

How young adults perceive the risk of a single drink versus risk in binge drinking

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When drinking choices are perceived as "just one drink," with each single drink representing relatively slight risk, it may ironically lead to heavier drinking and alcohol-related harms. That's the finding of a novel



study exploring the decision-making process around binge drinking.

A better understanding of how people think about heavy episodic drinking could inform prevention and intervention approaches and help reduce the serious negative consequences of alcohol use. Young adults are especially vulnerable to high-risk drinking and its consequences; 29% are recent binge drinkers, and 15% meet the criteria for alcohol use disorder (AUD).

Research and prevention efforts commonly assume that binge drinking reflects a lack of knowledge about its harmful effects. This implies that people consciously decide to consume large amounts. Another possibility is that each drink presents its own low-stakes decision: whether to have one (or one more) drink.

For the <u>study</u> published in *Alcohol: Clinical & Experimental Research*, investigators at Cornell University examined drinking decisions through the lens of "fuzzy-trace theory," which involves varying framings of choices that involve risk. Fuzzy processing may shape decisions about alcohol use as a series of drink-by-drink choices rather than a decision to consume, say, 5 drinks in a night.

The researchers worked with 351 college students aged 18–31; 3 in 4 were women. The participants took surveys assessing their perceived risk of one drink, of heavy drinking, and of drinking consequences, and their overall sensitivity to risk. They also provided information on their recent drinking and experiences of negative consequences (such as risky driving or embarrassment) and were screened for dangerous drinking and AUD.

Each participant was asked how likely they would be at a hypothetical party to get a first drink, then a second, and so on, up to 8. The researchers used <u>statistical analysis</u> to explore varying perceptions of risk related to alcohol use and their associations with measures of



participants' drinking behaviors: drinks consumed per week, peak blood alcohol content (BAC), binge drinking in the last month, and criteria for dangerous drinking or AUD.

Close to 1 in 4 participants reported binge drinking in the past month, and 1 in 3 met criteria for hazardous drinking. Their perceived risk of one drink strongly predicted alcohol-related decision-making when choices were made one drink at a time. Those who perceived no risk in a single drink drank more and experienced greater alcohol consequences than those who saw low risk in one drink.

Participants who perceived less risk in a single drink were more likely to start and continue drinking than those who associated one drink with higher risk. This effect continued for five drinks, equivalent to the threshold for binge drinking. These participants also reported more drinks per week, higher peak BAC, and more alcohol binges, and scored higher on scales of dangerous drinking and alcohol-related harms compared to those who saw higher risk in one drink.

Moderate drinkers and abstainers were more risk-averse than heavy drinkers and more likely to perceive risk in a single drink. Higher perceived risk of heavy drinking was linked to lower likelihood of accepting a fourth, fifth, sixth, seventh, or eighth drink. But neither this nor risk sensitivity were protective against unsafe alcohol use.

The finding that "one-drink-at-a-time" thinking predicted risky decisions about alcohol supports the relevance of fuzzy-trace theory in the context of drinking decisions. The perceived risk of one hypothetical drink predicted real-world drinking behavior and the likelihood of AUD. The risk of AUD is especially heightened for those who believe a single drink carries zero risk. Early decisions around drinking may have larger effects on drinking and alcohol outcomes than decisions about later drinks.



The study calls into question the effectiveness of messages about limiting consumption, which may imply that lower amounts of alcohol are not risky. Harm reduction messaging could instead address beliefs about the presumed safety of one drink. Future research could identify additional processes that drive decisions to decline early drinks. It could also examine whether the findings are relevant to other self-regulation challenges that may also involve serial decisions about small amounts rather than a single decision about a large amount, like gambling, procrastination, and overeating.

More information: Bridget B. Hayes et al, Making decisions one drink at a time and the "just one drink" effect: A fuzzy-trace theory model of harmful drinking, *Alcohol: Clinical and Experimental Research* (2024). DOI: 10.1111/acer.15291

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