohol passes from them into the foetus through the placenta
- The foetus' central nervous system is susceptible to harms related to alcohol as it starts developing very early in the pregnancy (approximately 3 weeks)
- The more alcohol is consumed (amount and frequency), the greater the risk of harm for the foetus
- For people who are breastfeeding, not drinking alcohol is safest for their baby. Alcohol consumed a breastfeeding person, enters the breastmilk. Development of the babies' brain continues after it is born and is extra sensitive to alcohol
- Alcohol consumption while breastfeeding can disrupt feeding behaviour and sleep
- The amount of alcohol in breastmilk will only reduce over time as the body metabolises the alcohol

(National Health and Medical Research Council. (2020). Australian Alcohol Guidelines to reduce health risks from drinking alcohol. Canberra, Commonwealth of Australia.)

Drinking is not recommended for people who:

- Are under the age of 18 (below the minimum legal age)
- Are pregnant or breastfeeding
- Have a condition made worse by drinking (for example: high blood pressure or liver disease)
- Are looking after or supervising children
- Are about to engage in activities requiring a degree of skill or risk (driving, flying, water sports, operating machinery)
- Are on any medication. It is recommended that people on medication speak with their doctor before drinking alcohol

Is the risk of disease and injury different for males and females?

Due to a difference in the way the female body metabolises alcohol, a generally smaller body size and a higher proportion of body fat, the same amount of alcohol, when consumed by a woman, will result in a higher blood alcohol concentration than when consumed by a man. Research suggests that over their lifetime females are more at risk from long-term physical harms from drinking than males. However, over a lifetime, males experience greater risk of injury from their alcohol use.

Are there any health benefits from drinking alcohol?

It is broadly accepted that frequent high levels of alcohol increases the risk of health problems². However, research into the effects of low to moderate consumption of alcohol and heart health indicates there may be a positive association³. It should be noted that this research is observational only, meaning no causal links can be made⁴.

Additionally, researchers have found that low-moderate drinking is not universally associated with a lower risk of all cardiovascular conditions⁵.

Drinking alcohol is not recommended to achieve a healthy heart, given the increased risk of some heart conditions along with numerous other non-communicable diseases and injury^{2,3,5}.

² National Health and Medical Research Council. (2020). Australian Alcohol Guidelines to reduce health risks from drinking alcohol. Canberra, Commonwealth of Australia. ³ Piano, M. R. (2017). Alcohol's effects on the cardiovascular system. Alcohol Research: Current Reviews, 38(2), 219-241. Retrieved from https://www.ncbi.nlm.nih.gov/p-mc/articles/PMC5513687/ ⁴ Leong, D.P. (2019). Are the cardiac effects of alcohol good, bad, or neither? European Heart Journal, 40(9), 712-714. https://doi.org/10.1093/eurheartj/ehz039 ⁵ Bell, S., Daskalopoulou, M., Rapsomaniki, E., George, J., Britton, A., Bobak, M., ... Hemingway, H. (2017). Association between clinically recorded alcohol consumption and initial presentation of 12 cardiovascular diseases: Population based cohort study using linked health records. BMJ. DOI: 10.1136/bmj.j909

For more information on the Australian Alcohol Guidelines go to the following website:

http://www.nhmrc.gov.au/about-us/publications/australian-guidelines-reducehealth-risks-drinking-alcohol

What is a standard drink?

Not all drinks contain the same amount of alcohol. The amount of alcohol can differ as drink sizes and strength varies. In Australia, a standard drink contains 10 grams of pure alcohol. Standard drinks are a way to measure how much alcohol you drink. Standard drink information is important to know, not only to avoid problems like drink driving, but also to help you look after your health and wellbeing. Because there are no common glass sizes used in Australia, many drinks contain more than one standard drink. To know how many standard drinks you are drinking, you need to know how much alcohol is in each serving.

For example: people drinking a glass of wine may think they are only having one drink, but wine glasses often contain 1.5 to 2 standard drinks. The label on an alcoholic drink container will tell you the number of standard drinks in the container. This will help you count your drinks and keep your drinking at a low risk level. You can also access a standard drinks calculator on the Alcohol. Think Again website https://alcoholthinkagain.com.au/. The following is a guide to help you keep track of your standard drinks.



Graphics reproduced with permission from the National Health and Medical Research Council.

How does the body get rid of alcohol?

Most alcohol (approximately 90%) is broken down in the liver and leaves the body as water, carbon dioxide and other substances in our breath, urine and sweat.

It generally takes about an hour for the body to clear one standard drink. This also depends on the person's metabolism (how fast the body processes what we put into it) including liver size (and enzyme levels), body size and composition. After a heavy drinking session, it takes many hours for the blood alcohol concentration (BAC) to return to zero.

There is **NO** fast way to sober up! Activities such as drinking water or coffee, having a cold shower, exercise, vomiting and other home remedies will **NOT** affect the speed at which the liver breaks down the alcohol. In fact, drinking coffee or other caffeine-based products as an antidote to alcohol might carry some risk. You may feel more alert, but in fact you are still intoxicated. There is some evidence that drinking coffee gives people a false sense of confidence which may result in poor judgement about their ability to drive.

Sex and gender differences and alcohol

The research about alcohol and its impact is currently limited to biological factors of males and females or factors related to the socialisation of men and women. However, it is recognised that gender is much broader than men and women.

Research shows that alcohol generally affects females differently to males. This is because females usually have on average a smaller body size, different body type and absorb and metabolise alcohol at a different rate. This means females can be affected more quickly by alcohol and are more likely to experience harm if they drink the same amounts of alcohol as males. There is strong evidence that alcohol can cause breast cancer in females. The risk of this increases with the increased alcohol use. Females are at higher risk of developing liver disease, heart disease and brain damage from drinking alcohol excessively.

For men, drinking excessive amounts of alcohol either in a single occasion (e.g. binge drinking) or over the lifetime is associated with an increased risk of injury, violence and diseases. Men aged 18 years and over are over 2.5 times more likely than women to experience alcohol-related harm over a lifetime. Men are also more likely to experience alcohol-related harm from a single occasion.

Cancers of the throat, mouth, liver and colon are increased by alcohol use, all of which are more common amongst males. Prostate cancer risk also increases with alcohol use. Additionally, excessive alcohol use has been shown to interfere with the male reproductive system, specifically testicular function and erectile dysfunction and infertility.



Research shows that alcohol generally affects females differently to males.

Pregnancy and breastfeeding

Not drinking alcohol during pregnancy or while breastfeeding is the safest option. There is no known safe amount of alcohol to drink during pregnancy. There is no period during pregnancy that is safe to use alcohol, as alcohol can affect the developing foetus throughout the entire pregnancy. See page 8 for further information regarding alcohol use during pregnancy and while breastfeeding.



Research suggests alcohol use, even at low levels, can impact the development of a foetus, resulting in lifelong consequences. The risk of harm to the foetus increases when greater amounts of alcohol are consumed more frequently during pregnancy. This is because alcohol is a teratogen, which means it is a chemical that can interrupt the normal development of a foetus and may cause birth defects.

As the brain grows and develops throughout the duration of a pregnancy, drinking alcohol at any time can interfere with the chemicals necessary for normal brain development. The developing brain of a foetus is more vulnerable to damage than the mature brain of an adult.

Alcohol use when pregnant can cause a range of lifelong physical, mental and behavioural disabilities, known as Fetal Alcohol Spectrum Disorders (FASD). Alcohol exposure can also cause miscarriage, stillbirth, premature birth, and low birth weight.

Drinking alcohol before finding out about a pregnancy does not automatically mean the foetus will be harmed. It's important to know it's never too late to stop drinking – every effort made to stop drinking alcohol, or reduce the amount of alcohol consumed, lowers the risk of harm to the foetus and is also beneficial to the pregnant persons' health⁶.

6 Alcohol. Think Again. (2021). Alcohol during pregnancy. Retrieved from https://alcoholthinkagain.com.au/alcoholyour-health/alcohol-during-pregnancy/

How much is too much for driving?

Even small amounts of alcohol can affect your ability to drive. Because drinking affects your concentration and coordination, there is an increased chance of being involved in a crash.

In Western Australia it is an offence to drive a vehicle with a Blood Alcohol Concentration (BAC) at 0.05% or above. For Learner and P-plate drivers the BAC limit is 0%.

BAC refers to the amount of alcohol in your bloodstream. Your BAC depends on a number of things like how much you drink over a specific period of time, your sex and body size and composition.

The safest way to ensure that you stay below the limit is to **NOT** drink at all if you are planning to drive.









0%

Mixing alcohol and other drugs

Alcohol may interact with prescribed and over the counter medication, increasing the risk of negative effects or reducing the effectiveness of the medication.

Sleeping tablets, sedatives, pain killers, anti-anxiety medications, antidepressants and antihistamines may have a sedative (sleepy/depressant) effect which can be harmful if mixed with alcohol. If you are taking **ANY** medication, you should check with your doctor or pharmacist to see if there are harmful interactions between the medication and alcohol. It is safest to avoid alcohol.

Mixing alcohol with illegal drugs like heroin, cannabis, ecstasy, amphetamine or taking non-prescribed medications can be dangerous and have unpredictable effects, such as overdose. For example, taking opioids such as codeine and alcohol together can cause a fatal overdose.

Consuming energy drinks (beverages that are high in caffeine and other legal stimulants) with alcohol can be risky. The stimulant effect of energy drinks can give people the impression that they are less intoxicated than they actually are.

Is my drinking putting me at risk?

The following questions are called the AUDIT $C^{7,8}$ and are an effective and reliable screening tool for detecting risky and harmful drinking patterns.

Step 1: Complete the questions by circling the answer most correct for you. Please try and be as accurate as possible.

A drink means a standard drink (see page 9 for more on standard drink amounts).

Questions	0	1	2	3	4	Score
How often do you have a drink containing alcohol?	Never	Monthly or less	2-4 times a month	2-3 times a week	4 or more times a week	
How many drinks containing alcohol do you have on a typical day when you are drinking?	1 or 2	3 or 4	5 or 6	7 to 9	10 or more	
How often do you have six or more standard drinks on one occasion?	Never	Less than monthly	Monthly	Weekly	Daily or almost daily	
					TOTAL	

Step 2: Score the questions. Put your score in the total box above.

How to score the questions

- 1. Answers to questions 1 3 are scored as 0, 1, 2, 3 or 4. The score is in bold at the top of the table.
- 2. Write your score for each question at the end of row: For example: If you answer "2-3 times a week" for Question 1, this has a score of 3.
- 3. Repeat for all questions 1-3.
- 4. Add all of your scores together to calculate your total AUDIT score.

⁷ Bush, K., Kivlahan, D. R., McDonell, M. B., Fihn, S. D., & Bradley, K. A. (1998). The AUDIT alcohol consumption questions (AUDIT-C): An effective brief screening test for problem drinking. Archives of International Medicine, 158(16), 1789-95.

⁸ Bradley, K. A., Bush, K. R., Epler, A. J., Dobie, D. J., Davis, T. M., Sporleder, J. L., ... Kivlahan, D. R. (2003). Two brief alcohol-screening tests from the Alcohol Use Disorders Test (AUDIT): Validation in a female Veterans Affairs patient population. Archives of International Medicine, 163(3), 821-829.

Step 3: What does your score mean?

If your score is 0-3, it means your drinking is low-risk. This booklet has lots of tips to help you continue drink in a low-risk way.

If your score is 4 or more, your drinking may be causing you problems and may lead to harms in the future.

- It is recommended you continue to work through this booklet to help you decide what you want to do about your drinking
- The booklet has lots of tips to help you reduce your risks and harms and to help you work towards drinking in a low-risk way
- You can also talk to your doctor or call the Alcohol and Drug Support Line.

If your score is 8 or more, this means your drinking is very likely to cause you risks, harms and problems.

- While cutting down is good, it is important you **DO NOT completely** stop drinking alcohol straight away
- See **your doctor** or see a specialist service soon for further assessment and support
- It is recommended you also continue to work through this booklet to help you decide what you want to do about your drinking
- The booklet has lots of tips to help you reduce your risks of harm and help you work towards drinking in a low-risk way.

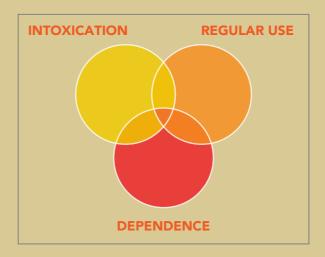
The Alcohol and Drug Support Line is a free, confidential state-wide telephone counselling and information service, telephone (08) 9442 5000 or 1800 198 024 toll-free for country callers. If you are calling from a mobile phone, they can call you back.

The Line is also available via Live Chat, visit the website here https://www.mhc.wa.gov.au/about-us/our-services/alcohol-and-drug-support-service/live-chat-with-an-alcoholdrug-counsellor/

ALCOHOL -RELATED PROBLEMS

Some people believe that only those who drink 'heavily' or are alcohol dependent can have alcohol-related problems. This is not true. People can also experience problems from a single drinking session or from regular use over time.

The following diagram shows problems with alcohol that may result from three different patterns, or ways of drinking. People can experience harms from one or more of these patterns of alcohol use.



Problems of intoxication

Problems of intoxication or getting drunk can occur from a single episode of high-risk alcohol use.

Problems from intoxication can include:

- Legal problems: drink-driving or other offences
- Other high-risk behaviours: unsafe sex, risk-taking (e.g. running in front of car)
- Accidents or injuries to self or others
- Family and social problems: arguments, aggressive or violent behaviour, family violence
- Alcohol poisoning

Problems due to regular use

These problems come from continued use of higher amounts of alcohol (e.g. over the limit recommended by the Guidelines) over a longer period and can include:

- Financial problems: spending too much on alcohol
- Health problems: liver damage, heart conditions, cancer, sleep disorders, memory or concentration issues, tolerance, weight gain etc.
- Family and relationships problems: stress within the family because of a person's behaviour when they are drinking
- Employment and education problems: poor performance due to the effects of alcohol (e.g. hangovers, absenteeism)
- Legal problems: drink driving offences, other offences

Problems of dependence

Problems of dependence may happen when a person begins to devote more and more time to drinking and they feel uncomfortable if they don't have a drink. They may feel alcohol is beginning to take over their lives and cutting down becomes increasingly difficult. Dependence can cause people to feel anxious, depressed and in physical discomfort (i.e. withdrawal) if they don't drink alcohol.

Drinking patterns and problems vary, so one person may have problems with intoxication, another with intoxication and regular use, and someone else with intoxication and dependence, or a combination of all three. The larger the amount and the more often you drink the more likely you are to experience problems.

CHANGE MY DRINKING?

This section will help you to look at the things you like and the things you don't like about your drinking.

Weighing things up:

1. Think of all the things you LIKE about your drinking

Write them down in the table below. For example: helps me feel relaxed or be more social, makes me more confident etc.

The things I LINE about my drinking

2. Think of all the things you DON'T LIKE about your drinking

For example: feeling down after a binge, spending too much money, worried about how it affects my relationship etc.

The things I DON'T LIKE about my drinking

Compare the things you like about your drinking to the things you don't like about your drinking. If you feel like the things that you don't like about your drinking bother you more than the things that you like, this may be a good time to think about reducing your drinking.

Even if you are not considering reducing your drinking, the following may help you think more about how your drinking is affecting your life.

Thinking ahead:

Imagine what your life will be like in 6-12 months if you continue to drink in the same way?

Write down your thoughts below:			
In 6 months:			
In 12 months:			

Any decision you make about your drinking will be influenced by how IMPORTANT you think it is to make the change and how CONFIDENT you feel about changing.

If you are not sure what to do, continue to read on as this booklet may help to address your concerns and look at some strategies to help increase your confidence.

What are the benefits of cutting down?

For most people, drinking less alcohol can be a positive step towards improved overall health and well-being. Remember, in the end the *choice is yours*.

Some of the benefits of cutting down are:

Improvements in:

- Relationships and family
- Work performance
- Sleep and energy levels
- Concentration
- Financial situation
- Fitness and health
- More time and energy for activities other than drinking

Reduces risk of:

- Injury to self and others
- Motor vehicle crashes
- Work accidents
- Legal problems
- Hangovers
- Health problems such as heart or brain damage, some cancers and high blood pressure
- Memory and concentration difficulties

Making a decision

You have looked at the things you like and don't like about your drinking and have thought about the impact it may have on your future. Consider the following options when thinking about making changes to your drinking.

You could:

- 1. Continue as is.
- 2. Reduce your drinking.
- 3. Stop drinking altogether.

To help you make your decision, think about the GOOD and the NOT SO GOOD things by filling out the table below. Once you have done this, compare the GOOD and the NOT SO GOOD things.

Stop drinking	Not so good	
Ste	PooD	
drinking	Not so good	
Reduce my drinking	Good	
si s	Not so good	
Continue as is	Good	

REMEMBER

If your AUDIT C score was 8 or more, and you want to stop drinking, you may need medical help with withdrawal. Before you stop drinking completely, see a doctor or phone the Alcohol and Drug Support Line for advice.

If you have decided you **DO NOT** want to make any changes to your drinking or you are **UNSURE**, you might like to read the rest of the booklet anyway.

You can also look at the information on pages 40-41 for tips on how to achieve low-risk drinking.

If you have decided you would like to change your drinking continue to the next section titled, "Preparing for change".



PREPARING FOR CHANGE

Now that you have decided to make changes to your drinking, what is the outcome you're hoping for? Write your overall goals for changing your drinking below.

Му	goal is:
	Change my pattern of drinking. For example: "drink only on weekends
	Drink a set amount. For example: "limit to one bottle of wine per week
	Reduce my drinking from to
	Stop drinking altogether
	Other: please list.

Remember, if you scored more than 8 in the AUDIT C alcohol screen (on page 14), you should NOT stop drinking until you have discussed this with your doctor or called the Alcohol and Drug Support Line.

Developing strategies for change

Now that you have set your overall goal for changing your drinking, there are a range of strategies that will help you with achieving your goal. Planning strategies to change your drinking and deciding how you will cope with high-risk situations are important steps.

This section of the booklet looks at developing and starting your action plan. Some of the ideas presented here have been found to be useful to people who have decided to make changes to their drinking and have succeeded in improving their health and well-being.

Steps include:

- Understand when and why you drink
- Set a date to start
- Set short-term goals
- Get support for yourself
- Plan ways to cope
- Identify challenges

Understand when and why you drink

To support you with your **goal**, it is important to know what, when, where, how much you drink and your thoughts and feelings before and after drinking.

You will find a diary in the back pocket of this book called *My Diary*.

This pocket-sized diary comes with instructions on how to fill out the diary as a record of your drinking.

Keep a diary of your drinking for a week. While it might seem like an effort, it will give you an accurate starting point. The diary will help you to be aware of the times and situations when you drink



more or less. As you start to put your changes into action, the diary can also be helpful to plan which situations or times might be more difficult than others to keep to your goals.

Setting a date

Choose a date to start putting your drinking changes into action. It is best to pick a date when you feel ready and can put all your energy into your goals. Try to pick a day that will be low stress to increase your ability to keep to your goals. For example: a friend's wedding or another celebration may NOT be an ideal time to start.

Mι	start date is:	

Setting short-term goals

Changing any aspect of your behaviour can be difficult. Research shows that people who are more successful in changing their behaviour use short-term goals to help them plan ahead and be prepared. To help you achieve your overall goal, break it down into small manageable short-term goals.

Your short-term goal(s) need to be **SMART** – this means they need to be:

S = specific

M = measurable

A = achievable

R = realistic

T = timely

For example: or example: Joe's overall goal is to drink less. He has decided to do this by drinking 2 to 3 (full strength) beers on a day that he drinks, instead of 6. He thinks this is a really clear (specific and measurable) goal that he will be able to achieve (achievable and realistic) over the next 4 weeks (timely).

Here are some more examples of SMART goals:

- $m \prime$ To drink low alcohol beer at the pub on Friday
- ✓ To drink no more than 2 standard drinks on any day
- ✓ To go to the movies instead of the pub on Friday for one week
- ✓ Delay drinking (30-60 minutes) when first getting home in the evening

My overall goal is
To help plan your SMART goal , work through the following:
My target (specific) is:
I will be able to keep track of this (measurable) by:
I will know this is working for me (achievable and realistic) because:
I will be doing this for at least (timely):
If you have difficulty achieving your goals, you may need to review them to ensure that they are specific, measurable, achievable, realistic and timely.
Remember to continue to use short-term goals until your drinking is at a level with which you are happy.



Your support person needs to be someone you trust and feel comfortable with, who won't judge you and who will encourage you to make changes.

Getting support for yourself

Having people available to you that can help and support you with the changes you are planning to make is important. Research shows that people who successfully change their drinking found support from family or close friends invaluable. Your support person needs to be someone you trust and feel comfortable with, who won't judge you and who will encourage you to make changes.

There is a section at the back of this book for your support person. Ask them to read it as it will give them ideas on how they can help you.

If you don't have a person that can support you, you can still achieve your goals.

Identifying high-risk situations

It is important to look at situations that can challenge you and get in the way of achieving your goal. There are many things that can act as triggers which cause urges and cravings for you to drink or not be able to keep to your goals.

These are called **high-risk situations**. These may be **internal** (your mood, thoughts and feelings) or **external** (your surroundings, where you are, who you are with, activities, social settings etc). Some examples are:

- When you feel stressed, frustrated or bored:
 - After a difficult day at work
 - After an argument with a partner, child, friend, boss etc.

Think of some high-risk situations that will challenge you and your

- I've done so well this week. I want to celebrate
- Nothing to do on a Friday night
- When at a party or social event with friends
- When friends visit

rinking goals.
ly internal high-risk feelings or thoughts are:
Ny external high-risk situations are:

Many **high-risk situations** can be associated with previous drinking behaviour. By thinking ahead and being prepared you will have a better chance of resisting urges and cravings.

Managing high-risk situations

There may be times when it is hard to stick to your goal. This section will help you to prepare for high-risk situations and the feelings they can cause. The aim here is to help you overcome the high-risk situations and keep you on track with your goal.

For example: Internal high-risk situation – feeling bored on the weekend.

Strategy = make a conscious effort to distract yourself from drinking

- Go for a walk with your dog or do some other physical activity
- Go to a favourite non-drinking place. For example: beach, shops, gym
- Read a book and have a coffee
- Do the housework, gardening or something else to distract yourself

It is important to plan activities that do not involve drinking, but also to pay attention to how your thoughts affect your feelings and behaviour. For example: If I'm not drinking, then I'll be really bored on the weekend.



How will I deal with high-risk situations?

- 1. List situations that will be high-risk for you in the box below.
- 2. Think of as many strategies (things you can do) as possible to help you cope.

High-Risk Situations	Strategy

It is important when trying to keep to your goal, that you are aware of your **high-risk situations** and the decisions you make when urges and cravings arise. Trying to keep triggers and temptations (urges and cravings) as low as possible to manage them before they become a problem, is crucial. This will help you to keep on track with your drinking goals and increase your confidence.

TAKING ACTION

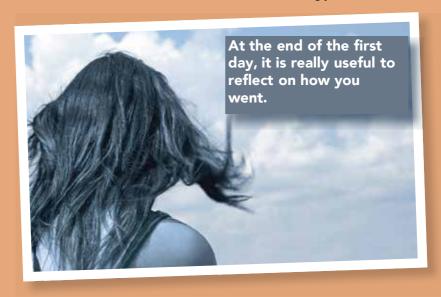
It is important to put all your planning and preparation into ACTION. The following may be helpful to you.

Keep using your drink diary

Your drink diary will help you to see the progress you are making and will remind you of high-risk situations, as you ACTION your goal. You can change or make new plans for dealing with these situations. Keep your diary in a handy place so you can continue to fill it in every day and include your thoughts and feelings about how you are going.

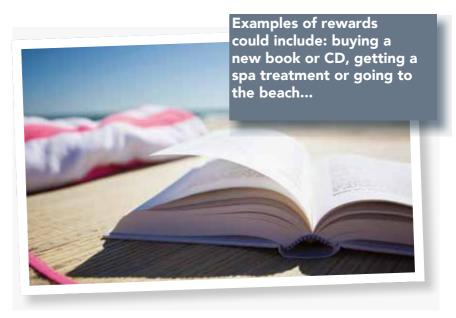
Review how you went

At the end of the first day, it is really useful to reflect on how you went. What happened? What worked and what didn't work, or worked only partly? Review carefully what went wrong and how you got yourself back on track with your goal. Remember to reward yourself with each success you have (see page 34 for further information on rewarding yourself).



and complete the following.
Think about a situation that you managed well. Write down what you did well.
Overall, I did this really well because:
Think about a situation that you found challenging. Write down why you found it challenging.
I found this situation a real challenge because:
Write down how you managed the challenge.
I managed this challenge by:
My thoughts and feelings about how I went are:
It is useful to regularly review your drink diary in this way. You may also like to review your drink diary with your support person.

If you need any help with this, please call the Alcohol and Drug Support Line, the confidential counselling and information service on (08) 9442 5000 or toll-free 1800 198 024. The Line can also be accessed via Live Chat, see their website here for further information www.mhc.wa.gov.au/about-us/our-services/alcohol-and-drug-support-service/live-chat-with-an-alcohol drug-counsellor/.



Reward yourself

Making changes to your drinking such as cutting down requires motivation and persistence. Many people feel that they deserve a reward for all their hard work. Try talking to yourself in an encouraging and positive way (positive self-talk) every time you:

- Get through the day
- Cope with a high-risk situation
- Succeed in maintaining your drinking goals each week

Chart your progress and reward yourself. The challenge can be to avoid rewards linked to drinking or putting yourself into high-risk situations.

Examples of rewards could include: buying a new book or CD, getting a spa treatment, going to the beach, going for a coffee and reading a book.

My rewards for making changes to my drinking are:

Saving money

Reducing your drinking will save you money. It is amazing what you can do with the money you would normally spend on alcohol.

For example, Barry drinks a six-pack of beer each night which costs* \$22.30. In one week, 42 cans costs him \$156. By reducing the number of cans he drinks each week Barry could save the following amount of money:

Number of cans cut down each week	*Total savings over 12 months	
2	\$386.88	
4	\$773.76	
6	\$1,160.64	
10	\$1,934.40	
14	\$2,708.16	

^{**}Based on a six pack of (375 ml) of full-strength beer (Perth liquor stores: July 2021).

Calculate how much you would save if you reached your goals.

The money I am saving:

Daily
Weekly
Monthly
After 6 months
After 12 months



STAYING ON TRACK

Some people find they need to regularly remind themselves about keeping on track to help them get through challenges as the days, weeks and months progress.

The following may help:

Think positively

Think of the benefits for your health because your drinking is low-risk. Keep reminding yourself why you cut down in the first place. Each day affirm your determination. For example, "I am reaching my goals"; "My drinking is low-risk"; "I am doing really well with making changes".

Challenge unhelpful thoughts

Experiencing unhelpful thoughts is common. Acknowledge that making changes is hard work and you are making excellent progress. It is important to distract yourself if you feel unhelpful thoughts are starting to creep into your thinking. Use positive self-talk and encouragement for all the effort you are making to maintain your new drinking goals. If your unhelpful thoughts are hard to shift, you might want to talk to an alcohol and other drug counsellor. The Alcohol and Drug Support Line can help you to find a counsellor who will work with you to challenge these thoughts.

Be prepared for 'slip-ups'

In an ideal world change happens easily. However, in reality, change can be really hard. Even with your best intentions, thoughts, feelings or situations can get in the way of keeping to your goal. If you think ahead and have a plan for dealing with high-risk situations it is more likely that you will be able to manage them.



Talking to your support person, if you have one, is also encouraged.

A slip-up or lapse can happen when you drink more than you had planned. It is important to try and get back on track as soon as possible to help prevent further slips.

It is also important to be kind to yourself if you do have a slip-up as this will help you get back on track quicker. Remember, you are taking small but significant steps in the direction of your goal.

You might find it useful to go back to the section: 'Preparing for Change' (from page 24) and review how you are going with supporting yourself. Talking to your support person, if you have one, is also encouraged.

A relapse is a normal part of the change process. It is when someone returns to old patterns of excessive drinking for a longer period. This does not mean they will continue this drinking pattern.

Managing setbacks

It is helpful to have an emergency plan prepared in case of a slip-up.

For example: Joe's goal is to drink in a less harmful way by having 2-3 (full strength) beers on a drinking day instead of his usual 6. He has put this plan into action over the last two weeks and so far, is doing really well. Today is Friday and he is out with his work mates. Halfway through the night he realises that he has had 5 drinks. Joe's mate offers him another drink

Instead of giving himself a hard time, Joe knows it is important to get back on track as soon as possible. Joe thinks about some strategies he has identified to plan for a slip-up:

- ✓ Buy a non-alcoholic spacer drink and get his thoughts into place about his drinking goals
- ✓ Talk encouragingly to himself: "I will get through this"; "It's really important to keep on track here"
- ✓ Call his support person or ADSL for advice
- ✔ Rehearse what to say to refuse a drink or round
- ✓ Leave and go for a walk to clear his head
- ✓ Leave and meet up with support person or other non-drinking friends
- ✓ Identify thoughts and feelings on how he went with his plan

Using the list of high-risk situations you identified previously, decide on your **plan** in the event of a slip-up.

Remember, your plan needs to be realistic and workable for you. It may help to think through or practice putting your plan into action beforehand. Your support person could help you with this.

My plan in the event of a slip-up is:

l	 	 	
2.			
3.			
1			

Afterwards, it is useful to reflect on what happened and how you went. Did your strategy work or not? If it didn't work, or only worked a bit, carefully review what went wrong and how you got yourself back on track with your drinking goal.

It may be useful to think about what caused you to slip-up and find ways of dealing with such triggers in the future.

Look at the drinking tips and remind yourself of your reasons for cutting down and renew your determination to succeed.

You may also like to review your drink diary with your support person.

What if I go back to my old drinking pattern?

Do not give up on your intention to make changes to your drinking. Most people who want to change will make several serious attempts before they reach their goals. Think about what you learned, share your thoughts, feelings and challenges with your support person and plan to try again. Tell yourself that change doesn't happen overnight and try and be patient. Remember, you are taking small but significant steps in the right direction towards your goal.

Summary

Making changes to your drinking may not be an easy task. However, many people say it is easier than they thought it would be.

Remember, you are making important changes to reduce your risk of alcohol-related harm to improve your overall health and well-being. You may also notice benefits in other parts of your life such as improved relationships with family, friends and colleagues and more time to enjoy other activities.

If you have any challenges with any aspect of your drinking in the future, you can always review this booklet, talk to your doctor or ring the Alcohol and Drug Support Line, a free confidential counselling and information help-line on (08) 9442 5000 or toll-free for country callers 1800 198 024.

TIPS FOR STAYING LOW-RISK

The following tips can help keep your drinking low-risk and manage high-risk situations.

Avoid drinking situations

Go to places where they don't serve alcohol, like the park or the beach. If you drink because you are bored or stressed, a walk or playing a sport that you enjoy may help.

Count your drinks

Remember to keep your drink diary to help with this. Check the label on the bottle or can of alcohol as it will tell you how many standard drinks it contains.

Slow down your drinking

You can enjoy alcohol just as much, if not more, if you drink slowly. Try and remind yourself to sip, not gulp as this will help you to control your rate of drinking. Concentrate on drinking every drink slowly.

Take less alcohol with you

When you go out take less alcohol with you and take some non-alcoholic drinks.

Make every second drink a non-alcoholic drink

Drink non-alcoholic drinks as 'spacers' such as a glass of water, soft drink, soda water or juice.

Eat before or while you are drinking.

With food in your stomach you are more likely to drink at a slower pace and the alcohol is absorbed into your bloodstream at a slower rate.

Drink water with a meal

Have water available on the table while you are having a meal.

Avoid top-ups

Top-ups mean you can't be sure how much you are drinking.a

Practice saying 'no'

It may be difficult at first, but you'll be surprised how quickly it can become comfortable to say 'no' and others will get used to it.

Try low-alcohol alternatives

There are a range of low and medium-strength beers, and even alcohol-free options available. You can dilute your wine and/or spirits to make your drink last longer.

When you are thirsty, have water or a non-alcoholic drink first

This helps quench your thirst so you will be able to drink your alcohol more slowly.

Stop drinking when you reach your limit

Start having water, soft drinks, fruit juice, etc. You'll find that you can do without that extra drink after all.

Avoid drinking in rounds

Set your own drinking pace. The following strategies can help you avoid drinking in a 'round':

- Simply opt out. Say you just don't want to join the round
- Join the round but occasionally order a non-alcoholic drink for yourself as a spacer
- Buy a round (to show your generosity) but then opt out and buy your own. You may pay a bit more, but will limit the potential harm to your health
- Pass up a drink during the round, your friends won't mind you're saving them money

If these suggestions for managing drinking in rounds are too difficult, you may consider avoiding situations where the pressure is on you to drink in groups.

INFORMATION FOR YOUR SUPPORT PERSON

For many people, drinking is part of everyday life. Our drinking can be influenced by family, friends and advertising, among other things.

> People have all sorts of reasons for wanting to cut down. They may be trying to save money, get fit, change their lifestyle, or their doctor may have advised them to do so. However, changing behaviour can be difficult

Research has shown that support helps a person to cope with stressful or difficult times. When a person is trying to change their drinking pattern, they need someone non-judgemental, who they can trust, feel comfortable with and who will support them.

You have been asked to be someone's support person and may not be sure what you can do to help. The following suggestions may help you.



Guidelines for support person

The most important thing you can do is listen carefully. Ask the person you're supporting how you can help them achieve their goals.

The person who has asked for your support may want you to:

- Look through this booklet, perhaps try the exercises together
- Be in contact regularly to discuss their progress. Let them know when and where they can talk to you
- Talk over ways of handling challenges
- Listen without judgement
- Help them to work out rewards for achieving their goals
- Practise different situations. For example: saying NO. You could play the part of someone who is trying to persuade them to have one more drink
- Plan what to do in the event of a slip-up

It is important to remember you can't make the person you are helping do anything. They must take responsibility for making their changes.

When a person changes their drinking pattern you may notice other changes, including:

- They may prefer to go to a cafe instead of the pub
- They may move away from friends who drink heavily
- They may seem tense or irritable when they first start to cut down

If you can acknowledge these kinds of changes as normal and positive, the person will feel supported and encouraged.

Doing well is often taken for granted. When the person is achieving their goals, it is important to offer a few words of encouragement. In this booklet the person changing their behaviour is encouraged to give themselves a reward for both small and large successes. They may like to discuss their rewards. You might be included in some of them, like going out for a meal or spending some time relaxing together.

It is helpful to remember that changing behaviour is not always easy. If a person slips-up, support and encouragement from you to help them get back on track is very important. They will probably not be able to tolerate criticisms or judgments as a slip-up may make the person feel like a failure. One way you can help is to suggest they plan what they could do in the event of a slip-up. With a plan of action, they may be more likely to get back on track more quickly.

Helping someone can be challenging sometimes and there may be times when you feel in need of support. You may need someone to confide in, or with whom you can discuss your concerns about the person you are helping.

You may find it helpful to contact the **Alcohol and Drug Support Line**, a free, confidential counselling and information line on **(08) 9442 5000** or toll-free for country callers on **1800 198 024**.

You can also contact the **Parent and Family Drug Support Line**, a free and confidential service available for anyone concerned about a loved one's AOD use on **(08) 9442 5050** or toll-free **1800 653 203**. The Line provides access to a professional counsellor and a trained parent volunteer who has firsthand experience of alcohol and other drug use within their family.

Remember, only the individual can change their own behaviour. If they decide to return to their previous pattern of drinking, that is their decision.





