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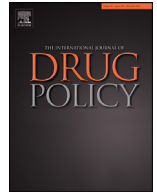
**Atkinson, AM ORCID logoORCID: <https://orcid.org/0000-0002-9936-6138>,
Meadows, BR ORCID logoORCID: <https://orcid.org/0000-0001-6469-0045>,
Nicholls, E ORCID logoORCID: <https://orcid.org/0000-0002-6013-9560> and
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Research Paper

'Some days I am a lunatic that thinks I can moderate': Amalgamating recovery and neo-liberal discourses within accounts of non-drinking among women active in the 'positive sobriety' community on Instagram in the UK

AMa Atkinson^a, B.Ra. Meadows, Eb. Nicholls, H-Ra Sumnall

^a Public Health Institute, Liverpool John Moores University, United Kingdom

^b Department of Sociology, University of York, UK

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ABSTRACT

Background: In recent years, reductions in drinking in the UK and the rise of online 'positive' sobriety communities have been observed, yet peer led support groups such as Alcoholics Anonymous (AA) and neo-liberal discourses of control and responsibility dominate public understandings of (problematic) alcohol use. This paper presents research exploring how women active in the 'positive sobriety' community on Instagram position and construct their non-drinking identities and relationships with alcohol within these overlapping discourses.

Methods: Semi-structured interviews (n=15) and online content produced by women active in the positive sobriety community on Instagram were analysed using thematic analysis.

Findings: Women challenged, reproduced and amalgamated AA discourses of addiction, and the broader discourses of neo-liberalism, in ways that positioned (alcohol) consumption, agency, control and individual responsibility as defining features of feminine identity making. Drawing on these discourses, binary understandings of problematic drinking, the identity of the 'alcoholic', and the need to reach 'rock bottom' in the recovery process were rejected and challenged, but at times reproduced. Whilst a broader framing of problematic drinking that situated drinking problems on a spectrum was constructed, abstinence was engaged with and promoted as the most effective way of gaining control and responsibility over drinking in gendered ways, and in establishing an authentic sense of self.

Conclusion: This paper contributes to emerging research on online 'positive' sobriety communities, their gendered nature, and the intertwined presence of traditional recovery and neo-liberal discourses in women's accounts. Online sober communities offered alternative spaces of support and allowed for sobriety and sober femininities to be framed more positively than within traditional AA conceptualisations. However, those involved may experience tensions around (a) the need to 'tell' their personal stories of complete abstinence whilst still appealing to those who seek to 'moderate' and (b) the pressure to create and craft an 'authentic' sober self on an online platform that demands a carefully curated self-image and personal 'brand'. Further research should aim to gain more understanding of the role social media plays in "doing" sobriety and non-drinking, how this is done by people of different genders, the intersectional experiences of those participating, and how these communities can be made more equally available and accessible to those who do not consider full abstinence as necessary, whilst still appealing to those that do.

Introduction

Neoliberalism, a political and economic regime characterised by capitalism, individualism, and the rolling back of the state, is the backdrop against which individuals consume alcohol and experience drinking cultures in gendered ways (Griffin et al., 2013; Goodwin et al., 2016; Nicholls, 2019). In neo-liberal societies, consumption practices

and lifestyles play a defining role in gendered identity making, and an emphasis on individualism, choice and responsibility holds individuals accountable for making the 'right' choices in the process of becoming 'good' consumer citizens (Goodwin et al., 2016; Harvey, 2007; Nicholls 2019). Within this process of 'successful' identity making, emphasis is also placed on authenticity- with consumption practices providing a means through which an 'authentic' self can be accomplished

* Corresponding author.

E-mail address: a.m.atkinson@ljmu.ac.uk (A. Atkinson).

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(Harvey, 2007; Nicholls, 2019) - and on 'healthism' i.e. taking individual responsibility for one's health, wellbeing and future. As stated by Goodwin et al. (2016) if individuals behave 'in ways that are seen as excessive, unhealthy, irresponsible or undisciplined, then this is constituted as a moral failure of the self'.

Under neoliberal regimes, individuals are expected to consume alcohol as an expression of self, but in ways deemed 'responsible' (for example in 'moderation'). Neoliberalism also pervades alcohol policy in countries such as the UK (Haydock, 2015), where governments prioritise 'light-touch' regulation of marketing and attempt to encourage consumption to regenerate city centres, whilst at the same time emphasising the need for individuals to manage their drinking in 'responsible' ways. A potential hypocrisy is at play here; individuals are compelled to 'drink responsibly' yet are bombarded with persuasive marketing messages that encourage consumption, whilst the limiting effects intoxication has on an individual's ability to consume and act responsibly are overlooked. Discourses of individual responsibility and choice also obscure structural factors and ensure that those who fail to meet these demands are blamed or shamed for making the wrong 'choices' (Nicholls, 2019). They also present problems for non-drinkers who refuse to partake in drinking cultures and reject the role of alcohol in individual identity formation. Further research is required to examine the ways non-drinkers navigate (non)consumer identities in the face of these tensions.

The process through which individuals negotiate their drinking under neoliberalism is highly gendered, and whilst much research has explored how female drinkers negotiate the contradictions of contemporary femininity within a culture of intoxication where drinking is normalised (e.g. Griffin et al., 2013), less is known about the contemporary experiences of women who stop drinking. In light of evidence of recent reductions in drinking in the UK (ONS, 2018, 2020), and the rise of sobriety as a 'lifestyle choice', research (Davey, 2021; Nicholls 2021) is beginning to explore how women who choose not to consume alcohol manage their sober identities in a neo-liberal society that normalises drinking and presents it as a defining feature of feminine identity making. This includes research with women who participate in 'positive sobriety' communities on social media (Davey, 2022; Nicholls, 2021). These online communities provide feminised spaces of support for non-drinking that differ from traditional abstinence based programmes such as Alcoholics Anonymous. Yet, as Davey (2021) argues, further research on women's experiences of utilising these spaces is required. This paper begins to build on this emerging literature and addresses gaps in our understanding of women's negotiations of sobriety through online communities under neoliberalism. It starts by discussing women's drinking in relation to neo-liberalism and discourses of control and responsibility, and the recent reframing of sobriety as a positive identity within (feminised online) communities. It then outlines the dominance of traditional Alcoholics Anonymous discourse in conceptualising sobriety, its gendered implications, and how it relates to neo-liberalism. Primary research with non-drinking women who participate in 'positive' sobriety communities on Instagram is then presented, to consider how they frame, display and negotiate non-drinking practices and identities in these online spaces, and how these both challenge and reproduce intertwined AA and neo-liberal discourse.

Women, alcohol and femininity

Alcohol use has long been normatively framed as a masculine practice, and non-drinking associated with femininity and respectability (de Visser and Smith, 2007; de Visser and McDonnell, 2012; Schmidt, 2014). Traditional and 'respectable' femininity is associated with (sexual) passivity, domesticity, nurturing, risk aversion and bodily control. Women who drink have historically been accused of neglecting traditional gender roles (e.g. wife, mother) and judged for behaviours including public displays of intoxication, consuming 'masculine' drinks (i.e. pints), and acting in ways labelled sexually promiscuous or 'risky' when intoxicated and participating in the NTE (Atkinson et al., 2021;

Emslie et al., 2015; Griffin et al., 2013; Nicholls, 2019). More recently however, a convergence in the drinking patterns and practices of men and women has been observed (Atkinson & Sumnall, 2016; Griffin et al., 2013; Nicholls, 2019), and women now enjoy and participate in alcohol use, related leisure and intoxication for friendship bonding, pleasure and the expression of femininity (Atkinson & Sumnall, 2016; Griffin et al., 2013; Nicholls, 2019). Women's drinking, and their participation and expression of hyper-sexual or 'girly' femininities in public drinking spaces, have also been framed as a form of 'empowered consumption' in a 'postfeminist' society of supposed gender equality, and as evidence of social progress and women's right to choose, express and enjoy within neo-liberal discourses of individualism, choice and empowerment (Atkinson et al., 2021; Emslie et al., 2012; Gill, 2008; Gill and Scharff, 2016; Griffin et al., 2013; Nicholls, 2019; Vaadal and Ravn, 2021).

Yet research has also drawn attention to how, in the context of neo-liberalism, women must negotiate tensions between the demands of respectable femininity and the freedoms and empowerment they are now said to be afforded through consumption based practices (Atkinson et al., 2021; Griffin et al., 2013; Nicholls, 2019). Women must adopt self-surveillance and discipline to avoid being negatively labelled and judged for their perceived inability to control their drinking and related 'irresponsible' behaviour and sexualities (Atkinson and Sumnall, 2018; Haydock, 2015; Nicholls, 2021). Whilst this dilemma forms a common theme in women's accounts of drinking and intoxication (e.g. Atkinson et al., 2022; Griffin et al., 2013; Nicholls, 2019), little research has explored how women who do not drink - but instead perform 'sober' identities - negotiate this complex set of contradictions and demands (Atkinson et al., 2021). This paper will work towards addressing this gap.

Shifting social norms around sobriety

Alongside the recent popularity of temporary abstinence challenges that encourage non-drinking over short periods for health improvement or charity fundraising (Davey, 2021; Yeoman, 2019), and an expanding market of No and Low alcohol products that contain alcohol content ranging between 0.0 and 1.2% ABV (Nicholls, 2022), there has been increased visibility of 'quit lit' and 'self-help' publications, and online and social media based 'positive sobriety' communities' (e.g. The Sober Girl Society, Club Soda, Soberistas), that celebrate abstinence and moderation (Club Soda, 2022; Davey, 2021; Gooch, 2022; Nicholls, 2021; Herman-Kinney and Kinney, 2013; Yeoman, 2019). Such communities tend to be led and used by women and emphasise the benefits of not drinking whilst distancing themselves from traditional 12 step recovery programs (i.e. AA) that focus on the negatives of alcohol use and indirectly stigmatise non-drinking and sobriety through the binary language of 'addiction' or 'alcoholism' (Davey, 2021). These online, non 12-step support groups are a contemporary development that have grown in popularity in the last decade. As described by Davey (2021:2), they predominantly provide peer support, information and recovery 'coaching services' to individuals aiming to renegotiate their relationship with alcohol, 'irrespective of where they are on the continuum of alcohol consumption'.

This recent increased popularity of sobriety and its positive reframing suggests a shift in the social norms around the acceptability of not drinking in the UK, and has been conceptualised as underpinned by neoliberalism. Sobriety, 'sober curiosity' and moderate drinking have been reshaped as positive lifestyle choices for self-care and health improvement (Davey, 2022), in ways that reflect and reproduce neo-liberal discourses of healthism, choice, authenticity and productivity in gendered ways (Nicholls, 2021). For example, Davey (2022:68) highlights how in a neo-liberal society the re-branding of 'moderation' as 'mindful drinking' has assigned 'responsibility back on the individual to self-care for their mental health in light of pressures created by the neoliberal society and an addictive substance'. In her qualitative re-

search with recently sober women Nicholls (2021) also observed neo-liberal discourses of control, choice, responsibility and authenticity in women's accounts. Participants contrasted 'a powerless, ineffectual and inauthentic drinking self with a successful sober self who retains control over their life, [and] represents their 'true' self' (2021:769). Importantly, sobriety was also framed in relation to traditional recovery discourses 'that position the non-drinker as diseased or flawed', and in ways that aligned neo-liberal framing of (non)-drinking with disease and moral models of addiction such as those found in AA discourse (2021: 768). This paper aims to extend such work that has identified the intertwining of these discourses in women's accounts of non-drinking.

Models of addiction and their relationships to neo-liberalism

Non-drinking has traditionally been understood in relation to 'alcoholism'¹, in which sobriety and recovery are positioned within disease and moralistic models that provide individualised explanations of addiction (Morris et al., 2022; Yeung, 2007). Historically, the UK Temperance movement was underpinned by moralistic values, framing problematic drinking as a moral failing for which the individual was responsible, and linking abstinence to self-betterment (Heyman 2009; Batho, 2017). Yet from the beginning of the 19th Century, a 'disease' model emerged, which deprived the individual of the capacity to control their alcohol use, and thus removed responsibility (Reith, 2005; Room, 2011). When these two models overlapped, a medical-moral discourse of addiction developed that viewed addiction as both a disease and moral vice, with a mixture of agency and passivity placed on the individual in relation to their capacity to 'control' their drinking and recovery (Batho, 2017; Berridge, 2005; Reith, 2005; Room, 2011; Yeoman, 2011). Consequently, these distinct models exist contemporaneously, and are interwoven and understood through each other.

An amalgamation of disease, moral and neo-liberal framing in explaining 'alcoholism' is apparent in the ethos of Alcoholics Anonymous (AA), a popular, free 'self-help' treatment programme for 'problem' drinking (Batho, 2017; Kelley and Crosbie, 2020; Yeung, 2007). AA predates neo-liberalism and was established in the United States by white Christian men in the 1930s, but was later reformulated to be accessible to a secular audience. Its ethos dominates public understandings of problematic alcohol use and addiction, through its prominence in popular culture and media depictions of 'alcoholism', and its alliance with abstinence based framings that take priority in substance use policy (Atkinson and Sumnall, 2018; Morris, et al., 2022). Run by peer volunteers who self-identify as 'alcoholics', members attend regular meetings and follow a 12-step programme of recovery (Alcoholics Anonymous, 2001; Batho, 2017; Yeung, 2007). The fellowship's stance on addiction aligns with the disease model, defining alcoholism not only as a medical disease, but also as a spiritual and moral illness that necessitates complete abstinence as a form of disease management (Duff Gordon and Willig, 2021; Humphreys, 2000; Morris et al., 2022).

These foundations require members to admit their inability to consume alcohol 'normally', in ways that present use in binary terms ('alcoholics' versus 'normal' drinkers) (Duff Gordon and Willig, 2021; Morris, 2020; Morris et al., 2022), which is problematic as it excludes individuals who may seek to manage their consumption through 'moderation' rather than complete abstinence (Morris et al., 2022). By framing the individual as a victim of disease who is "powerless" over alcohol, AA also positions 'alcoholism' as a stable condition rather than a situational response to difficulty (Yeung, 2007). This fixed position and focus on lacking control contests the neo-liberal ideal of a fluid 'narra-

tive of the self' through choice and agency (Reith, 2005), but reflects neo-liberal tendencies to overlook structural determinants of addiction, instead transferring responsibility onto the individual in ways that value self-sufficiency regardless of circumstance (Atkinson and Sumnall, 2018; Kelley and Crosbie, 2020). This focus on the individual and downplaying of structural factors may result in blame, stigma and shame. Similarly, it has been suggested that as an example of addiction self-help culture, AA reproduces abstract, neoliberal norms on health that govern individuals along moral lines and in ways that celebrate individuality, responsibility, and control (Duff Gordon and Willig, 2021; Rankine, 2020; Valverde and White-Mair, 1999).

There is also a spiritual dimension to AA. Members are instructed to surrender to a "power greater than ourselves" to facilitate discovery of the 'true self' (relative to the 'old (drinking) self') (Alcoholics Anonymous, 2001; Humphreys, 2000; Rankine, 2020). This focus resembles neo-liberal self-care narratives around the creation of an 'authentic self' through consumption-based practices, self-control and surveillance (Giddens, 1991; Harvey, 2007; Nicholls, 2021), yet in AA an authentic self is achieved only with the aid of a 'higher power' (Alcoholics Anonymous, 2001; Humphreys, 2000; Rankine, 2020), in contrast with neo-liberal framings that centre the individual. AA members are paradoxically positioned as becoming empowered (i.e. gaining agency) by accepting defeat and powerlessness over their disease (Duff Gordon and Willig, 2021); only by surrendering to a higher power and AA group support do they gain control, and take responsibility for their recovery (Batho, 2017; Irving, 2014; Rankine, 2020). The programme's 12 steps provide a moral framing that aligns with neo-liberalism's focus on individual responsibility, with members instructed to pursue a 'moral inventory' involving a realisation of flaws and a commitment to actively work towards self-improvement by following a prescriptive course of action (Batho, 2017; Humphreys, 2000; Irving, 2014; Yeung, 2007). Individuals are held responsible for their recovery and health - but not their disease (Irving, 2014). Much as neo-liberalism blames the individual for making the 'wrong' consumer choices, those who do not succeed in AA can be subject to blame and shame; the implication is not that the approach might be unsuitable for them, but simply that they are not working 'hard enough'.

A number of studies have explored women's experiences of AA (Bogart and Pearce, 2003; Bradley, 2005; Kaskutas, 1994; Sanders, 2018) and highlight how the issues that arise from the dominance of AA understandings of problematic use, and AA framing of sobriety, are gendered. Davey (2021) notes how women are less likely to seek help for problematic drinking from traditional treatment programmes that are underpinned by 12-step approaches. This is due to barriers including a failure of such programs in meeting the gender specific needs of women, and the disproportionate and gendered shame women experience when accessing treatment (Burman, 1994; Gilbert et al., 2019; 21). The requirement of admitting 'powerlessness' has also been critiqued as inducing feelings of repression and disempowerment among women who - in a patriarchal society - seek and benefit from agency (Clemmons, 1991). Moreover, as a male-dominated space (Sanders, 2018), AA has been critiqued for potentially triggering female victims/survivors, particularly in relation to the 'thirteenth step' (a colloquial term for established members making sexual advances towards a new member (Bogart and Pearce, 2003)).

With these issues in mind, it is important to undertake further research that explores the gendered experiences and benefits of online sober communities that provide more women-focussed alternatives to the 12-step programme (Davey, 2021, 2022). In this paper, we contribute to this emerging field, extending earlier work to examine how women position sobriety and construct their feminine sober identities in the 'positive sobriety' community on the social media platform Instagram. We highlight how women framed and promoted sobriety in gendered ways, and how discourses of individual responsibility, agency, control and authenticity, as key features of the AA and neoliberalism, were reproduced.

¹ We refer to 'alcoholism' in the paper as used by AA and participants, as a self-defined label that fails to acknowledge diversity in experiences of Alcohol Use Disorders (Morris et al., 2022).

Methods

Semi-structured in-depth interviews were conducted with 15 non-drinking women from the UK who were active in the positive sobriety community on the social media platform Instagram; this is a key platform on which the positive sobriety movement plays out through private messaging, online posts and commenting, and the presence of individual sobriety accounts and groups organising online and real life meet ups. All interviewees participated in these communities, and had Instagram accounts that aimed to document their experiences of sobriety and provide support to other women abstaining from alcohol or moderating their drinking. Four had full time jobs related to sobriety; one was an 'influencer' with an income generated from a large social media following, and three had become 'sober coaches' or 'life coaches' since stopping drinking, providing alcohol and mental health support to other women. Others worked in education and marketing. The number of followers of their accounts ranged between 1130 and 171,000.

As a commercial platform, Instagram is now the fourth most popular platform globally behind Facebook, YouTube and WhatsApp (Statista, 2021a). It is a photo and video-sharing platform that allows users to upload, edit and caption images to their profile, and is predominantly used by women (WeAreSocial, 2019). Instagram has been labelled a neoliberal entity, in that it is heavily supported by advertisers, business profiles and active 'influencers' who promote goods and services (Statista, 2021a,b). Moreover, its visual and commercial nature have been conceptualised 'as a tool of neoliberal self-regulation' (Mahoney, 2022) in that users present themselves in carefully constructed ways related to consumption and appearance, which opens them up to scrutiny, and is associated with (gendered) harms such as online abuse/misogyny and negative body image (Brown et al., 2016; Lyons et al., 2016; Mahoney, 2022; Wagner et al., 2016). Users' self-expression cannot be separated from the performance of self within existing gender expectations, and there are tensions inherent in a media platform where women experience a pressure to be 'authentic' yet do so through the production of a carefully crafted self (Milan, 2018; Savolainen et al., 2022). The platform thus provides opportunities as well as challenges for women who use it to perform sobriety and resist neo-liberal pressures to consume alcohol.

Participants were recruited via a research project Instagram account and using snowballing techniques. We followed participants' publicly accessible accounts and sent a formal invite via direct message or the email provided on their Instagram page. A total of 24 women were contacted, with 13 agreeing to take part, and two providing contacts for a further two women who expressed an interest in participating. One declined to take part due to a lack of time, three agreed but then did not follow up to arrange a date, and five did not respond to the invite. Women were located across the UK, including the North West and East, Midlands and South East. Ages ranged between 25 and 50 (most were in their 30s), and the amount of time women had been sober ranged from three months to five years. The majority were white (one defined as Asian, one Black and one Mixed), heterosexual (one identified as bisexual) and cisgender. Most did not identify with a social class, but two defined themselves as working class and three middle class, and research suggests that these support communities are generally the preserve of White middle class women with higher socioeconomic capital (Davey, 2021).

Women embraced sobriety as a defining feature of their identities and actively engaged with and created content within the positive sobriety community. All labelled themselves as 'sober' but used the terms sobriety and non-drinking interchangeably, and this is the approach taken in the analysis. They defined their relationship with alcohol as problematic but none reported a physical dependence (e.g. tolerance, withdrawal symptoms), and all but one had decided to seek support outside of traditional support groups such as AA. Three self-described themselves as having previously been 'functioning alcoholics', and one currently self-defined as an 'alcoholic' and did attend AA. All regarded

their use as problematic in relation to its impact on their mental health, and discussed alcohol use as having impacted on their relationships with partners and in some cases friendships, with loved ones expressing concern over their drinking. Mental health issues reported included depression, Post Traumatic Stress Disorder and (social) anxiety. Four recalled receiving support for their mental health and three reported being prescribed anti-depressants. Some reported having drunk two-three bottles of wine per night to self-medicate, and many reported 'binge drinking' in the night time economy on a weekly basis, to the point of black-out, which was felt to have heightened anxiety and worsened overall mental health. Those who had stopped consuming alcohol in the last 12 months reported abstaining following an escalation in their alcohol use and declining mental health during the COVID-19 lockdowns, and/or deciding to use the lockdowns as an opportunity to stop drinking.

Interviews were conducted by the first and second authors, who are white women between the ages of 24 and 37. Other than one interview which was conducted in person, interviews were conducted online via Microsoft Teams. Participants received a £15 retail voucher in recompense. Participants were asked to discuss their previous drinking patterns and reasons for abstaining, any barriers and challenges faced, and the positives of not drinking. They were also asked to discuss the role of the social media community on Instagram within their sobriety and the nature and purpose of the content they created and posted, as well as their views on alcohol marketing. Interviews were recorded and automatically transcribed using Microsoft Teams. They lasted between 37 and 90 minutes (mean 63 minutes), which resulted in 16 hours of recorded discussion. Microsoft Teams transcriptions were used as a guide and recordings were listened back to and the transcription amended to provide a verbatim account.

A thematic analysis was conducted in NVivo to develop patterns, themes and sub-themes using both pre-determined and emerging coding (Braun and Clarke, 2006). A pre-determined coding frame was developed prior to analysis and included broad pre-determined codes related to the research questions. These were firstly applied to the data to organise discussions into broad categories, and included 'reasons for not consuming alcohol', 'purpose of online content', 'benefits of online positive communities' and 'benefits of sobriety'. These broad codes were then further developed and refined inductively. For example, reasons for not drinking focussed on 'an inability to moderate'. The main aim of their online content was to reframe sobriety as a 'positive identity' and to 'challenge stereotypes of the alcoholic'. Benefits of sobriety focussed on 'reclaiming agency' and an 'authentic sense of self'. Some themes such as 'alternative consumer identities', were developed purely inductively. An integrative approach to thematic analysis was used, with new codes identified being included into the pre-determined frame and then applied to previously and yet to be coded transcripts. Each of these categories related to the dominance of AA discourse in public understandings of 'addiction' and sobriety, and neo-liberal concepts of control, agency, responsibility and authenticity. It is through this lens that we present and interpret the data.

We also collected content posted on participants' sober Instagram accounts over a 12 month period prior to being interviewed using Crowdtangle, which scrapes all textual, visual and interaction data for social media content posted on public facing accounts. This resulted in 1640 posts related to sobriety, which were exported into Microsoft Excel. The textual content was then subject to the same process of thematic analysis as the interview data, applying both the predetermined and inductive codes developed during the interview analysis (Braun and Clarke, 2006). Participants were informed that we would be engaging with their online content following the interview. To ensure that their identities were not traceable, extracts quoted from their online content were 'Google proofed' (Germain et al., 2018), to ensure that searching for the quote online would not trace the extract to its original source.

We chose to incorporate both interview and social media content into our analysis. It is therefore important to reflect on the different purposes and contexts in which interview and Instagram data were created. Both

involve identity work on behalf of the participant, but interview data was produced as an outcome of interaction between the researchers, who were outsiders to the online sober community, and participants. We chose interviews to provide a space for participants to reflect in depth and confidentially on their lived experience of alcohol and sobriety, and for the specific purpose of exploring our research question. In comparison, Instagram posts are publicly accessible data that are constructed by participants to specifically target other women who are sober and those considering becoming sober (or moderating). Thus, online posts are created with the intention of encouraging and supporting others in sobriety, and in participants' online performance of sober femininities. Instagram posts thus provided insight into how women chose to construct sobriety publicly to an online community made up of what participants described as 'like minded' people. In comparison, interviews allowed them to share their experience outside of the community and provided an opportunity to discuss issues they may not wish to address on social media. Despite such differences, there were clear similarities between the topics and issues discussed between both sets of data.

Another important consideration is how by reflecting the online positive sobriety community as women centred, we felt that our position as women helped create a safe space to discuss sensitive issues (e.g. a number of participants discussed experiences of being in 'vulnerable' and 'unsafe' situations when intoxicated). Interviewers disclosed their own alcohol use, which some participants requested. In her study of sobriety among women active in online sober support communities on Facebook, Nicholls (2021) discussed how her own status as a recently sober woman helped build rapport with participants, providing reassurance and validation of participant's experiences and opportunities to share commonalities in experiences. Whilst the interviewers were not members of the online sober community, a rapport was quickly developed, with all participants being eager to share their experiences. However, it is important to acknowledge that the data is a product of a dialogue between non-drinking and drinking subjects, and that at times participants appeared to sell and promote sobriety in persuasive ways to the interviewers. Moreover, some participants were eager to clarify that they were not 'anti-alcohol', which may have been a product of the identity of the interviewers as drinkers, and in one interview, a participant labelled the interviewer a 'normie', a term used in the sober community to describe people who are able to moderate their drinking. Thus, like all qualitative research, women may have been engaging in 'impression management' (Goffman, 1959; Nicholls, 2021), whereby they constructed a particular narrative around sobriety in the presence of drinkers.

Ethical approval was granted by Liverpool John Moores University ethics committee and informed consent gained from each participant.

Findings

Four interlinked themes are presented drawing on illustrative examples from interviews and online content posted by women active in the positive sobriety community on Instagram. We aim to shed light on how women framed, displayed and negotiated their non-drinking and sober identities in ways that reflected and challenged the dominance of AA narratives in public understandings of problematic alcohol use, and the broader context of neo-liberalism, through discourses of agency, control, individual responsibility, and the authentic self. Firstly, we discuss how participants reproduced AA's discourse of abstinence as a necessity to control problem drinking and presented themselves as unable to meet the neo-liberal demands of moderation, whilst both reproducing and challenging binary notions of addiction that distinguish between 'normal' and problem drinkers. Secondly, we highlight how women rejected and distanced themselves from AA 'rock bottom' narrative and stereotypes of the 'alcoholic'. They instead framed problem drinking as a spectrum, and expressed relative agency and control over their drinking to avoid the shame, stigma and negativity that were felt to result from these AA discourses. Next we draw attention to how women fo-

cussed on self-discovery and the authentic self in ways that reflected and reproduced AA's focus on reviving the true self through abstinence, and neoliberalism's emphasis on consumption in achieving an authentic identity. Participants rejected AA discourse of surrendering to a higher power and admitting powerlessness, and instead drew on neoliberal discourse to place emphasis on their own agency. Lastly, we discuss how sobriety provided the time, head space and resources for women to productively 'work on the self', and having rejected alcohol consumption as a marker of their feminine identities, they engaged in alternative consumption practices to construct a new sense of self. We also consider the tensions presented by the online platform Instagram in the negotiation of a successful and 'authentic' identity.

'Some days I am a lunatic that thinks I can moderate': expressing an inability to moderate

Aligning with traditional AA discourse that frames the individual as unable to control their alcohol use due to a disease that demands full sobriety, participants discussed an inability to moderate their drinking and the need to fully abstain from alcohol, in interviews and online posts (Dossett, 2013; Nicholls, 2021). Samantha, a sober coach, discussed with the researcher various failed attempts at moderating her drinking following periods of sobriety. Stating that 'everyone thinks they're the one person that's going to make moderation work, you know? And then it's like 'Here I am again [seeking support]', she generalised a lack of control over drinking as a common experience among women within the community. As shown below, she explained how she and other women wrongly interpreted successful stints of sobriety over short periods as evidence of being 'fixed'; this inability to 'fix' the self suggests something is inherently 'wrong' with the individual, in ways that reflect AA discourse that addiction is a disease that can only be managed through abstinence. Her inability to moderate, and in turn meet the demands of responsible drinking and moderation prescribed by neo-liberalism, is contrasted with the 'normal' responsible drinker who remains in control through moderation, and the binary is reinforced. However, unlike AA and neo-liberal discourse that disregards external pressures, Samantha acknowledged structural influences such as marketing, and critiqued messaging by the alcohol industry that frames alcohol use as a normalised aspect of everyday life:

'Women get to about a year and go 'Oh, I've fixed myself', so it's like 'My mental health is better'. And because marketing is so intrinsically part of our lives, it's like 'I can't be normal, if I'm a normal person, I drink alcohol'. That was very much it for me. So if I can fix my anxiety, my depression, and then I'll be normal, and then I'll drink like a normal person'

(Samantha, four and a half years sober, interview extract)

Similarly, some participants expressed annoyance at the industry neo-liberal narrative of 'drink responsibly', which was viewed as overlooking the realities of those like themselves who were unable to moderate, as well as dismissing the environmental pressures individuals must negotiate including industry messages themselves. For example, Jane posted 'Drink Responsibly is a message promoted by the Alcohol Industry that I feel is dangerous as it promotes shame and stigma and implies that the issue is with the person, not the drug alcohol'. Whilst she defined herself as someone who is unable to moderate in ways similar to AA discourse, she contested the neoliberal tendency to devolve the responsibility for moderate drinking onto the individual. Katherine also drew attention to an inherent contradiction in neo-liberalism, whereby the industry places responsibility on the individual for the use and effects of an intoxicating substance (Goodwin et al., 2016), stating that 'it's like 'drink this responsibly, but be warned it will make you irresponsible [laughs]. It's just so backwards. But obviously, it shifts the blame off them [the industry], doesn't it?'

Despite such critiques, for all participants, failing to moderate like a 'normal person' was presented as inevitable ('Yes some days I am a lu-

natic that thinks I can moderate', Laura, 15 months sober, interview extract) and all held the opinion expressed by Katherine (two years sober), who when promoting abstinence on her Instagram account, posted that 'In my opinion, for someone who drank like me, successful moderation was never on the cards'. An inability to moderate was a defining feature of their identities, and they self-labelled in ways that distanced themselves from moderation, for example telling the researcher they were 'not a one or two [drink] kind of person' (Jane, three years sober) or were 'all or nothing' people (Heather, two years sober). More explicit binary distinctions were made at times. Discussing her inability to moderate, again Katherine, a member of AA but a prominent figure in the Instagram sober community, explained to the interviewer that 'a normal drinker, is what we call 'normies' in the sober community [Laughs]'. Here she creates two distinct categories of drinker and distinguishes between 'alcoholics' who cannot control their drinking, and 'normal' drinkers who can. By highlighting 'we...the 'sober community', she suggests that all women in the community relate to and apply this distinction.

Ongoing work in abstaining was discussed as being required to resist 'that one drink', in ways that reflected AA ethos that picking up the first drink strips individuals of the agency gained through abstinence, leading to a loss of control (Duff Gordon and Willig, 2021; Rankine, 2020). Jane (3 years sober) promoted abstinence as a necessity for those experiencing problem drinking, asking her followers 'Do the urges to drink get too much?', and recalling 'the feeling of disappointment, shame and regret whenever I had some alcohol free time under my belt, then something stressful happened or those moderation thoughts came into my head'. She concluded that these experiences had helped her realise 'there's no such thing as one [drink]', and she framed moderation as unachievable, reproducing AA discourse positioning abstinence as the most effective response to problematic drinking. Her focus on shame and regret also highlights the stigma associated with relapse in recovery, which as a women, is likely to have been heightened by societal norms that label problematic drinking as signifying a failure to meet the expectations of moderation and control required by respectable femininity (Davey, 2021; Nicholls, 2019).

Others contested binary notions and used their online presence to challenge the idea of a distinction between two groups of drinkers. Whilst Claire (3 months sober) defined herself as being unable to moderate, she presented drinking problems as a spectrum when posting that 'a large number of regular drinkers would struggle to stop...let's stop categorising 'alcoholics' separate to 'normal drinkers'. There's nothing normal about everyone being hooked on an addictive drug'. Similarly, whilst Macie (four years sober) also discussed her own inability to moderate, she created an inclusive space for both those who moderate, and those who abstain, through her online content. Asking 'What's harder - sobriety or trying to moderate?' she acknowledged the difficulties that can arise when practising both approaches, and actively used her online account and large following to promote 'mindful drinking and sober curiosity' as a healthy lifestyle choice, providing advice on 'how do you cut down without quitting?' Thus, whilst all labelled themselves as lacking control over their drinking and as unable to moderate in ways that reflect AA narratives, they also attempted to promote the benefits of reduced consumption and drinking 'more mindfully' to the general population through a neo-liberal discourse of prioritising 'health' as a responsible 'lifestyle choice' (Haydock, 2015; Nicholls, 2021). The language of mindfulness' used by participants when doing so reflects the recent neo-liberal re-branding of 'moderation' to 'mindful drinking', which places the responsibility for controlling drinking and its effects onto the individual as a lifestyle choice (Davey, 2022).

'I wasn't this rock bottom park bench alcoholic': challenging 'rock bottom' narrative and the 'alcoholic' stereotype

Despite reproducing traditional AA discourses of lacking control and binary drinking categories based on an individual's inability to moder-

ate, the concept promoted by AA of reaching 'rock bottom' was debated or refuted by most participants in both interviews and online content (Morris et al., 2022; Nicholls, 2021). A small number did recall their own 'rock bottom', which was described as a 'turning point' in their relationship with alcohol, and important in 'triggering' the decision to abstain. However, these individuals still contested the notion ('I don't think that people need a rock bottom', Katherine, interview extract) and felt that the concept was problematic in how it could act as a barrier to individuals seeking support. Claire discussed her own 'rock bottom' but in her online content rejected this as a necessary experience. She posted that 'millions of people have an alcohol dependency and don't realise because they've never hit any kind of rock bottom'. She went on to ask her followers 'How bad are you waiting to be before stopping!? Because rock bottom might not ever come'. Similarly, Samantha expressed concern to the interviewer, that the rock bottom narrative can lead to women whose experiences do not fit this AA conceptualisation continuing to drink at harmful levels. Drawing on her own experience, she expressed disillusionment with mainstream services (i.e. GPs, therapists) who she perceived as having encouraged her to moderate instead of abstaining, as an outcome of her drinking being perceived as not 'that bad' and having not yet 'hit rock bottom'. She felt that the promotion of moderation had in turn prolonged her problematic alcohol use, stating that she was:

'questioning drinking back when I was 24 and I stopped when I was 37, and it never needed for me to get as low as it did, you don't have to hit rock bottom and we really need to change that because they [GPs, therapists] keep pushing people back until they hit rock bottom, and it's like, people have got agency around this'

(Samantha, 2 years sober, interview extract)

Despite defining herself as being unable to moderate, she distances herself from the notion of rock bottom, and in contrast presents herself as relatively agentic with the ability to successfully practice abstinence, with the right support. In turn, abstinence is positioned as an option for individuals who may not fit the narrow AA definition of problem alcohol use, and as an option for all regardless of the nature of their problematic drinking. She went on to further clarify her perspective stating that:

'Thank God there is AA, it's saved hundreds of thousands of lives. It works for some people, but alcohol addiction is a spectrum.... there are those people that are, really at rock bottom where that option is fantastic. But I wasn't there, that's not what it felt like for me. So having to push myself into that diagnosis or that problem, to live within an addiction or to be an addict, was very disempowering for me because I felt like I had a choice'.

The AA binary conceptualisation of problem drinking is contested and she instead frames problematic drinking as a spectrum (as mentioned in the previous section), whilst distancing herself from AA and rock bottom narratives that label the individual as 'addict'. Describing the pressure to label oneself as such as 'very disempowering', she emphasises her own agency when stating that unlike the 'addict' she had 'choice'. Not only does this contest AA notions of powerlessness over alcohol, but frames the neoliberal notion of individual self-control and discipline as a valuable attribute (Nicholls, 2021).

Macie similarly presented the rock bottom narrative as having prolonged her problematic use and preventing her from viewing abstinence from alcohol as a possible response to her problematic drinking. She explained how she 'never ever thought it [giving up alcohol] could be possible and only because I wasn't this rock bottom park bench alcoholic that is stereotypical in the media'. Reference to the 'stereotypical' 'alcoholic' and the 'park bench drinker' or the 'old man on the bench', was common, and despite many framing drinking problems in binary terms through an inability to moderate and control, they simultaneously wished to distance themselves from the traditional, binary recovery language of the 'alcoholic' and 'addict'. Concern surrounded people 'thinking the worst' (Jane), and being labelled an 'alcoholic' when disclosing a sober identity was regarded as inevitable by many, as explained by

Claire when stating ‘that’s what everyone associates [sobriety] with... you’re an alcoholic, you go to AA’ (interview extract). This fear is further exemplified by Laura, who discussed how when she first ‘went sober [she] was just saying to people ‘Oh, it’s not because I have a drinking problem, I don’t have a drinking problem’. And I knew I did but I was so scared of people’s opinions’.

The label alcoholic was regarded as being highly gendered (e.g. ‘old man’), and almost exclusively associated with men. This masculinisation of problem drinking, reflects the dominance of AA narrative and its male centred origins, and suggests a wish by participants to distance themselves from the potential disproportionate shame women experience when labelled in this way (Burman, 1994; Davey, 2022; Gilbert et al., 2019). One participant, Katherine, engaged with AA and labelled herself in the interview as an ‘alcoholic’ with ‘the gene’, implying a medicalised notion of alcoholism as a - possibly inherited - ‘disease’ or medical condition for which the individual has no control. However, the potential gendered stigma and shame attached to sobriety is exemplified in how she made the decision not to use the label in her Instagram content. Another participant defined herself as a ‘recovering alcoholic’ but did not attend AA, and two described themselves as having been ‘functioning alcoholics’, but no longer identified as such. Whilst they appear to embrace AA labels to some extent, by speaking in the past tense they reject AA discourse that frames the alcoholic identity as fixed even when abstinent.

Women actively used their online presence to challenge these popular AA understandings of problematic use, and all considered their content as countering the ‘alcoholic’ ‘rock bottom’ stereotype through creating alternative narratives of sobriety and problematic drinking. For example, Heather explained how ‘the purpose of [her] account is to...I guess educate people to realize that alcohol problems come in different shapes and sizes’. As discussed above, one way through which negative identities were rejected was through discussing and promoting problematic alcohol use as ‘a spectrum’ and drawing attention to ‘grey area drinking’ in order to appeal to a broader audience and reiterate the message that women do not need to experience a ‘rock bottom’ before changing their drinking practices. A phrase that has gained traction in popular media and ‘quit lit’ (Park, 2018), ‘grey area drinking’ can be defined as a term that seeks to challenge a clear binary distinction between ‘normal’ and ‘problem’ drinkers. Rather than adopting a ‘black and white’ approach to alcohol consumption, an acknowledgment of the ‘grey’ area in between two extremes recognises that those who consume even a ‘moderate’ amount of alcohol and do not meet any criteria for ‘dependence’ may still (a) experience harms and (b) benefit from changing their consumption practices or drinking more ‘mindfully’. In interviews, participants explained how ‘grey area drinking’ was a style of alcohol use that was often prolonged due to drinking being judged as unproblematic and ‘not that bad’ (Jane) relative to the alcoholic stereotype. Some promoted sobriety as a solution to such drinking, for example Claire, who posted that she ‘used to envy ‘normal drinkers’ but now I would hate to be stuck living completely in-denial in the ‘grey area’ of an alcohol dependency’. She used the AA term ‘normal’ drinker but rejected binary categories by acknowledging how ‘normal’ people who may drink less than AA stereotypes, can also have a problematic relationship with alcohol; as a result, there is a distinct blurring and messiness between ‘normal’ drinking and ‘grey area drinking’ here.

Others defined ‘alcohol dependency’ as ‘being mild/moderate/major’, explaining how they were ‘alcohol dependent’ but how that didn’t mean ‘it was major and [that] I drank all day or even every day, that didn’t mean I was at rock bottom and needed a medical detox - but it did mean it took up a lot of my thoughts and impacted negatively on my life’ (Samantha, online post). In contrast to popular stereotypes of problematic alcohol use, which they felt focussed on drinking ‘in the morning’, ‘physical dependency’ and withdrawal, they positioned themselves as being able to control the context (e.g. time of day) of their drinking, despite being unable to moderate. For example, Samantha elaborated on her posts and explained in the

interview how she ‘didn’t need to drink a bottle of vodka to walk out the house but by [the] time four o’clock came I needed to have wine and wine happens every night. Yeah. Two or three bottles of wine and I’d be absolutely fine it wouldn’t even touch the sides’. Here she distances herself from the stigma and shame attached to these common AA based representations, whilst still admitting to an amount of consumption that might be labelled as ‘problematic’, and well above national guidelines. Participating in the social media community thus allowed participants to challenge binary distinctions between alcoholic and normal drinking identities and practices, and gain and offer support to other women through alternative – and more nuanced – framings of problematic use. At the same time, participants were able to express relative agency and control over drinking and avoid the shame, stigma and negativity that were felt to result from AA discourses and identities.

‘YOU can only drag yourself out of this hell hole’: reclaiming agency and regaining control of the feminine self

In interviews and online posts participants discussed how an inability to control and moderate their drinking had led to various negative experiences and impacts, such as poor mental health, relationship strain, feelings of embarrassment and shame, and vulnerability. Reflecting AA discourse, abstaining from alcohol was thus viewed as the most effective way of reclaiming a sense of agency and control over drinking and their everyday lives and identities, through preventing negative experiences and the problematic identities alcohol use was felt to create (Nicholls, 2021; Rankine, 2020):

‘YOU can only drag yourself out of this hell hole and it’s probably going to be the hardest thing you’ve ever done; but at least the feelings of shame might slowly start being replaced with feelings of liberation and pride. Just imagine that’.

(Claire, 3 month sober, online post)

‘Don’t allow yourself to be more of a victim than you already are. I made this mistake for years. “Why me? You don’t understand. It’s not fair”. And as much as these thoughts and feelings were valid, I lived by them to the extent that I refused to take any responsibility. Responsibility is how you stop yourself from becoming one of life’s victims...The second I decided to take responsibility life changed. Life got better. Life improved’

(Susan, one year sober, online post)

As shown in Claire’s online post above, the way in which participants framed gaining control through sobriety reflected AA discourses of empowerment (‘liberation and pride’) through abstinence, and the framing of drinking as ‘hell’. However, she omitted the AA discourse of surrendering to a higher power and instead used neo-liberal framing of individual responsibility by placing emphasis on the ‘YOU’, with the effect of rejecting powerlessness and attributing responsibility to the individual. Susan also posted about the importance of what she viewed as taking ‘responsibility’ to prevent ‘yourself from becoming one of life’s victims, and in turn making ‘your life better’. Others (Jane) even discussed the control sobriety provided as feeling like ‘you have a super power’, in that it led to self-acceptance and empowerment, through being ‘fully present’ and not ‘experiencing, the shame, the guilt, the regret, the blackouts’. Again, the reclaiming of agency is emphasised, but without reference to any assistance of a higher power. Moralistic framing, which reflects both AA and neoliberal discourse of out-of-control drinking as a moral failing, is also at play, through a focus on ‘shame’ – itself a highly gendered emotion (Rankine, 2020).

The relationship between alcohol use and mental health, mainly depression (including post-natal) and (social) anxiety, was discussed by all participants, with many citing a desire to gain control over their mental health as the main reason for abstaining (e.g. ‘My mental health took a pretty significant dip’, Lisa, 1 year sober; ‘My mental health had taken a turn’, Susan). However, discussions around anxiety predomi-

nantly surrounded gaining control over drinking to prevent feelings of shame, embarrassment and regret that they recalled as resulting from the behaviours they had engaged in when intoxicated. This fear was commonly referred to as ‘hangxiety’, a concept defined as feelings of increased anxiety or shame following drinking and during hangover (Marsh et al., 2019). The term was regarded as one example of the ‘new language in the sober community’ (Jane, interview extract), and was commonly discussed with reference to blackouts, whereby participants could not recall sections of time during periods of drinking. These were a common feature of all participants’ past drinking experiences with many recalling blacking out regularly, and the resultant loss of control over their actions and memory loss causing anxiety (Nicholls, 2021).

The behaviours that caused regret and concern when intoxicated and blacking out were gendered, and the concern they created reflected the long-standing judgements placed on women, and the wider gender double standards and inequalities that exist within society. They discussed concerns regarding having ‘said the wrong thing’, being ‘loud’, ‘violent’ and generally behaviour deemed undesirable such as ‘making a complete twat of yourself’ (Claire) and having ‘your knickers halfway down your ankles in the street having a piss, it’s not very sexy’ (Laura). These anxieties centred on a loss of feminine control; the unfeminine body is frequently depicted as excessive, a ‘mess’, out of control or even ‘grotesque’ (Griffin et al., 2013; Nicholls, 2019). Sobriety became a way to re-establish control over the body and appearance, sometimes quite literally (for example through weight loss). Posting ‘before’ and ‘after’ images on social media charted improvements in appearance and documented an ability to bring the excessive body back under control. Such imagery showcased a more ‘feminine’ or conventionally attractive appearance and framed abstinence as a form of self-discipline that allowed them to meet the traditional and neoliberal expectations of respectable femininity (Gill, 2007). However, some expressed annoyance at this focus on improved appearance as a common aspect of online sobriety communities. For example, in line with body positive discourse, a key component of contemporary feminism, Macie, who defined herself as a feminist, explained to the researcher how some sober initiatives focus on ‘better skin, weight loss. It’s all still like based in physical beauty, rather than actually feeling better internally’. As such, she had made the conscious decision to omit this from their own online content, which she aimed to be empowering for women.

As shown in the extract from Abby below, some also judged themselves and expressed embarrassment for their experiences of engaging in sex when intoxicated which they labelled as ‘promiscuous’, in ways that reproduced the sexual double standards placed on women who drink to intoxication. At the same time, she also presented herself as vulnerable due to the risk of sexual assault and the implications of alcohol use on ability to consent sexually:

‘I was very promiscuous, so quite often I’d wake up next to people and not know who they were, how we got there, just one-night-stands, I’ve never been sexually assaulted. The issue of consent and alcohol is a different issue, but my drunk self consented. But at the same time, going to people’s houses, bringing strange people back to my house. That’s putting myself in a dangerous situation. I’d always wake up like really embarrassed’

(Abby, 3 years sober, interview extract)

Like Abby, who expressed having ‘put herself in a dangerous situation’, women attached a certain degree of individual responsibility and self-blame when reflecting on the previous vulnerable situations they had encountered, with some focussing on how ‘they’ had ‘got themselves’ into situations through their intoxication. In interviews, some expressed a subtle narrative of realisation that what had happened to them was not their fault and shifted the blame onto male perpetrators following their decision to become sober. For example, Samantha explained how it was ‘not my job not to get drunk, it’s their [men’s] job, not to...touch me’. However, they also discussed still facing a dilemma over whether women bear responsibility for instances where they were

sexually or otherwise physically endangered whilst drinking. For example, Samantha also noted how ‘it’s not women’s responsibility to keep themselves safe with alcohol or without alcohol. But also it’s my decision to have my eyes open to the world’.

The complexities of reconciling their lived experience of harm with their identities as sober, ‘empowered’ and ‘feminist’ women, thus created tension; they found themselves in a bind of trying to validate the feminist and neoliberal notion of agency and empowerment through drinking, with their reality of feeling empowered through gaining control of their personal safety through abstinence. Some even choose to ‘avoid’ talking about abstinence and safety in the community online to prevent backlash from other feminists, and there was little reference to this in their online posts. Such hesitancy could signal fears of undermining common fourth wave feminist ideology that embraces a woman’s right to drink and partake in nightlife, and calls for more vigilance to, and regulation of, male behaviour in these spaces, rather than focusing on women’s safety precautions.

Despite such hesitancy in discussing these issues, sexual assault was regarded as a common experience among women in the community, and as such, AA was not regarded as safe and inclusive due to the masculine and patriarchal dogma that had shaped it (see Sanders 2019). Victims/survivors were felt to be at risk of being triggered by the presence of men and the ‘thirteenth step’. As shown in the post below, online female centred communities were created and experienced as positive and safer alternative to AA spaces, where women could discuss these shared experiences:

‘I aimed to create a safe space where women could meet and talk to other women about drinking and I knew that would include sexual assault. I didn’t want straight men in the space. I wanted to host events so women could come together and dance without being groped, pulled or touched on the waist, and somewhere where women weren’t targeted when they are at their most vulnerable (Google: 13th stepping).

(Macie, four year sober, online post)

‘Obviously I’m the same, but I just feel like a different person’: establishing an authentic neo-liberal sense of self

In interviews and online posts, participants expressed how sobriety allowed them to discover an ‘authentic’ ‘sense of self’, in ways that reproduced both AA and neoliberal discourse (Irving, 2014; Nicholls, 2021). For example, Brenda remarked ‘Obviously I’m the same, but I just feel like a different person. It’s how I should have been, it’s your authentic self. That’s how I feel’. She framed alcohol as obstructing a sense of authenticity, with the ‘as they say’ highlighting how this discourse is common within the community, similarly to AA’s focus on the ‘true self’ (Duff Gordon and Willig, 2021; Irving, 2014; Morris, 2020; Rankine, 2020). Their drinking behaviour was also framed in gendered, moralistic terms, with some women noting how their drinking selves did not ‘align’ with their morals, suggesting a tension between the inauthentic drinking self and the more ‘authentic’ sober self that represents who participants feel they – in Brenda’s words – ‘should’ be. For example, posting online, Claire asked her followers whether like her, behaviour during blackouts, led to them ‘questioning everything you thought you knew about yourself and what you know your opinions and morals to be whilst sober’. Similarly, Melissa (4 years sober) discussed how when drinking she was:

‘shape shifting and morphing into all these different people...I was leading like a million different lives. It was hard to keep up with what persona I wanted to do, and then when you brought alcohol into the equation, well, my morals, like values, did not align. I would be a certain person when I was sober than a very different person when I’d been drinking’.

The behaviours she felt contradicted her morals centred around sexual activity, and reflected and reproduced the moral judgement placed on women's drinking and related sexual behaviour, as previously discussed. Again, references to sexual encounters were mostly absent from their online posts, which further highlights a desire by women to distance themselves from behaviours society deems unacceptable for women. Women were also able to distance themselves from the drinking related behaviours they deemed undesirable by making a distinction between their sober selves and their drinking and intoxicated selves. This was done by placing blame on alcohol for causing changes to their 'true' character in ways that positioned alcohol as a controlling and powerful substance (Nicholls, 2021; Rankine, 2020). Alcohol was also described as 'shape shifting' and 'morphing' the drinker into multiple different people, reinforcing its temporary and unstable nature (whilst the 'true' sober self is fixed, stable and endures underneath). As discussed by Nicholls (2021), this is common in AA and addictive narratives which state that without alcohol sober individuals are able to realise their 'authentic', 'true' and 'better' selves. Whilst the authentic self in a neoliberal context is typically crafted through one's consumption choices, here the authentic self is presented as being revived through non-consumption i.e. through self-surveillance and abstinence (Atkinson and Sumnall, 2018; Giddens, 1991; Harvey, 2007; Nicholls, 2021).

Many also drew on the feminised and classed notions of 'self-love' and 'self-care' (Davey, 2022; Riley et al., 2019), which reproduce neoliberal discourses of individual responsibility and consumption as defining features of wellness and health. However, some questioned the consumption based nature of this discourse, asking 'When do you practice self care, treating yourself or splashing out because you deserve, and when is it just a way to plaster over something deeper?' (Susan, one year sober). Others associated finding their true selves with the concept of finding oneself through 'spiritualism', which whilst focussed on the self, reproduced AA discourse regarding requiring the assistance of a higher power in maintaining abstinence (Humphreys, 2000; Rankine, 2020). For example, Claire discussed how women in the community often 'go on this sort of self discovery, development journey' and how the sober events she organises 'attract a lot of women who are sort of exploring like spirituality'. However, none of the participants specifically referred to a higher power in relation to regaining power, but instead focussed on their own ability and determination in ways that reproduced neoliberalisms focus on agency and self-discipline. For example, Macie explained how sobriety had given her 'more control over my life in terms of decisions and my emotions' and discussed alcohol use as masking the authentic self by encouraging her to 'do stupid stuff that was not me at all'. She further framed drinking and intoxication as inhibiting agency and control when stating how her drinking resulted in her 'giving away my power', and how in contrast since becoming sober 'everything is within my control and that feels quite empowering'. She went on to state that now that she had stopped drinking 'I'm in charge...rather than like letting alcohol run the show', reinforcing AA discourse of control and agency through abstinence, whilst emphasising her own agency in a way reminiscent of neoliberalism.

Sobriety was also discussed as having freed up time ('We CAN take back control and never waste a precious day again!!', Heather, online post), head space ('being more present') and resources ('the amount of money that's it saved me') for self-discovery in ways that were more 'productive' and 'empowering'. Thus, non-drinking provided the opportunity to better meet the neoliberal expectation of productive citizenship (Nicholls, 2021). Despite this resistance to commercial pressure and rejection of alcohol consumption as a marker of their neoliberal feminine identities, they also engaged in alternative consumption-based practices to construct a new sense of self (Nicholls, 2021). This included the consumption of NoLo alcohol products that were 'aesthetically pleasing' and displayed on social media ('9 times out of 10 I'd probably be putting it on my Instagram', Lisa) to construct femininity through the symbolic meaning attached to specific drinks in the same way as women who

drink (Atkinson et al., 2022). The use of these products is heavily promoted and marketed in online sobriety communities, including by some participants in their role as influencers. This reflects the importance of consumption to identity making under neo-liberalism, and the market based nature of Instagram in which consumer products are promoted through the online performance of femininity. Others discussed spending money saved by not drinking on activities such as yoga and exercise classes as a form of 'self-care', attending sober events (e.g. afternoon teas, yoga retreats, sponsored NoLo tasting events) where they could socialise with other sober women 'like them', and in enhancing their future stability by investing in the housing market as first time buyers. Thus, whilst they rejected alcohol use and products as a marker of their identities, they created alternatives that 'still positioned them within dominant consumer markets' (Nicholls, 2021:779)

Discussion

This research provides important insights into how sobriety and non-drinking identities are framed, displayed and negotiated by women active within the 'positive sobriety' community on Instagram, as an alternative space to traditional peer led communities such as AA. Findings add to the existing literature (Nicholls, 2021) by shedding further light on how women drew on discourses of agency, control, individual responsibility and the authentic self in their accounts and online displays of non-drinking. These accounts both reproduced and challenged the dominance of AA narratives in popular understandings of problematic alcohol use (Morris et al., 2022), and the broader co-existing and interwoven discourse of neo-liberalism that positions (alcohol) consumption as a defining feature of (feminine) identity making, and places emphasis on choice, individual control and responsibility.

Whilst 'traditional' recovery communities and groups such as AA are often perceived to be the sole option of support available in addressing a problematic relationship with alcohol (Khadjesari et al. 2019; Morris et al., 2022), social media-based sobriety communities are increasingly used by women to manage and seek support for problem drinking through abstinence from alcohol (Carah et al., 2015; Coulson, 2014; Nicholls, 2021). These online and social media spaces are similar to AA communities in that they are peer led and encourage a 'self-help' approach to self-defined problematic alcohol use, in turn also reproducing neoliberal approaches to health that focus on individual responsibility, agency and self-control (Duff Gordon and Willig, 2021; Rankine, 2020; Valverde and White-Mair, 1999). However, participants in the current study involved in online communities simultaneously reproduced and challenged the discourses of both AA and neoliberalism.

Firstly, they critiqued but also applied the false binary of 'alcoholics' and 'normal' drinkers and rejected the notion of 'rock bottom' and the 'stereotype of the park bench alcoholic'. This narrow masculine stereotype was positioned as failing to capture their own and others' relationship with alcohol and they highlighted the negative impact such discourse can have on support seeking (Davey, 2021; Morris et al., 2022). They instead defined problem drinking as a spectrum, adopting terms such as 'grey area drinking' to recognise the ambivalent and difficult relationships many consumers may have with alcohol without ever reaching a 'rock bottom'. In this way, those within the social media community may seek to 'sell' (sometimes quite literally) the virtues of sobriety or moderation / mindful drinking to as broad an audience as possible; arguably most consumers could be positioned as 'grey area' drinkers who all exist somewhere on a spectrum of alcohol consumption. Indeed, participants were inclusive – at least in principle – not just of those 'choosing' full abstinence but also the sober curious or those looking to drink more 'mindfully'. This recognition of a continuum of use and harm more readily fits with the definition of alcohol use disorders (AUD), a broader conceptualisation of 'problem drinking' applied to anyone regularly drinking above lower risk levels (Morris et al., 2022).

Yet whilst sobriety/ mindful drinking was encouraged and promoted as a lifestyle for all, participants placed themselves on the more prob-

lematic end of the spectrum, whilst still carefully distinguishing themselves from those with a physical dependence. In ways that reflected AA discourse, they framed themselves as unable to moderate, and predominantly promoted complete abstinence as the most effective way of reclaiming a sense of agency and control over drinking, their mental health and feminine identities (Nicholls, 2021; Rankine, 2020). Thus, participants appeared on the one hand to widen the definition of problem drinking beyond more severe characterizations of alcohol problems and the notion of 'alcoholism', promoting a broader range of 'solutions' including moderation or mindful drinking. Yet, on the other hand, they actively distanced themselves from moderation strategies, positioning full abstinence as the only option for them personally and reinforcing some binary distinctions between 'normies' and those who cannot drink in moderation. Such findings may highlight tensions around how some sober women navigate online communities. The need to present as 'authentic' in telling one's own story of complete abstinence must be balanced with crafting a particular brand and image (one that may include selling products or services to those who wish to adopt what they perceive as more 'responsible' or 'mindful' patterns of drinking rather than complete abstinence (Morris et al., 2022; Witkiewitz et al., 2020)).

Secondly, the AA narrative of surrendering to a 'higher power' was rejected, and instead women placed emphasis on the self in reclaiming agency, rejecting powerlessness and gaining a sense of empowerment through neoliberal notions of individual responsibility. Gaining a sense of empowerment was felt to be particularly important to women who through participation in a female centred social media community were united as a collective in the face of common risks and experiences (e.g. risk of sexual violence, shame and stigma regarding drinking, intoxication). Such spaces were favoured compared to AA, which was regarded as a male-dominated space, as problematic for women through a focus on powerlessness, and as a context that fails to recognise women's specific gendered experiences (Batho, 2017; Davey, 2021; Sanders, 2018). The behaviours and risks recalled as resulting from drinking and intoxication were highly gendered, and their wish to prevent and distance themselves from them reflected, and at times reproduced, the long-standing judgements placed on women and the wider gender double standards and inequalities that exist within a neo-liberal society that calls for self-control, responsibility and respectability (Davey, 2021; Nicholls, 2021). For example, they wished to prevent the risk of sexual violence through remaining in control through abstinence, in ways that at times reproduced victim blaming narratives, but at the same time created a sense of empowerment. Moreover, the sense of shame and embarrassment experienced over their behaviour when drinking (e.g. loudness, aggression, sexual promiscuity) and discussions of how their drinking selves did not 'align' with their morals, reflected AA discourse that frames drinking in moralistic terms and abstinence as a form of 'self-betterment' (Heyman 2009; Batho, 2017; Morris et al., 2022), as well as echoing neo-liberalism's focus on the individual's responsibility to make the 'right' choices and become 'responsible citizens' (Robert, 2016). This was also evidenced through women's claims that sobriety had provided the time, head space and resources needed to effectively and productively 'work on the self', for example through engaging in alternative consumption based practices (from NoLos to wellness activities). In this neoliberal context, the anti-consumption practices of non-drinking women thus enabled identification of new identities that remained intrinsically bound up with consumption and the market (Nicholls 2021).

Lastly, a focus on finding the authentic self further reflected AA's focus on revealing the true self through a lifelong commitment to abstinence, whilst reproducing neo-liberal self-care narratives that promote the creation of an 'authentic self' through control and surveillance (Davey, 2021; Giddens, 1991; Harvey, 2007; Nicholls, 2021). As discussed, participants rejected AA's focus on achieving a true sense of self with the aid of a 'higher power' (Alcoholics Anonymous, 2001; Humphreys, 2000; Rankine, 2020), instead emphasising the role of agency and choice in the crafting of a more authentic self and way of living. However, building on the point mentioned above around

authenticity on social media, women may experience a tension between presenting honest and heartfelt accounts of sobriety and engaging with a social media platform that demands 'neoliberal self-regulation' (Mahoney, 2022), self-policing of one's personal (and sometimes professional) brand and image and – for some – a need to present and 'sell' a particular lifestyle. The pressure to be honest and 'real' sits alongside a need to present a carefully manufactured self-image where every element (from imagery to text to hashtags) must be curated and considered. Little space is left for depictions of the 'lows' of sobriety or discussion of thorny or contentious issues (as illustrated through many participants' refusal to discuss topics such as sexual assault via their online platform).

Whilst these findings enhance understandings of the ways in which women both reproduce and challenge dominant AA and neoliberal narratives in online sobriety spaces, the small sample means that the findings cannot be generalised to all women who embark on sobriety and/or participate in the positive sobriety community on Instagram. The online community analysed was female focussed and did not provide insight into the experiences of men and other genders. It is important that future research explores the intersectional experiences of those participating in these communities, to gain insight into the intersecting inequalities at play. It is also important to note that the kinds of practices discussed here may not be equally available and accessible to all. As suggested by Robert (2016), and highlighted by Davey (2021), a focus on self-care and self-improvement may appeal to individuals who are better equipped to meet the "responsibilised" demographic of the ideal neoliberal subject, and these tend to be white, middle class and heterosexual. This reflects wider concerns recognised by participants themselves i.e. around the middle-class, hetero-and-cisnormative nature of the online sobriety communities. Time, resources and capital may be required to enact 'responsible' neoliberal identities. At the same time, the privileging of heterosexual and cisgender people as the normative standard reproduces power structures (Bauer et al., 2009) which may be exacerbated by the community's focus on traditionally feminine (i.e. 'girly') content and fixed use of binary gendered terminology. Such communities should therefore broaden their appeal and consider how a focus on alternative consumption or a hetero-and-cisnormative foundation may indirectly exclude those without the resources and structures in place to participate in these communities in their current form. Moreover, the complexities involved in LGBTQ+ people navigating sobriety in (hyper)feminized online spaces suggests specific communities that are tailored to their diverse needs are warranted (Davey, 2021).

Conclusion

This paper contributes to emerging research on the nature, benefits and limitations of online 'positive' sobriety communities and their gendered nature (e.g. Davey, 2022; Nicholls, 2021). It further contributes to research (e.g. Nicholls, 2021) exploring recent changes in societal discourse that has begun to normalise alcohol-free lifestyles, and how this co-exists alongside traditional recovery discourses that embed sobriety in 'addiction' narratives, and neo-liberal discourses of health that reflect industry promotion of individual responsibility. It found that the online positive sobriety community has extended and developed discourse around problematic alcohol use and sobriety, in ways that both challenge and at times reproduce traditional AA and abstinence-based discourse, and gendered understandings of (problematic) alcohol use.

These online spaces were community led and were felt to provide a safe, more accepting and relatable space for many women who may not feel that they 'fit' traditional AA concepts of 'addiction' and the masculine origins of such approaches. By failing to moderate their alcohol use, women were unable to meet the neo-liberal demands of responsible moderate drinking, and in response reproduced AA discourse of abstinence as the most effective way of controlling and gaining agency over their drinking. They both reproduced and challenged binary notions of alcohol use that distinguish between 'normal' and 'out of control' drinkers, and rejected and distanced themselves from AA 'rock bottom'

stereotypes of the 'alcoholic'. They expressed agency and control over their drinking relative to AA stereotypes to avoid the (gendered) shame and stigma that can result from AA conceptualisations, provided alternative definitions of problem drinking as a spectrum with a 'grey area', and promoted moderate and mindful drinking as a lifestyle for all.

This recognition of a continuum of use and harm corresponds with a non-binary definition of AUD and other harms (Morris et al., 2022). Promotion of moderation as a strategy to reduce drinking may help to create a more inclusive space for peer support than AA based approaches. At the same time, sober women in online communities may need to negotiate a tension between a desire to tell their own 'authentic' story of full abstinence whilst at the same time also supporting and encouraging those who wish to drink more 'mindfully'. These tensions around presenting an 'authentic' sober self may be further exacerbated by the nature of online platforms such as Instagram, which demand presentation of a carefully curated 'self'. As a result, such platforms present both challenges and opportunities for women as they (re)negotiate sober identities through the entangled lenses of both AA and neoliberal discourses.

Further research should aim to gain more understanding of the role social media plays in "doing" sobriety and non-drinking, how this is done by people of different genders, the intersectional experiences of those participating, and how they can be made more equally available and accessible (Davey, 2021). Research should also aim to identify opportunities to broaden narratives around problematic alcohol use that both incorporate and go beyond abstinence-based accounts, and that consider how these narratives can be incorporated into lay and professional discourse in ways that are inclusive and reduce the risk of reproducing (gendered) stigma. Understanding how positive sobriety narratives can be adapted, and online spaces used, to create narratives and environments that can better resonate with drinkers who do not interpret 'recovery' as full abstinence (Morris et al., 2022), whilst still appealing to those that do, is important.

Ethics approval

The authors declare that they have obtained ethics approval from an appropriately constituted ethics committee/institutional review board where the research entailed animal or human participation.

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Declarations of Interest

The authors declare that they have no known competing financial interests or personal relationships that could have appeared to influence the work reported in this paper.

CRediT authorship contribution statement

A Ma Atkinson: Conceptualization, Methodology, Investigation, Formal analysis, Funding acquisition, Project administration, Supervision, Writing – original draft, Writing – review & editing. **B.-Ra. Meadows:** Investigation, Project administration, Writing – original draft, Writing – review & editing. **Eb. Nicholls:** Writing – original draft. **H.-Ra Sumnall:** Supervision, Writing – original draft.

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