Choosing a Goal: Safer Drinking, Reduced Drinking, Or Quitting Altogether

Most people find that the non-abstinence goals of safer drinking or reduced drinking are not really at odds with each other; it is more likely that people will struggle with choosing whether a harm reduction goal or a goal of quitting drinking is there best choice. Of course in HAMS it is perfectly all right to choose to be a safer drinker without choosing to reduce quantities. We always encourage everyone to take steps to reduce any harms that their drinking might cause, regardless of whether their ultimate goal involves quitting drinking, reducing drinking, or keeping the amount of alcohol consumed the same. Safe drinking is always a good idea.

People are more likely to find a conflict between the goal of abstinence from alcohol and a non-abstinence, harm reduction based goal of safer and/or reduced drinking. For those people who are trying to decide whether a goal of alcohol abstinence or non-abstinence goal is best for them as an individual, we suggest writing out a Cost Benefit Analysis (CBA) which weighs the Pros and Cons of Quitting Drinking against the Pros and Cons of Safer/Reduced Drinking.

Two possible scenarios exist when we discuss the idea of goal choice:

1. The person is currently a drinker of alcohol and is considering changing their drinking habits
2. The person is currently abstinent from alcohol but is considering drinking again

Scenario 1) Current Drinkers

Case 1) Goal Is Already Decided:

If you are a current drinker and have already decided on your goal, whether it is safer drinking, reduced drinking, or quitting, then you are ready to go to the HAMS Tools and Elements and choose the ones you will find helpful in implementing your plan. You may also choose to write out a CBA to strengthen your motivation to pursue and succeed with your plan. People who choose alcohol abstinence as a goal are welcome to continue participating in the main HAMS groups and may also find that they wish to participate in the HAMS Abstainers Group as well. This group can be found at [http://health.groups.yahoo.com/group/hamsabs/](http://health.groups.yahoo.com/group/hamsabs/) Those who opt for abstinence are also welcome to participate in abstinence-based groups such as SMART, SOS, WFS, LifeRing, AA, etc. as well participating in HAMS groups. Those abstainers who find that the discussion of drinking plans on the main HAMS email group is a trigger for them to drink are, of course, welcome to leave and to participate only in groups which focus on abstinence instead.

Case 2) Goal is Undecided:

If you have not yet decided if your best option is to quit drinking completely or to opt for a harm reduction goal which my involve safer drinking, reduced drinking, or both, then we suggest that you write out the Cost Benefit Analysis (CBA) which weighs the Pros and Cons of Quitting
Drinking against the Pros and Cons of Safer/Reduced Drinking which can be found at the end of this article. In this case you are using the CBA as a tool to help you make your decision. Remember that in HAMS you always have the option to change your goal later on down the road if the goal you have chosen now winds up not working out for you. The research shows that about half of people who recover from alcohol dependence do so by quitting and about half recover by cutting back. In addition the CBA, the SADDQ (discussed below) can also be an aid in making your decision. And always remember that if you are not succeeding with abstinence then it is important to maximize safety and minimize risk when you do drink.

Scenario 2) Current Abstainers

If you have successfully resolved your problems with alcohol via long term (6 months or more) abstinence from alcohol then HAMS urges you to use great caution before you consider drinking again. Studies (NIAAA 2009) show that about half of persons with Alcohol Dependence resolve the problem by quitting completely. HAMS is always supportive of total abstinence as a recovery goal. Because the "A" in HAMS stands for Abstinence we like to say that "Quitting drinking is our middle name." Harm reduction strategies are aimed at those who are unwilling, unable, or not yet ready to abstain from alcohol. This includes people who have attempted abstinence and ultimately not succeeded at it but instead have gone on major benders after short abstinence periods. It also includes those who have never attempted abstinence or who currently have no interest in abstinence. Increased trauma produces increased drinking (Denning & Little 2011). The more resources people have intact, the better their odds of achieving recovery -- whether abstinent or non-abstinent recovery. Harm reduction helps keep people's resources intact enabling them to recover more quickly and easily than if they lost all.

If you are succeeding at abstinence and your alcohol related problems have disappeared or are disappearing then we strongly urge you to continue with what you find to be working -- i.e. abstinence. However, if you have already decided that you are going to drink again, then HAMS is a safe place to experiment with controlled drinking and you will be far safer here than if you attempt this on your own with no support at all.

If you are wavering and have not yet decided whether or not you wish to drink again then we strongly suggest that you do a Cost Benefit Analysis (aka a Decisional Balance Sheet) which compares the pros and cons of continuing to abstain with the pros and cons of drinking again. We also suggest that you write out a list of alcohol related losses and problems and a list of what you have gained as a result of abstinence from alcohol.

Some people are more likely to succeed in drinking again than others:

People whose drug of choice was not alcohol. If you went to rehab for heroin or some other drug which was not alcohol you were probably told that you were cross addicted to all mood altering drugs and that you must never drink again or you would relapse. The simple fact is that this is not true. You may well have noticed your rehab counselors using mood altering drugs like
caffeine and nicotine all the time and not calling this a relapse. The fact is that if you try to use alcohol as a direct substitute for heroin and get as drunk as possible all the time instead of shooting heroin then you will certainly have alcohol problems. However, if you get your life together and become a whole new person with a whole new life there is no chemical reason in your brain why you should not have an adult beverage at times. Opioids are directly cross-tolerant with each other; they are only slightly cross-tolerant with alcohol. Other drugs like speed are not cross tolerant with alcohol at all.

We do, however, very strongly recommend that if you are an ex drug user who is choosing to drink in moderation that you track your drinks by charting. Keeping a drinking chart will help you keep your drink numbers under control and let you know if you are starting to slip out of bounds. If you find your drinking is showing a tendency to "creep" up more and more you might wish to opt to return to abstinence from alcohol. We also strongly suggest that you do your experimenting within the safety net of a HAMS group and that you write out a Cost Benefit Analysis.

However, there are two other factors which you should bear in mind if your original drug of choice was not alcohol:

One is context- if you used to have a few drinks AND take your problem drug, then there is often a conditioned association, and drinking alcohol may prompt cues to relapse with the other drug- (in a similar way to drinking coffee or beer for people who have recently quit tobacco smoking).

Secondly, alcohol is one of the best drugs for disinhibiting people. For some people getting intoxicated with alcohol may lead to them deciding to use their "problem drug" again while not in a fit state to make such decisions. And if that drug is an opiate, benzo, or other CNS depressant, then relapsing while drunk is potentially going to lead to an overdose. If it's cocaine, amphetamine, or other CNS stimulants, then a drunk person relapsing is much more likely to get themselves into strife.

Another group who may tend to succeed with drinking again are those who were sowing a lot of wild oats in high school or college and wound up in rehab or an abstinence program in their teens or early twenties. If you are now in your forties you might have matured a great deal and no longer be interested in being the wild man. If you now find that moderate drinking is appealing to you but the thought of being a drunk teenager throwing up on your date's shoes at a party is repulsive to you then you may well find success at becoming a moderate drinking. Again we suggest that you do your experimenting within the safety of a HAMS group and that you chart and do a Cost Benefit Analysis.

If you had a long drinking career and a long history of alcohol related problems then the odds of returning to controlled drinking are greatly reduced. The longer the drinking career and the more problems the lower the chances of successful controlled drinking.
If you think that you have a shot at becoming a successful controlled drinker, then write down what it is that has changed in your situation that you believe will make you a successful controlled drinker this time around. If nothing has changed then it may well be excruciatingly difficult to try to use the HAMS harm reduction and moderate drinking tools to become a controlled drinker. Not only may you find that your odds of success are low, but you may also find that staying within the moderate drinking limits you have set for yourself is a form of torture and that abstinence is far simpler and more pleasant.

Finally we should note that research indicates that people who have a strong affiliation with AA generally do very poorly if they attempt to return to controlled drinking. AA members repeatedly tell themselves at every meeting that alcohol is "cunning, baffling and powerful" and that they are "powerless over alcohol. This bit of AA programming seems to set people up for disastrous benders any time that they attempt to drink again. Deprogramming from these sorts of statements is very difficult and therefore we strongly urge people with a strong affiliation with AA to NOT attempt controlled drinking.

HAMS harm reduction strategies are not a magic bullet which can turn everyone into a successful controlled drinker. For many, many people abstinence remains the best choice. Abstinence is simple and clear cut and avoids the problem of shades of gray.

And whether you opt to continue to abstain or you choose to drink again, always remember that you and no one but you are responsible for your choices.

**Using the SADDQ to Help You Choose Your Goal**

The SADDQ or SADD is the Short Alcohol Dependence Data Questionnaire. The SADDQ has an advantage over other questionnaires intended to diagnose Alcohol Dependence such as the MAST in that tests like MAST only give a yes or no binary answer; the SADDQ on the other hand indicates how severe an alcohol problem is. A copy of the SADDQ can be found here: [http://hamsnetwork.org/app2/](http://hamsnetwork.org/app2/) People with a low score on the SADDQ are low risk drinkers. People with a high score on the SADDQ are high risk drinkers. People with low scores on the SADDQ may have a better chance at success in sticking to moderate drinking limits such as those of SAMHSA or NIAAA. (These limits are for men 4 standard drinks daily and 14 weekly, for women 3 daily and 7 weekly) People with a high score on the SADDQ may have greater difficulty sticking to these moderate drinking limits and may find that these limits are far too low to satisfy them. Of course everyone is different, so some people with high scores on the SADDQ may also find that they succeed with the no-risk drinking limits.

Abstinence is, without a doubt, the safest course for the high risk drinker; however, we also know that forced or coerced abstinence can often backfire and lead the person to go on a huge bender. For the high risk drinker who is unwilling, unable, or not yet ready for total abstinence harm reduction is the safest solution.
Thus, people with a high score on the SADDQ who find that these moderate drinking limits are too low may find that their best goal is to either opt for a goal of **Quitting Drinking** or to opt for a harm reduction goal which involves **Safer and/or Reduced Drinking**. In particular, people who have had little or no success with an abstinence goal in the past may find that a harm reduction based goal is their best option for the present. Sometimes these people will find that success in achieving small harm reduction goals now can help them to eventually succeed with an abstinence goal in the future. This is also true if people have unresolved outside issues which impinge on their drinking (HAMS Element 8); once these outside issues are resolved they may find that they can now succeed at abstinence if they so choose it. Some people may also choose to keep occasional nights of recreational intoxication as a part of their plan; there is nothing wrong with this so long as safety plans are in place and no one is harmed in the process.

**STORIES**

**Stories of Those Who Opted for Alcohol Abstinence**

**ABC says:**

After three years of using varying harm reduction plans around my drinking, I decided to go the abstinence route last year. What prompted this decision isn't important, or even all that dramatic. Just one intoxicated weekend too many, only the Sunday that I used to taper down from the prior two nights of over-drinking happened to be Mother's Day. That hangover was extra special, and loaned a higher degree of recurring awareness, that the cost of the payoff buzz was getting really steep.

At the base of my decision to abstain altogether is that throughout my life, I drank beyond moderate limits 99.99% of the time, often daily. There are a few reasons why this might be, but the combination of childhood drinking environment and using alcohol as a neutralizer rather than a fun-enhancer, combined with many years of A.A. meeting attendance where I learned to be counter-dependent on the 12 steps and belief in the disease theory of alcoholism, had me thinking I'd best quit for a long time, if not for good.

How long is a long time? I'm not clear on that, so I go with "for the rest of my life" as the default. For the time being, there are plenty of things I need to deal with, before considering an attempt at moderate drinking. Besides, there are less costly (and sometimes organic) substitutes to drinking, as both a personal habit and a social ritual.

During my three years of trying a harm reduction approach to my drinking, there were a few months where I was charting my drinks, following healthy practices (eating before drinking is a big one), and checking in regularly with the HAMS Yahoo group. Doing these things helped me to cut my average alcohol intake by half. I found some success doing this, and I would use these strategies and others again, and take them more seriously, with any planned return to drinking.
For right now, abstinence is the best tool I have to render alcohol into a non-issue in my life. As a response to a statement in Ken's blog post, I gladly own the fact that harm reduction led me to this point of abstinence, while allowing the means to do this as safely as possible.

**DEF says:**

The Cost-Benefit Analysis led me to choose abstinence.

I love booze and it helped me cope with a lot of stuff, but I realized I was putting on a ridiculous amount of weight, and I wasn't accomplishing anything because even with Harm Reduction, I was wasting all my free time being either drunk or hung over. Harm Reduction did me a lot of good in that I wasn't endangering or embarrassing myself through drinking, but I was still just stagnating. None of my problems were being solved because I wasn't solving them - I was just escaping them.

I'd say if you're drinking primarily to escape problems and not because you enjoy it, abs is probably a good idea, at least for a while.

I've opted for long-term abstinence from alcohol because I've accepted the fact that I really don't have much self-control around booze. That doesn't make me powerless or diseased any more than my tendency for gluttony around certain foods or my tendency to want to spend my free time watching TV or surfing the web instead of working. It's just one more aspect of myself that I have to control for.

I was evaluating how to control for that lack of self-discipline around booze and decided that my best option is probably abs. Harm Reduction wouldn't quite be enough for me because when I allow myself to drink, I don't just get drunk occasionally - I'll go for blotto every night if I can. I could try to fight my own nature, or I could just accept that drinking really isn't worthwhile for me.

If someone else can handle moderate drinking or Harm Reduction, that's awesome. Booze is a lot of fun. As for me, I avoid booze for the same reasons that I avoid keeping Reese's' cups in the pantry. I think that part of learning self-control is being truthful about the limits of your self-control.

**GHI says:**

Hi All.

I don't post much as I am into instant gratification such as chat it seems.... That being said I am probably a good a good specimen of a anomaly in many ways to in the very least mainstream thought and theory re drinking. When I have drank it was heavy enough to kill Vikings, even narrowly myself on two occasions (another story if anyone interested in the dire consequences of going down that path). However I am also capable without too much effort on the most part to
abstain for lengthy periods, through traumatic and enticing events to make me want to drink (again another story). Basically I find it hard to moderate but can do that too. I like DEF's thinking of finding counter reasons not to drink, health fitness, feeling well, strength and in my case the wits to get me through a very nasty split. I concur wholeheartedly with the idea of good nutrition, essential for me as I find it hard to keep weight on and am vegetarian. Supplements I swear by, multivitamin, the best I can afford that blend eastern and western medicine, strong B complex extra thiamin if necessary, magnesium, fish oil and very high strength milk or St Mary's thistle and lots of hydration. The rest is the thoughts of what I want for my life and my son's and those I care about. This has included setting boundaries around what I will not tolerate or be a scapegoat to for others, particularly my ex or current 'partner'. This has come as quite a shock to them but this in itself empowers me and it feels intrinsically right. When something keeps jangling inside, it's time to look at it earnestly and honestly and address whatever it is to sit comfortably in your own skin on the mantle or shackle put on you by others. Bloody hard work when a drink just mellowing that if not obliterates it - for a while- then the consequences start. I think the art of moderation and abstinence is to honestly know and feel comfortable with your decisions and actions, accept your faults but try to do better without overkill as this just leads to the downward spiral of drinking for me. Harm Reduction for me would be tricky as I believe I am beyond that. I choose abstinence from alcohol right now because it's easier especially with everything else I have going on, I don't need to be judged or denigrated for drinking, so I just don't.

Today is 30 days alcohol-free for me. I did three months last year before wheels falling off a few times but nowhere near as bad as prior to the 3 months abstinence. So on the whole am upward scale with much, much lower and less frequent dips.

On a personal note am getting my personal life in order and found a brilliant pro-harm reduction doctor, (ex drug and alcohol nurse) who fully supports HAMS ethos and gets why rehab or AA would be waste of time for me or all concerned with me. Not that anyone but my ex needs convincing of that. This doctor also supports abstinence or moderate drinking for me but for the time being we agree on abstinence for the sake of getting me through this settlement, custody and divorce period with an absolute brute and bully. Need to contact police today and change locks as he will go nuts when he learns of what I have been up to. He hoped I'd kill myself so he could have the lion's share of all. Never underestimate the quiet observant ones...

Good luck all with your pursuits, I can't stress enough how feeling at ease with yourself, good supports and doc are to reach and maintain your goal.

**Stories of Those Who Opted for Harm Reduction**

**JKL says:**

I really enjoy getting intoxicated while watching old movies or listening to old records. I find that as long as I limit myself to getting intoxicated no more than two nights a week and never on
a work night then it causes no life problems for me. I find it quite easy to follow a set pattern once it is established so there is little or no temptation for me to drink the other five nights of the week. My parents were self righteous fundamentalist religious teetotalers and that is another reason that I greatly prefer to be in the wet camp and not the dry camp. Life is ever so much better now than the days when I used to get drunk four nights a week and go into work hungover and do other unwise things.

MNO says:

I enjoy drinking. However, there have been periods in my life where my drinking has become out of hand. I have had periods of sobriety through Alcoholics Anonymous, but it always felt as if there was something lacking. I would go to concerts or bars, because I didn't want to stop living life, but inside, I felt jealous. Not only were there people getting drunk, there were people drinking in moderation. I was completely miserable being a teetotaler, and I would like to think I was not their definition of a "dry" drunk. I "worked" the steps to the best of my ability, being a speaker at speaker meetings, getting involved in service work, and being there for my fellow "alcoholic."

I'll never forget last year when my boyfriend and I went to a German restaurant in New York. I was drinking NA beer, but when it came time for dessert, I ordered a dessert that was ice cream, topped with uncooked egg nog liquor. I got a slight buzz off of the liquor, having been sober almost a year. As we crossed the George Washington Bridge coming home, something dawned on me. I WAS in control. My seemed powerlessness fell to the floor. For some reason, at that moment, I decided that I no longer had to drink alcoholically, should that be my choice. In reality, the liquor was probably half of a shot at best, however, I knew at that moment that I was going to be okay.

There have been several bumps in the road since then; however, I have not had to visit a hospital, detox, or AA meeting. I control my own destiny. Occasionally I still make bad choices, but most of the time, I do not.

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Ready, Willing, and Able

If you are thinking about picking a goal of quitting drinking then you might want to ask yourself if you are Ready, Willing, and Able to succeed with this goal. If you feel the need to strengthen your readiness, willingness, or ability then you will want to concentrate on continuing to minimize harm while you build your strengths.

The same is true if you are considering a goal of reduced drinking or if you are a current abstainer who is thinking about drinking again. In particular, if you are thinking about drinking
again it might be a very good idea to be sure that you are ready, willing, and able to do so; if you have doubts then your wisest course will be to continue to abstain from alcohol.

It is a good exercise to get out pencil and paper and write out ways that you can increase your readiness, willingness, or ability to accomplish your chosen goal.

**To Abstain, or Not To Abstain: More Thoughts on Choosing Your Goal:**

The following is a reprint of an earlier article I wrote on this topic, hence the overlap with some things stated above.

The main choice is between an abstinence goal and a non-abstinence goal. Goals of safer drinking and reduced drinking are not really at odds with each other very much. You will have to be honest with yourself about successes and failures you have had with a goal of controlled drinking in the past as well as be honest with yourself about successes and failures you have had with a goal of abstinence in the past. It is worth writing down two lists—one of successes and failures with the abstinence goal and one with successes and failures with the non-abstinence goal.

If you are currently abstaining and are considering experimenting with controlled drinking, we suggest that you follow each drinking session the following day with a written evaluation of what worked and what didn’t.

We also suggest that you write out a Cost Benefit Analysis of the pros and cons of adopting an abstinence goal and the pros and cons of adopting a non-abstinence goal.

Harm reduction is aimed at those who are unwilling or unable to abstain—it is not a magic bullet to allow successful abstainers to drink again as much as they want with no consequences.

If you choose abstinence as your goal then we suggest that many people may find it helpful to participate in an abstinence-based group as well as in HAMS. If HAMS is the only group that you use then you might find that constantly hearing others talk about controlled drinking strategies is a temptation to pull you away from your abstinence goal.

HAMS always supports abstinence as a goal. However, the evidence shows that the traditional notion of “hitting bottom” is erroneous. People often use alcohol or drugs to cope with trauma, and increasing the trauma increases the drug or alcohol use. The more resources that people have intact, the more likely they are to succeed in either a goal of abstinence or in non-abstinent recovery. Stripping people of all they own in an attempt to force them into AA is less successful than doing nothing at all. After all, research tells us that the normal outcome of addiction is recovery without AA and without treatment.

Goal choice is an ongoing process—it can even be a lifelong process. Many people find that their first step towards abstinence is through harm reduction.
**CBA**

**Quitting Drinking - Abstinence Goal**

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**Safer and/or Reduced Drinking - Non-Abstinence Goal**

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