RECREATION, SELF-THERAPY AND
ADDICTION: DISCURSIVE CONSTRUCTIONS
OF DRINKING TO INTOXICATION IN FOCUS

GROUP TALK

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of Philosophy of
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I hereby declare that the work herein, now submitted as a thesis for the degree of Doctor of Philosophy of the Charles Darwin University, is the result of my own investigations, and all references to ideas and work of other researchers have been specifically acknowledged. I hereby certify that the work embodied in this thesis has not already been accepted in substance for any degree, and is not being currently submitted in candidature for any other degree.

Date: 14 March, 2011

Signed:
To my mother, without whom none of this would have been possible… To my wonderful husband Hector for his lasting support and enduring patience, and to Isabella, Filippo and Moises with apologies regarding my intermittent absence in the past few years… I promise to be more completely devoted to you from now on.
# Table of Contents

Abstract ................................................................. xi

Acknowledgements............................................................ xiii

1. An Introduction to the Study ........................................... 1

2. Background..................................................................... 9
   2.1. The “Pathologisation” of Drinking......................... 17
   2.2. Contradictory Societal Messages.......................... 20
   2.3. The Youth “Perspective”.................................... 24
   2.4. A Constructionist Critique................................. 28
   2.5. Discursive Approaches to Alcohol Consumption........ 31
   2.6. Theoretical Framework........................................ 40
       §2.6.1. Action Orientation...................................... 41
       §2.6.2. Situation.................................................. 45
       §2.6.3. Construction............................................. 48
   2.7. Research Questions............................................. 53

3. Method and Analytic Technique ...................................... 57
   3.1. Focus Groups as Methods of Data Generation......... 59
       §3.1.1. The Participants: Recruitment....................... 63
       §3.1.2. The Participants: Description....................... 71
       §3.1.3. The Logistics............................................ 77
   3.2. Discursive Analysis: “Sexing the Chicken”............ 86
       §3.2.1. Transcription........................................... 87
§3.2.2. Further Analysis .................................................. 92
§3.2.3. Selecting a Focus and a Corpus of Excerpts ...... 95
§3.2.4. Immersion, Coding and Patterns ....................... 100
§3.2.5. Exceptions and Negative Case Analysis ........... 103

3.3. Constructions of Drinking to Intoxication .............. 104

3.4. Conclusion ............................................................... 106

4. Setting the Scene ......................................................... 109

4.1. Constructions of the Focus Groups’ Purpose .......... 111
  §4.1.1. Written Constructions ................................. 112
  §4.1.2. Verbal Constructions ................................ 116

5. Drinking to Intoxication as Recreation .................. 127

5.1. Enquiring about Intoxication: A story of drinking heaps.... 130
  §5.1.1. “Let’s play eights” ....................................... 136

5.2. Necessity vs. Enjoyment of Intoxication ............... 144
  §5.2.1. Intoxication as Necessary ............................ 148
  §5.2.2. The Construction and Importance of Control ... 152
  §5.2.3. Repertoires as Double Edged Swords .......... 158

5.3. Intoxication as Part and Parcel of an Occasion ......... 163
  §5.3.1. Alcohol-Related Harm and The Good Story .... 171

5.4. Concluding Comments .............................................. 174

6. Drinking to Intoxication as Self-Therapy ............... 179

§6.1.1. Letting Off Steam .............................................. 190

§6.1.2. Justifying Intoxication .................................... 194
<table>
<thead>
<tr>
<th>Section</th>
<th>Title</th>
<th>Page</th>
</tr>
</thead>
<tbody>
<tr>
<td>6.1.3.</td>
<td>Therapy and Escape</td>
<td>199</td>
</tr>
<tr>
<td>6.2.</td>
<td>Questioning Intoxication as Self-Therapy</td>
<td>205</td>
</tr>
<tr>
<td>§6.2.1.</td>
<td>Responding to Subtle Criticism</td>
<td>214</td>
</tr>
<tr>
<td>§6.2.2.</td>
<td>Drowning Sorrows</td>
<td>218</td>
</tr>
<tr>
<td>6.3.</td>
<td>Stress and Drinking: Explicitly Excusing DTI</td>
<td>222</td>
</tr>
<tr>
<td>§6.3.1.</td>
<td>Managing Problematisation</td>
<td>227</td>
</tr>
<tr>
<td>§6.3.2.</td>
<td>Excusing DTI</td>
<td>231</td>
</tr>
<tr>
<td>6.4.</td>
<td>Concluding Comments</td>
<td>236</td>
</tr>
<tr>
<td>7.</td>
<td>Drinking to Intoxication as Addiction</td>
<td>243</td>
</tr>
<tr>
<td>7.1.</td>
<td>Addiction as Stigma</td>
<td>246</td>
</tr>
<tr>
<td>7.2.</td>
<td>Addiction as an Excuse</td>
<td>247</td>
</tr>
<tr>
<td>§7.2.1.</td>
<td>DTI as Symptomatic of Alcoholism</td>
<td>247</td>
</tr>
<tr>
<td>§7.2.2.</td>
<td>DTI as Symptomatic of Addiction</td>
<td>262</td>
</tr>
<tr>
<td>7.3.</td>
<td>An Exception?</td>
<td>276</td>
</tr>
<tr>
<td>7.4.</td>
<td>Concluding Comments</td>
<td>292</td>
</tr>
<tr>
<td>8.</td>
<td>Conclusion</td>
<td>301</td>
</tr>
<tr>
<td>8.1.</td>
<td>Repertoires are a Joint Effort</td>
<td>305</td>
</tr>
<tr>
<td>8.2.</td>
<td>Independence of Repertoires</td>
<td>306</td>
</tr>
<tr>
<td>8.3.</td>
<td>Flexibility and Variation</td>
<td>308</td>
</tr>
<tr>
<td>8.4.</td>
<td>The Acceptability of DTI</td>
<td>315</td>
</tr>
<tr>
<td>8.5.</td>
<td>Generalisability</td>
<td>317</td>
</tr>
<tr>
<td>8.6.</td>
<td>Possible Limitations</td>
<td>321</td>
</tr>
<tr>
<td>8.7.</td>
<td>Implications</td>
<td>324</td>
</tr>
</tbody>
</table>
Appendix A: Six Month Research Proposal ................................. 363
Appendix B: Plain Language Statement ........................................ 387
Appendix C: Letter of Confirmation .............................................. 391
Appendix D: Consent Form .......................................................... 395
Appendix E: Facilitator Guide ...................................................... 399
Appendix F: NT News Story ......................................................... 405
Appendix G: Transcription Symbols ............................................. 409
ABSTRACT

Binge drinking among young people in Australia is an “epidemic” (Rudd, 2008 p 1). That is the Australian federal government’s official stance, although similar constructions of youth alcohol consumption as pathological are common in other countries. Such constructions are undoubtedly based on research such as that which suggests that binge drinking tends to be the norm among Australian youth (Australian Bureau of Statistics, 2006). Alongside pathological constructions, contradictory societal messages linking drinking with pleasure and hedonism are often juxtaposed (Measham & Brain, 2005; O’Malley & Valverde, 2004; Szmigin et al., 2008). Whilst it is clear that societal messages regarding drinking are contradictory, what is unclear is how drinkers themselves construct their consumption. In this study, eight focus groups were conducted with 30 young people to uncover some possible interpretative repertoires that drinkers themselves use to construct personal behaviour that experts might label “binge drinking” or drinking to intoxication (DTI). Three main interpretative repertoires were recurringly used by participants. These were labelled: Recreation, Self-Therapy and Addiction. Each repertoire was examined using the principles of Discursive Psychology (Edwards & Potter, 2001) to illustrate its deployment and use, the alternatives it was constructed against, as well as the problems that it could present and their resolution. The repertoire of recreation allowed the construction of DTI as a pleasurable pastime. The repertoire of self-therapy facilitated the construction of DTI as a response to a stressful event. Lastly, the repertoire of addiction positioned repeated DTI as symptomatic of what May (2001) has called a “hypothesised pathological
mechanism” (p. 385). Comparisons with other literature indicate that similar constructions are often used to construct involvement with practices that may be deemed “risky” such as smoking and self-injecting. These findings have important implications for the communication of public health messages to young people.
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1. **AN INTRODUCTION TO THE STUDY**
“We’re the biggest drunks… in the WORLD” (Calacouras, 2009 p.1). So announced the front page of “The Northern Territory News”, the daily newspaper with the highest circulation in the Northern Territory (NT) of Australia, on Monday June 15, 2009. The story, published on the second page of the paper, reported on the latest alcohol consumption figures released in a research report by the Menzies School of Health Research. It opened with the following line: “Territorians are drinking the Irish lads under the table and have become the world’s undisputed booze swilling kings” (Calacouras, 2009 p.2).

The report that sparked the news story provides a succinct construction of the issue of alcohol consumption in the NT. Senior, Chennall, Ivory and Stevenson (2009 p. 30-31) wrote that

Alcohol misuse is a problem for the Northern Territory as a whole, with Territorians in 2005/2006 drinking 14.9 litres of absolute alcohol (Lal) per person by those aged 15 years and over (NT Dept of Justice 2009). To put this in an international perspective, the World Health Organisation (WHO) reported a global average of 5.1 litres of pure alcohol per adult (15+ years) per year (WHO 2004). The apparent alcohol consumption levels of the Northern Territory are among the highest in the world, exceeding those of the countries who were rated as the highest consumers in the world in 2003, such as Ireland at 13.7 litres per year, and the Czech Republic at 13.0 litres per year (WHO 2008).

Both the newspaper article and the research report concur on one issue: an elevated level of alcohol consumption in the NT, in comparison with other geographical areas. The difference is that where the newspaper manages to convey a sense of pride in the extent of alcohol consumption reported for the NT, the research report unequivocally positions alcohol consumption, in particular its “misuse”, as “a problem for the NT” (Senior et al., 2009 pg. 30).
The juxtaposition of these vastly different constructions of the same phenomenon concretely demonstrates the point of interest that sparked this research. On the one hand there is a construction, most frequently associated with health professionals and alcohol experts, of alcohol consumption and particularly intoxication as a problem, especially among young people. On the other hand, there is another construction, more frequently associated with the lay public and in particular young drinkers themselves, of alcohol consumption including heavy consumption as a nonproblematic activity. Whilst most Australian alcohol research proposes the view of drinking and intoxication, especially among young people, as signs of pathology (Moore, 2002), little if any Australian research has sought to investigate the construction of alcohol consumption, and in particular, drinking to intoxication (DTI) among young people.

On a personal level, the thing that sparked an interest in such contrasting constructions of alcohol consumption was the observation of the different treatment of alcohol, and drinking, between Italy and Australia. Having spent my childhood in Italy, prior to moving to Australia, one of the peculiar differences that impressed me during my teenage years was the diverse treatment and conceptualisation of alcohol between my Italian and Australian friends. In particular, where alcohol was never a big deal in my home country, I was at a loss as to understand the determination to get drunk among my Australian friends. This puzzlement undoubtedly shaped the topic of this thesis.

The aim of this research, from its inception, has been to formulate an understanding of young people’s constructions of DTI. Initially, the intention was to conduct research that would contribute to greater understanding of “the problem” of
alcohol consumption and intoxication among young people (see the Sixth Month Research Proposal reproduced in Appendix A). To that end, focus groups were enlisted as a way to “tap into the representations (of binge drinking) operating at the microgenetic level through conversation, and to further explore these with the use of questionnaires” (Appendix A lines 151-153). However, as both the research and exploration of the analytical approaches to focus group talk progressed, the focus group data was reconceptualised from a possible source of participants’ “representations” to “an arena in which one can identify and explore the participants’ interpretative practices” (Potter, 1996c, pp. 134–135).

This reconceptualisation of the gathered data stemmed from an unshakable fascination with qualitative methods and Discursive Psychology in particular, spurred by avid and extensive reading about different approaches to focus group data. Thus, despite coming from a strongly quantitative background and the absence of a supervisor with appropriate methodological expertise at my university, I decided to conduct entirely qualitative research. This is how it came to be that what started out as a mixed method study, with a strong quantitative orientation, turned into discursive research. The aim of this research was thus redefined as the elicitation and study of focus group speakers’ constructions of intoxication, in particular, their constructions of personal instances of DTI. How this was achieved is the subject of the following seven chapters.

Chapter 2 of this thesis introduces the background to this study in more detail. In particular it discusses the “problematisation” of drinking which has dominated alcohol research and policy for some time in this country, culminating in the former Labour Prime Minister’s launch of the Federal
Government’s “National Binge Drinking Strategy” on March 10, 2008 (Rudd, 2008). This constructed the issue of concern as a “binge drinking epidemic among young Australians” (p.1). Despite the far reach of the “problem” view of alcohol consumption, a recent wave of research has begun to examine alcohol consumption from the drinker’s perspective. Chapter 2 includes a critique of this mostly qualitative research. The chapter then introduces Discursive Psychology as a useful yet underutilised means of exploration of constructions or “interpretative repertoires” (Wetherell & Potter, 1992) that people may draw on to talk about personal experiences of DTI.

The following chapter, Method and Analytic Technique, outlines the process of data generation engaged in for the purposes of this thesis. It includes a discussion on the particular use of focus groups as part of this research, which differs from more traditional usage. It then illustrates the processes used to recruit participants, as well as the logistics of the focus groups, such as where they were held and how they were recorded. The second part of this third chapter briefly deals with some analytical concepts, including issues relating to transcription and a constellation of analytical procedures engaged in during analysis.

Chapter 4 builds on the previous chapter to paint a still richer portrait of the background to the study by rendering a more adequate picture of the focus group “set up”, as intended by Potter and Hepburn (2005 p. 281). It discusses the grounds on which participants were recruited as well as how the research or the “task understanding” was constructed for them. Together with the Method and Analytic Technique chapter, Chapter 4 provides a context and basis for understanding the
findings of this research. It concludes with a brief introduction to the detailed analysis reported in subsequent chapters.

My analysis of young people’s focus group talk about their personal experiences of DTI revealed that there are at least three different interpretative repertoires that participants used to construct such an event. These were labelled “Recreation”, “Self-Therapy” and “Addiction”. Each repertoire is analysed, illustrated and discussed in a separate sequential chapter. Thus Chapter 5 illustrates how focus group participants constructed their DTI as “Recreation”. It details how participants talked about getting drunk as a form of entertainment and what functions that serves in interaction. That chapter, like the following two, also addresses the “double edged” nature of the repertories which draws attention to how repertoires, whilst being useful, can also create problems of self-presentation for the speakers using them, in so much as they can be used in conflicting manners.

Chapter 6 argues that focus group participants also, at other times, constructed their DTI as “Self-Therapy”. In other words, it deals with how the presentation of DTI as restorative following a stressful event can be used to different ends. It discusses how, during the focus groups, the self-therapy repertoire was used at different times both to excuse personal behaviour as well as to criticise others’ consumption. The chapter also addresses the issue of what can happen when one’s consumption is criticised by another focus group participant. Chapter 7, the final results chapter, then examines how a personal pattern of repetitive DTI can be constructed as “Addiction”. In particular it shows how a construction of personal behaviour that was normally otherwise countered, could also, on other occasions, be harnessed to present the self in a favourable manner.
Following the three individual results chapters, the final thesis chapter brings together the major insights gained through the analysis of participants’ constructions of personal episodes of DTI. The Conclusion chapter notes the limitations of this research, suggests further research and discusses some of the implications of this study. Furthermore, by drawing on comparisons with widespread Western ideology as well as other research, it notes the prevalence of similarities between constructions of different behaviours that could be considered “risky”, such as “excessive” drinking and chocolate consumption as well as smoking.
2. BACKGROUND
Australia’s turbulent affair with alcohol began with the arrival of the first permanent European settlers (Midford, 2005; Room, 1988). From the use of rum as currency in the 1770s, to a pattern of consumption labelled “work and burst”, to the current widespread concern around “binge drinking”, alcohol, and more specifically the consumption of large quantities of it, has arguably played a prominent role in this country’s history (See Fitzgerald & Jordan, 2009 for more about the history of alcohol in Australia). More recently, the federal government released a “National Binge Drinking Strategy” in 2008 to target what it described as a problem of “epidemic” proportions, at least among the country’s youth (Rudd, 2008).

The government’s stance on alcohol reflects ongoing research on the extent of its use. This research includes indications of the resulting negative impact of alcohol on the country’s citizens, not to mention its finances. Overall, alcohol is the second largest cause of drug-related deaths and hospitalisations in Australia, after tobacco (Australian Institute of Health and Welfare [AIHW], 2005), with the bulk of this alcohol-attributable harm associated with the effects of intoxication (Chikritzhs et al., 2003). Alcohol is also a leading cause of deaths on Australian roads (Ridolfo & Stevenson, 2001), and indeed “the single leading cause of death for young adults in most developed countries” (Chikritzhs, 2007 p. 121). In financial terms the total social costs of alcohol for 2004/05 were conservatively estimated to amount to $15.3 billion, the majority being for tangible costs associated with such factors as lost productivity, road accidents and crime (Collins & Lapsley 2008).

A conservative estimate is that at least 80% of all alcohol consumed in Australia in 2001 put the health and safety of drinkers at risk of some form of harm (Chikritzhs et al., 2003). More recently, in 2007, the National Drug Strategy
Household Survey revealed that almost nine per cent (8.6%) of the population drinks at levels considered risky or high risk for both short-term and long-term harm according to the 2001 National Health and Medical Research Council’s Australian Alcohol Guidelines (AIWH, 2008). These guidelines defined risky/high risk consumption for short term harm to be any more than 7 drinks for males or 5 drinks for females on any one day, and risky/high risk consumption for long term harm to be any more than 5 drinks a day for males or 29 drinks a week, and 3 drinks a day for females or 15 drinks a week (National Health and Medical Research Council [NHMRC], 2001).

On the whole, young people (18-24 years) are the group most likely to drink at risky/high risk levels, at least for short term harm. Binge or “high risk” drinking is the statistical norm among young people in Australia. About one in five males and one in ten females in this age group had consumed alcohol at risky/high risk levels in the short term at least once a week in the 12 months prior to the 2004-05 National Health Survey (Australian Bureau of Statistics [ABS], 2006). Having noted that, the application of the latest NHMRC guidelines released in March 2009 (NHMRC, 2009) to future analyses will arguably paint a still more negative picture of the extent of alcohol consumption in Australia. These latest guidelines are less generous than the previously outlined 2001 guidelines. In fact the latter advise both men and women to drink no more than two drinks per day, to reduce their risk of health effects over their lifetime (NHMRC, 2009).

As noted in the previous chapter, the Northern Territory (NT) of Australia is characterised in particular by a disproportionately high level of alcohol consumption in comparison to other states and territories (Senior et al., 2009). Its adult per capita
consumption is consistently the highest in Australia (Senior et al., 2009). The proportion of the population, who drinks at levels considered to be a risk or high risk to health, is also highest in the NT compared to other parts of Australia (Whetton, Hancock, Chandler, Stephens & Karmel, 2009). Congruently, alcohol-induced harm in this part of Australia is not simply marginally higher, but drastically more extensive than in other parts of the country (Chikritzhs et al., 2003). The quantifiable cost of alcohol-related harm (Whetton et al., 2009), the rate of alcohol-related deaths and alcohol hospitalization rates (Pascal, Chikritzhs & Jones, 2009), as well as alcohol-related road fatalities (Chikritzhs & Pascal, 2004) are all higher in the NT compared to the rest of Australia. The bulk of these problems is largely associated with acute, short-term harm or with the effects of intoxication (Chikritzhs et al., 2003; Chikritzhs & Pascal, 2004; Pascal et al., 2009; Renouf & Townsend, 2004).

Discussions regarding drinking in the NT immediately raise racial issues. Despite indications that a large proportion of the population in the NT regards drinking problems to be strictly “Aboriginal problems” (Gray & Chikritzhs, 1999 p. 38; see also Alcohol and Other Drugs Program, 2000; Crundall, 2006), there is evidence to suggest otherwise. Researchers in the past have noted that even if the harmful levels of consumption amongst Aboriginal people could be magically reduced, “the NT would still have a significant alcohol problem” (Gray & Chikritzhs, 1999 p. 38). Recent estimates of the harms and costs of alcohol consumption in the NT show that, even when these are adjusted to exclude the Aboriginal population, the resulting figures are nevertheless concerning (Whetton et al., 2009).
Although exactly what is constructed as “the problem” varies across time and contexts, Martinic and Measham (2008) have pointed out that “concern regarding certain drinking behaviours among youth and young adults transcends countries, cultures and social classes and has for some time moved to the forefront of alcohol policy and preventions” (p. 1). With regard to Australia, Fitzgerald and Jordan (2009) noted that, since the beginning of European settlement, drinking has always been regarded by authorities as somewhat problematic in this country. A case in point is the federal government’s recent interest in what has been described as a “binge drinking epidemic among young Australians” (Rudd, 2008 p.1). This statement is evidence of the government’s official position on alcohol as a problem (at least for young people). However, even before this announcement topicalised the issue of alcohol consumption among young people, many researchers, health professionals and historians had argued binge drinking to be an issue of concern for Australia as well as a number of other countries.

“Binge drinking” is a term often loosely applied both in the media and in research publications to describe the rapid consumption of large numbers of drinks on a single occasion. The consensus amongst researchers, health care professionals, educators and other information providers is that binge drinking is a distinct pattern of consumption which differs from steady or moderate drinking (Engineer, Phillips, Thompson & Nicholls, 2003; Oei & Morawska, 2004). Increasing evidence from the social sciences suggests that binge drinking, as a distinct pattern of consumption, is associated with negative outcomes over and above those associated solely with volume of consumption (Ramstedt, 2002). Specifically, the physiological effects of regular, moderate drinking and episodic binge drinking appear to be markedly
different. For example, studies reviewed by Roereke and Rhem (2010), indicate the
importance of binge patterns of drinking or what they call “irregular heavy drinking
occasions”, rather than simply heavy drinking, as a contributing factor to ischemic
heart disease. They note that

Contrary to a cardioprotective effect of moderate regular alcohol consumption, accumulating evidence points to a detrimental effect of irregular heavy drinking occasions (>60 g of pure alcohol or ≥5 drinks per occasion at least monthly) on ischemic heart disease risk, even for drinkers whose average consumption is moderate (Roereke and Rhem, 2010 p. 633).

Despite the popularity of the term binge drinking both among researchers
and in the media, its exact meaning remains unclear. The use of the term binge
drinking has begun to create such confusion that in the 2009 Australian Alcohol
guidelines, the term binge was explicitly avoided (NHMRC, 2009). In general it is
possible to identify at least three different classes of definitions of binge drinking
based on their origin: clinical, social science-based and lay definitions. Clinical
definitions of a binge refer to a pattern of drinking leading to intoxication, usually a
solitary activity lasting several days (International Centre for Alcohol Policies
[ICAP], 2005). Social scientists and epidemiologists on the other hand generally
employ more precise quantitative definitions of binge drinking, based on the number
of drinks consumed in one occasion.

Despite some divergences in opinion, researchers predominantly
operationalise binge drinking as five or more drinks on one occasion, a definition
often referred to as the five plus measure (Jonas, Dobson & Brown, 2000; Lange &
Voas, 2001; Midanik, 1999; Schulenberg, O’Malley, Bachman, Wadsworth &
Jonston, 1996). Although the research literature does not provide a justification for a
singular focus on the cut-off point of five plus drinks, it is clear that this measure has
been useful in operationalising an otherwise ambiguous concept, allowing for its measurement and study.

In contrast to the social science definition of binge drinking, the way the term binge is used in popular parlance suggests a broader conceptualisation, possibly closer to the clinical definition which encompasses drinking to intoxication (DTI) and beyond. Essentially, the limited research on the popular concept of a binge generally suggests that lay understandings of binge drinking are aligned with drinking continuously, quickly and heavily without a clear indication of exactly what “heavily” might constitute (ICAP, 1997; MCM Research, 2004; NHMRC, 2001; Sheehan & Ridge, 2001). As Wechsler and Nelson (2001 p. 287 italics in original) note: “A more common definition of binge is a period of unrestrained, immoderate, excessive or uncontrolled self-indulgence”, a definition that does not consider time span or object of consumption.

Griffin, Bengry-Howell, Hackley, Mistral and Szmigin (2009) have noted that “this lack of consensus over what constitutes a binge has scarcely impinged on the force of the term in official discourses of youth excess” (p. 458). Whilst a number of academics have proposed several terms to replace binge drinking, such as “heavy episodic drinking” (Oesterle et al., 2004), “determined drunkenness” (Measham, 2006) and “extreme drinking” (Martinic & Measham, 2008), the term binge drinking continues to enjoy widespread prominence. Setting aside this semantic confusion, the shared, growing concern among researchers, health professionals and government officials over youth alcohol consumption seems to revolve around a pattern of drinking leading to intoxication (Mayock, 2004).
To some extent the recent concern over binge drinking among young people is part of wider community, policy and academic discourse marked by widespread adult anxieties about today’s young people. These concerns relate to how young people should be schooled, policed, housed, employed or prevented from becoming involved in any number of risky (e.g. binge drinking) practices (Kelly, 2000). Such concerns can also be understood as part of the currently mainstream public health perspective which scrutinises and criminalises individual unhealthy lifestyle factors for the welfare of the society as a whole, as exemplified in a recent Australian Bureau of Statistics publication on “lifestyle behaviours such as tobacco smoking, risky alcohol consumption, and obesity” (ABS, 2009 p. 1).

### 2.1. The “Pathologisation” of Drinking

It has long been noted that the public health perspective which dominates concerns about binge drinking has guided the majority of all alcohol research, especially within the social sciences (Moore, 2002). This view actively, and a priori, frames binge or heavy drinking (variously defined) as pathological and in need of remedy, emphasising the need for public action to modify or eradicate such behaviour (Gusfield, 1996). According to Workman (1998), the reason behind the prevalence of the public health perspective within alcohol research, which arguably continues today, is that “researchers tend to collect findings that support negative impact, and avoid studying ‘normal’ drinking behaviour devoid of negative consequences. Such continued study under the pathological frame only further entrenches the dominant ideology of the culture, which in turn provides authority to those studying alcohol in this fashion” (p. 8). The pathological view of alcohol and
its consumption has been thus promulgated, at least within Western psychological literature, mostly without an acknowledgement that there may be other ways of viewing drinking. Clearly however, there are. Other disciplines, like anthropology, have examined alcohol consumption from a less negative perspective, as a social practice.

In addition to the “pathologisation” of drinking in mainstream psychological research literature, a similar treatment of drinking is also observable in many governments’ alcohol policies (O’Malley & Valverde, 2004). Current alcohol policy in Australia is based on the harm minimisation philosophy which theoretically acknowledges possible benefits of drug use, whilst trying to ameliorate the associated adverse consequences. From this perspective, the extent of drug use is secondary in importance to the extent of possible harms. O’Malley and Valverde (2004) argue that although harm minimisation policies effectively normalise licit and illicit drug consumption, this does not necessarily translate, in practice, to a greater emphasis on the pleasurable aspects of drug use. In fact, most if not all information provided to substance users within this framework centres on the risks and harms associated with drug use. Moreover, discussions of motivations theoretically made possible within a harm minimisation perspective are often replaced by semi-coercive discourses of peer group pressure and advertising pressure to be countered by the building up of self-esteem or knowledge of risks.

Pleasure again is not mentioned or acknowledged both in government policies and the prevention strategies that stem from them (Bergmark, 2004; O’Malley & Valverde, 2004). In essence, whilst the public health model may theoretically facilitate the treatment of moderate drinking as nonproblematic, “there
is still a continuing silence in governmental discourses on pleasure as a ‘warrantable motive’ for the consumption of drugs or alcohol” (Griffin et al., 2009 p. 461).

In line with the Australian federal government’s stance on alcohol as a problem, public health campaigns present young people’s alcohol consumption as potentially harmful and young people themselves as in need of help and treatment (Griffin et al., 2009). The latest Australian binge drinking campaign released as part of the government’s binge drinking strategy is a good example (see http://www.drinkingnightmare.gov.au/). Its key tagline is “Don’t turn a night out into a nightmare”. This catchphrase constructs harmful consequences as potentially resulting from a “night out”, which, in turn, is clearly constructed as involving the consumption of alcohol through visual cues in print, internet and television media. Alongside the construction of risk, the government’s campaign simultaneously assigns personal responsibility for negative consequences to the person going out, or drinker, through the formulation of an imperative directed at the campaign’s target audience, identified as 15-17 year olds (http://www.drinkingnightmare.gov.au/). This perspective positions young people’s intoxication as “volitional acts of irresponsible excess, a willed entry into the realm of chaos, risk and danger and away from (the) rationality, self control and moderation” (Griffin et al., 2009 p. 460). Thus, as Measham (2006) points out and Griffin et al. (2009) reiterate, instead of targeting the alcohol industry, governments tend to place responsibility squarely on drinkers to limit or reduce their drinking.

Another discursive space that has been criticised for endorsing a “pathologising” view of both drinking and drinkers is alcohol counselling based on the disease model of alcohol problems. Smith and Winslade (1997) argued that this
is achieved through the ascription of personal deficits or moral failures like lack of will power on the one hand and chemical and biological causes on the other, to those seeking help. They added that it is the familiarity of this language which impedes an appreciation of the functions it achieves and implications it suggests.

2.2. **Contradictory Societal Messages**

Collectively, there appears to be a widespread pathologisation of drinking evident across the contexts of research, governmental policy, public health campaigns and at least some alcohol counselling approaches. In brief, this particular perspective positions excessive drinking as problematic and drinkers, especially young people, as responsible for voluntarily putting themselves at risk through their consumption practices. It places a premium on restraint and control of consumption at all costs. What this perspective on alcohol and drinking fails to take into account is pleasure. As previously mentioned, even within the harm minimisation approach, which theoretically allows discussions on motivations for consumption, the possibility of deriving pleasure from drug and alcohol consumption is denied. Whilst “risk can be said to constitute one of the most central concepts in contemporary discourses on alcohol and drug prevention, ‘pleasure’ (or other possible equivalents) stands out as its dialectical counterpart” (Bergmark, 2004 p. 11).

Although pleasure, or at least its consideration, might be notably absent in some contexts, it nevertheless constitutes a legitimate, alternative perspective on drinking than the seemingly predominant pathologisation or “problematization” (Bergmark, 2004 p. 13) of alcohol and consumption. From a sociological perspective for example, it has been argued that the modern Western consumer society “is based
on a fundament of consumer preferences and the individual’s right - or even obligation - to search for pleasure” (Bergmark, 2004 p. 12). Hedonism, or the idea of pleasure as the only principle of intrinsic worth, appears to be a legitimate cultural, if not moral, justification of behaviour in much of today’s Western capitalist society (Bergmark, 2004). Congruently, in relatively recent times scholars have argued that within consumer societies there tends to be contradictory societal messages of hedonism versus personal control over alcohol consumption (Measham & Brain, 2005; O’Malley & Valverde, 2004; Szmigin et al., 2008). Similarly, in 1997 Casswell wrote about the “opposing voices in public discourse on alcohol” (p. 251).

On the one hand, there is the pathologisation of alcohol consumption. On the other hand, there is a concurrent commodification of alcohol consumption as the pursuit of pleasure and a meaningful activity. The latter is perhaps best exemplified in advertising and the structuring of the night time economy. “Most advertising and marketing campaigns by the major drinks manufacturers represent young people’s drinking as a source of pleasure, camaraderie, fun and adventure” (Griffin et al., 2009 p. 458). Television programs impart a similar message. American as well as Australian alcohol portrayals in television and advertising have been noted to portray consumption as “without any serious consequences” (Grube, 1993 p. 61; Parsons & Rissel & Douglas, 1999). A more recent UK analysis of internal alcohol industry advertising documents reveals that young people are a key target for alcohol advertisers who portray their product around concepts of fun, pleasure and social success (Hastings, 2010). In addition to these positive and pleasurable portrayals of drinking in the media, aimed mostly at young people, the night time economy has been said to commodify the pursuit of pleasure by targeting the same cohort within
urban “wild zones” (Griffin et al., 2009 p. 461). In drinking establishments, alcohol consumption including heavy consumption, is often encouraged and celebrated with discounts, drinks promotions and giveaways such as happy hours, “buy x number of drinks get one free” as well as “free t-shirt after the consumption of a ‘commendable’ number of drinks” promotions. Such promotions arguably portray alcohol consumption as pleasurable, nonproblematic, and even commendable.

Contradictory messages of hedonism and personal control coexist within the same forums. For example, despite the arguably overwhelming pathologisation of drinking in academic research contexts, there is also a coexistent consensus in this particular context of the protective effects of moderate red wine consumption in relation to the risk of coronary heart disease (Casswell, 1997). Casswell (1997) noted similar conflicting messages emerging from the entertainment, news and editorial pages of newspapers and content of television programmes. Here, too, there are conflicting messages about alcohol, some emphasising alcohol’s role as business commodity and a central, widespread part of social life, which has the added benefit of being good for health, while other media discourse outlines the social problems associated with its use (p. 255).

Bright, Marsh, Smith and Bishop (2008) recently went into more detail to analyse newspaper articles and visual media in an effort to identify dominant discourses and messages about substance use within Australian media. They identified five contrasting primary discursive frameworks, and one additional framework, used to construct substance use. These were the medical, legal, moral, economic, and political discourses, as well as an additional “glamorous discourse”.

The medical discourse was said to encapsulate the disease theory of addiction. The legal discourse was constructed through the use of jurisprudent
language to demarcate certain substance use as illegal. The moral discourse was underpinned by an ideology informed by the institutions of Christianity and the family to define behaviour as either right or wrong. The economic discourse, used almost exclusively in relation to alcohol, framed psychoactive substances as a commodity within a capitalist ideology, thus positioning the substance user as an active consumer. Political discourse included narratives pertaining to policy and governance. Lastly, the glamour discourse positioned celebrities (with the notable exclusion of sports stars) as privileged to indulge in recreational substance use, often framing psychoactive substances as mysterious and fascinating (Bright et al., 2008).

Clearly there are contrasting and often juxtaposed portrayals of drinking available in the public sphere. Although it is almost impossible to present one as categorically more influential than another, Workman (2001) has noted that the public health message, generally aligned with the pathologisation of drinking, may actually be in the minority. Congruently, Casswell (1997) noted that “there has also been a considerable imbalance in the resources available to promote alcohol use rather than to moderate it” (p. 255), with the overwhelming majority of resources being spent on the promotion of alcohol by vested interest groups in the form of advertising and sponsorship. However, regardless of the imbalance in the promotion of different messages, the point that is increasingly pressed by a number of researchers is that “young people are being seduced into a culture of normalized excessive drinking, whilst simultaneously being pathologized as disordered and disorderly ‘binge drinkers’” (Griffin et al., 2009 p. 458).
2.3. The Youth “Perspective”

Against a backdrop of contradictory messages regarding alcohol consumption, one of the questions that become relevant is: how do young drinkers themselves talk about or construct alcohol consumption? Researchers have for some time now, called for an in-depth understanding of young people’s “perspective”, or their perceptions, beliefs and experiences of alcohol consumption (Calafat et al., 1998; Farringdon, McBride & Midford, 2000; Goodhart, Lederman, Stewart & Laitman, 2003; Gossop, 2000; Green & McManus, 1995; Lederman, Stewart, Goodhart & Laitman, 2003; O'Reilly, Carr, Bolitho, Roberts & Jessen, 2002; Schulenberg & Maggs, 2002; Shanahan, Elliot & Dahlgren, 2000; Sim, 1998; Swanson, Zegers & Zwaska, 2004). Such calls have recently motivated a small but ever growing number of researchers to examine alcohol consumption from the perspective of young people. These researchers generally enquire about young people’s perspectives and experiences within an interview or focus group setting. The resulting studies collectively report that young people’s view of drinking, including heavy drinking, is overwhelmingly positive (see for example Engineer et al, 2003; Sheehan & Ridge, 2001; Workman, 2001).

As a result of the findings of research conducted from the perspective of young people, researchers are starting to move away from the use of morally loaded terms such as binge drinking to describe young people’s alcohol consumption. In fact, researchers are increasingly proposing terms which capture the pleasurable aspect of drinking said to be emphasised by youths. The newly suggested terms include “bounded hedonistic consumption” and “rational hedonism” (Brain, 2000, p.7), “calculated hedonism” (Brain, 2000, p.8), as well as “controlled loss of
control” (Measham, 2004, pp. 338). These arguably more positive portrayals of youth alcohol consumption are at least somewhat at odds with current scientific knowledge on the negative effects of the risky and high-risk alcohol consumption favoured by young people both in Australia and other countries, like England and America. Nevertheless, the researchers reporting on young people’s derivation of pleasure from drinking generally conclude that young people’s perspective makes sense when considered from their point of view.

The most frequently cited Australian study looking at drinking from a youth perspective was conducted by Sheehan and Ridge (2001). This study, conducted with young female high-school students, reports that the stories told by the young women in focus groups highlighted the role of alcohol in their lives as a means of entertainment, diversion and fun, encouraging bonding between friends and a feeling of group belonging (Sheehan & Ridge, 2001). Sheehan and Ridge (2001) noted that the participants’ stories incorporated a range of experiences, including those that professionals would normally classify as negative (e.g. having to look after intoxicated friends), into positive narratives of drinking episodes that were shared, embellished and laughed about. Some professionally defined harms such as vomiting and memory loss were not viewed as harm at all, but integrated or filtered through “the good story” (Sheehan & Ridge, 2001 p. 347). The researchers argued that the notion of risk and harm considered in professional operationalisations of binge drinking was considered irrelevant by the participants who did not perceive the “risks” associated with drinking as more significant than the everyday risks normally encountered in life. They concluded that the “lived experience” (Sheehan
& Ridge, 2001 p. 365) of the young women was that drinking rarely results in any kind of harm.

A similar study examining the meaning of high risk drinking for 21 fraternity members at a Midwestern American university reports comparable findings. In this study Workman (2001) notes that the drinking stories told among friends constructed heavy drinking in a very positive manner. Moreover, the stories told also effectively ruled out alternative possibilities of construction, including the one popular among experts which focuses on harm. “Tragic” stories containing clear instances of harm (e.g. accidental fatal shootings and hospitalisation) were often suppressed, or in the very least not expressed to avoid “bring(ing) everybody down” (Workman, 2001 p. 442). Like the young women in Sheehan and Ridge’s (2001) study, the young men in this study did not regard possibly negative consequences, such as hangovers, as isolated incidents. Instead these were accepted parts of a whole which was overall regarded as a pleasurable, shared experience often recounted among gales of laughter. This conclusion seems to be recurrent across a number of studies (see also for example Johnson, 2010).

Another focus group study similarly reported that “young people enjoy drinking alcohol and being drunk” (Engineer et al, 2003 p. v). This particular research was conducted in the UK to explore the context of young adults’ (18-24 years) “binge drinking” and the role it played in their lives. Participants in this study described getting drunk as “good fun” (p. 13) and reported a range of motivations for engaging in such behaviour, from entertainment to increase in social confidence and stress relief. In a similar vein to the two previously mentioned studies, the
authors of this report also conclude that “episodes of risk and disorder are often viewed as part of the excitement of getting drunk with friends” (p. v).

A number of other studies also report similar findings to the ones mentioned above. For example, Mayock (2004) notes that the young (15-19) Irish people in her longitudinal ethnographic study consistently described their drinking and drug consumption as “social” and “recreational” (p. 126). Similarly, Johnson (2010) reports that “the consumption of alcohol was normalised as part of a good night out” (p. 5) in his focus group interviews with 14 to 15 year olds from East Belfast. Overall, the link between pleasure or hedonism and young people’s alcohol consumption is one that has been made recurringly across different contexts. For example, Harnett, Thom, Herring and Kelly (2000), who categorized their participants’ drinking styles based on a number of interviews, write about the “recreational drinking style” of the young (16-24) white British males they interviewed as “hedonistic ways of drinking where alcohol and its related activities are seen as means to attain a high” (p. 70). Similarly, Rúdólfsdóttir and Morgan (2009) identify pleasure as a main theme emerging from their friendship discussion groups with young British women aged 18 to 22 years. Lastly, Brain’s (2000) aforementioned descriptions of youth alcohol consumption were based on ethnographic research with underage (13-17 years) drinkers in Manchester, which revealed similar findings to those just mentioned. In particular Brain emphasised the drinkers’ apparent consumption of alcohol for the pursuit of pleasure (Brain, 2000; Brain, Parker & Carnwath, 2000).

Qualitative studies that approach drinking from a youth perspective, such as those mentioned here, have gone a considerable way towards elucidating an
alternative to the pathologisation of alcohol consumption. However, these studies are not without critics. The next section introduces a particularly fundamental criticism of much qualitative research, including criticism on the literature just reviewed.

2.4. A Constructionist Critique

The qualitative studies on the youth perspective mentioned in the previous section are an embodiment of what Rapley (2001a) calls the interview-data-as-resource approach to verbal reports, which, despite the specific label, could arguably be extended to include focus group data as well. This approach, common in the social sciences, treats verbal reports as a means to access participants’ views, perceptions or reality beyond the research context itself. It has attracted a fair amount of criticism since the early 1960s, initially from the field of sociology and more recently from within the field of psychology itself, a discipline which has for a long time thrived on the interview-data-as-resource approach to verbal reports.

The criticism aimed at research employing the interview-data-as-resource approach is targeted at its foundation upon a realist view of language. Essentially, critics argue that research based on this view is predicated on the largely unquestioned assumption “that the purpose of language is to tell the truth” (Wallace, 2004 p. 197 emphasis in original). That is, there is a one to one correspondence between words and reality. For example, when a participant says that they were drunk, this is taken as a “veridical truth statement” (Wallace, 2004 p. 197) about an inner state; the word “drunk” is taken to represent a state of intoxication. It has been argued that studies based on this view of language, which include much current drug
and alcohol research, treat individual reports uncritically, as illustrative of the motives, intentions and behaviour of individuals (Davies, 1992, 1996).

Despite the popularity of the realist perspective of language, there is some research that suggests that language is better understood as functional, as a way to do things. Davies (1992, 1996) for example argues, on the basis of his research with smokers and heroin users, that people’s explanations of their drug use are “best viewed as functional context-bound sets of social reasons rather than as direct observations about the causes of their behaviour” (Davies, 1996 p. 42). In other words, people’s explanations of their drug use could be understood as accounts designed to perform specific functions within particular contexts, rather than as veridical truth statements about actual behavioural causes. Moreover Davies (1996) further specifies that accounts are likely to reflect “the context in which the account is obtained and the motives of the person involved, rather than any direct ‘scientific’ account of ‘facts’ or ‘truth’” (p.43). In this context, the reference to motivation relates to the motivation of the speaker in producing an account, rather than the motivation reported in the account for a particular behaviour. To view language as functional does not imply that speakers carefully plan their talk to achieve different ends, or that each verb or linguistic construction has a particular function. Instead, it is suggested that talk is shaped instinctively rather than deliberately for social exchanges (Hepburn & Wiggins, 2007).

Even prior to Davies’ (1992) research, an alternative to the realist approach to language had been proposed in the 1950s. Around this time, Wittgenstein’s philosophy of psychology and language laid the foundations for the subsequent “turn to language” (Wood & Kroger, 2000). The basis of the turn to language was a
refutation of the view of language as an unambiguous set of signs used to label internal states and describe reality. Language was reconceptualised as performative and constructive, shaping versions of social reality and achieving social objectives (Phillips & Jørgensen, 2002; Willig, 2001). Perhaps the most influential example of this work was Austin’s (1962 cited in Wood & Kroger, 2000) analysis of the performative character of language: his argument being that much language use is not concerned with describing the world but actually constitutes the performance of particular kinds of social acts, such as promising, inviting, criticising and so on (Wood & Kroger, 2000).

Despite the early burgeoning activity in other disciplines, the impact of Austin’s work and the turn to language was not really felt in the social sciences until the late 1980s, partly spurred by Potter and Wetherell’s (1987) Discourse and Social Psychology: Beyond Attitudes and Behaviour. It could be argued that this text started a revolution within psychology. It certainly incited the emergence of what has been called “the new social psychology”; a varied set of approaches sharing a critical perspective on positivist psychology as well as a view of language as functional (Griffin, 2000; Wallace, 2004).

The functionalist approach to language espoused by the new psychology has “much to offer in terms of throwing new light on old questions” (Wallace, 2004 p. 195). Both clinicians and theorists have argued that constructivist perspectives provide viable alternatives to realism for understanding substance use (Burrell, 2002; Willig, 2001). Accordingly, the number of constructionist studies on drug and alcohol use is beginning to increase. Much of this research, founded upon a view of language as constructive as well as functional, is published under the label
“Discourse Analysis”. Similar to Davies’ work (1997a), Discourse Analysis goes beyond semantics or asking what participants’ talk actually “means” to “locate its function by asking ‘what does it achieve?’” (Davies, 1997a p. 171).

2.5. Discursive Approaches to the Study of Alcohol Consumption

Although the term Discourse Analysis may seem to imply a single unitary entity, the turn to language has spurred a number of different approaches all using the same label, but often subscribing to different philosophical frameworks (Antaki, Billig, Edwards & Potter, 2002). Moreover, the label Discourse Analysis has also been used to refer to a broad area of language study which subsumes a variety of approaches with different epistemological roots and methodologies. One of the reasons that Potter (2004a) cites for this diversity is the parallel development of approaches influenced by the turn to language in different disciplines including linguistics, sociology, psychology, social psychology, philosophy, communication, literary theory and cultural studies. As a result, some of the approaches presented as Discourse Analysis have little in common; however, most are united by a focus on the function of talk (Burman & Parker, 1993: Wetherell & Potter, 1992). In the introduction to their book: Discourse as Data: A Guide to Analysis, Wetherell, Taylor and Yates (2001) define Discourse Analysis as a “set of methods and theories for investigating language in use and language in social contexts” (p. i).

In line with the relatively recent focus on language and its use among a number of disciplines, scholars within the drug and alcohol field have begun calling for the investigation of youth drinking talk, rather than perceptions or experiences.
An understanding of public talk about drinking is being called for as essential to the design and implementation of effective prevention efforts and programs aimed at altering behaviour (Abrahamson, 2003; Green & McManus, 1995). Over and above this, Workman (1998) argues that:

examing the discourse of the cultures does far more than inform strategy, it helps the culture to listen carefully to their constructions, to reconcile the constraints that those constructions create, and to hopefully construct more informed stories as they face the challenges of the future (p.24).

Despite increasing calls for what could arguably be described as discursive drug and alcohol research, the application of a functionalist approach to language in the field of alcohol studies has been somewhat surprisingly slow. To date there are only a handful of studies to the author’s knowledge that address talk about alcohol consumption from a broadly discursive perspective (see for example Guise & Gill, 2007; Lyons & Willott, 2008; Rolfe, Orford & Dalton, 2009). Despite the small numbers, these studies have begun to forge a new path for the investigation of drinking and intoxication from a discursive perspective.

Perhaps the first ever study to explicitly apply a broadly “discursive” approach to talk about alcohol consumption was published by Guise and Gill in 2007. This interview study conducted with 19 young (18-25) Scottish female undergraduates highlighted the potential utility of the application of a discursive approach to talk about drinking. It found that respondents used a number of rhetorical strategies to carefully construct what the authors labelled their binge drinking as a harmless activity. This research indicated that the interview respondents were sensitive to how others might interpret their answers, and thus
formulated their responses so as to portray their drinking in a positive or non serious light (Guise & Gill, 2007).

Another study, this one employing a Foucauldian style of Discourse Analysis, revealed similar findings described both at a conference (Lyons, 2008) and in a journal article (Lyons & Willott, 2008). Following the analysis of eight “friendship discussion groups” (Lyons, 2008 p. 1) conducted with 32 young (aged 20-29) New Zealanders, Lyons (2008) concludes that both her male and female participants constructed their alcohol consumption as a pleasurable activity. Despite reporting consumption that experts could classify as binge drinking (i.e. more than five drinks on one occasion), respondents did not label their alcohol consumption as such, nor did they talk about their drinking as risky (Lyons & Willott, 2008). Only other (unknown) people’s excessive consumption was talked about in negative terms (Lyons & Willott, 2008).

Similar findings were also noted in another article which, although it did not explicitly identify its analysis as discursive, reported a “critical analysis of contemporary discourses around ‘binge drinking’” (Szmigin et al., 2008 p. 359 emphasis added) in the UK. This article reported the findings of ethnographic fieldwork conducted alongside 10 semistructured focus groups and 4 individual interviews with young people (18-25 years) from three different areas of Britain. It concludes that “the term ‘calculated hedonism’ better describes the behaviour of the young people in this study and in particular the way they manage their pleasure around alcohol, than the emotive term ‘binge drinking’” (Szmigin et al., 2008 p. 359). Like the two previously mentioned discursive studies, this paper similarly
focussed on the positive and pleasurable construction of alcohol consumption constructed by its young participants.

The positive construction of alcohol consumption noted by the aforementioned discursive studies is consistent with the findings of the previously reviewed studies approaching drinking from young people’s perspective. Both sets of studies concur that drinking, including heavy drinking, is described (or “constructed” according to a study’s specific analytical orientation) as pleasurable, frivolous and nonproblematic. Having established this from two different approaches, one question that arises is: why? More specifically, why do young people talk about alcohol consumption that experts would argue is risky and leads to negative consequences, in such positive terms?

Positive and pleasurable portrayals of personal alcohol consumption could be understood, as Guise and Gill (2007) suggest, to serve a positive self-presentation function. This observation has also previously been made in a focus group study with young Swedish people in their twenties. In 2004, Abrahamson claimed that the purpose of the accounts of intoxication that she analysed was to “neutralize an altogether over extensive drinking and present the speaker in a less negative light” (Abrahamson, 2004 p. 74). Such a concern with the presentation of the self as a “moral” consumer has also similarly been noted among injecting drug users (Plumridge & Chetwynd, 1998) as well as “chocolate addicts” (Benford & Gough, 2006). In particular, in relation to the latter, Benford and Gough (2006) noted that “flexible accounting help(ed) participants negotiate a subject position in which the self is presented as morally sound” (p. 437).
The kind of “flexible accounting” mentioned by Benford and Gough (2006) was also more recently explored in a discursive interview study with 24 female heavy drinkers (defined as consuming at least 35 units of alcohol in a typical week) aged between 28 and 56 years (Rolfe et al., 2009). Prior to this particular study, discursive research had mainly focussed on the pleasurable construction of alcohol consumption, including heavy consumption. Rolfe and colleagues (2009) expanded this focus by showing that the women in their study constructed drink as self-medic­ation, as well as pleasure. They noted that the participants in their study “move(d) between these different constructions of drink, in order to protect their moral status, and to present themselves as ‘good women’ as well as women who drink” (p. 329).

Similar to Rolfe and colleagues’ (2009) study, Davies’ (1992, 1996, 1997a, 1997b, 1998) body of work also identifies more that one “discourse” or way of talking about alcohol consumption. Although not strictly discursive, Davies’ work takes a similar functionalist approach to language and “drug speak” (Davies 1997a). His work is worth discussing because it outlines numerous discourses or constructions of drug consumption that have not yet been considered in the discursive research literature in relation to alcohol consumption.

Davies (1996/1997a) identifies six different types of discourses said to be employed at different stages of a consumer’s drug using “career” to talk about personal consumption. He proposes that consumers move through these discourses, albeit not always in a linear manner, as their drug use progresses. The first, labelled Type One or “hedonistic” discourse “characterizes drug use as positive, fun, problem free, and as having no negative consequences for health, social or economic
functioning” (Davies, 1997b p.56). It is congruent with previously discussed research pointing to the association of pleasure with alcohol consumption. The second discourse identified by Davies (1997a/ 1997b), Type Two, comprises alternating descriptions of drug use depending on the context, from the positive constructions characteristic of Type One discourse to more negative characterisations marked by references to one or more drug related problems. Type Three is the discourse of addiction, encompassing references to loss of control and negative drug related consequences (Davies, 1997b). Type Four discourse, like Type Two, is contradictory and context dependent. The difference is that Type Four discourse is said to oscillate between the addict and hedonist constructions of drug use. The second last identified discourse, Type Five Positive, is labelled “up and out” (Davies, 1997b p. 57). This discourse portrays the past self as addicted, with the current self as either abstinent or involved in nonproblematic use (Davies, 1997b). The last discourse, Type Five Negative, labelled “down and out” (Davies, 1997b p. 57), is less well defined than the previous five. It appears that this discourse may construct drug use as both hedonistic and purposive, possibly serving “some ill-defined but fatalistic function” (Davies, 1997a p. 132). Davies (1997b) argues that one of the main characteristics of this discourse may be a lack of meaningful structure or content. He describes the type of person employing this discourse and their manner of speech in the following terms: “They will normally have ‘failed’ a number of agency contacts; they may be living on the streets; they are probably inebriated and/or dysfunctional for long periods. Any discourse obtained is rambling and incoherent” (Davies, 1997b p. 58).
When considered alongside the aforementioned discursive studies on youth alcohol consumption, Davies’ (1992, 1996, 1997a, 1997b, 1998) work suggests that a functionalist, discursive approach to youth drinking may be a useful approach to an old research topic. In particular, whilst the use of discursive approaches in the field of alcohol studies is still in its infancy, it would appear that it may be useful in outlining a range of discourses that consumers may use to construct their alcohol consumption, as well as other forms of drug taking.

The discursive studies conducted to date have been useful as a preliminary foray into the issue of alcohol consumption from a functionalist discursive perspective. However, they are not without limitations. For example, it is possible that Lyons and Willott’s (2008) research might contain some “category errors” (Gruenewald & Treno, 2006 p. 162) or the misalignment of categories of explanation. Category errors occur when properties are ascribed to a thing that could not have that property. The researchers conclude that “drinking alcohol is one way of accomplishing a gendered identity within local settings” (Lyons & Willott, 2008 p. 710). Whilst they clearly showed how “gendered identities” were constructed during discussions regarding alcohol consumption, it might not strictly follow that alcohol consumption constructs gendered identities.

Another criticism that could arguably apply to the other aforementioned discursive research is a charge of what Antaki et al. (2002) call “under analysis through circular discovery” (p. 1). This occurs when data extracts are presented as evidence of a discourse that is claimed to be apparent in the data. The problem arises when these extracts are explained in terms of the supposed discourse. That is, when speakers are said to construct matters in a particular way precisely because they are
framing their talk within the said discourse. This could be said to occur to some extent in Rolfe et al.’s (2009) study. In this case, participants were said to use two main constructions of drinking, self medication and pleasure. Although extracts were presented to support this assertion, the study may arguably have benefited from a more thorough accounting of changes in discourse. The in-depth examination of variations in talk can help to more clearly elucidate the functionality of different constructions, or the reasons behind the use of one construction over another in a particular context.

Other studies were perhaps limited by a failure to consider the possibility of different constructions to the main one analysed. For example, although Guise and Gill (2007) mention that participants “largely defined” (p. 4 emphasis added) binge drinking in a certain manner, thus suggesting that there may have been other alternatives, they stopped short of exploring the hinted-at variations in construction. Similarly, Szmigin et al. (2008) consider only one possible construction of drinking, that is, calculated hedonism. Whilst analysing one particular discourse is all these two studies set out to do, discursive literature might be usefully extended by capitalising on the focus on alternative constructions at the heart of discursive approaches. Davies’ (1997a, 1997b) work is a good example of the consideration of variations in construction, despite not being strictly discursive. A potential problem with this approach, however, is that it could be said to somewhat circularly attribute variation to different stages of drug taking. Indeed Type Five Negative discourse is at least partly described by outlining a speaker’s socio economic status.

Despite potential criticism, when considered together, the discursively oriented studies conducted thus far have been instructive in terms of suggesting
some possible constructions of drinking. Considered together, these studies overwhelmingly, and perhaps somewhat unsurprisingly, suggest that drinkers tend to talk about their alcohol consumption in positive terms as both pleasurable and harmless. Moreover, these studies indicate the presence of at least two other alternative ways of constructing alcohol consumption. In particular, the work of Rolfe and colleagues (2009) introduces the discourse of alcohol consumption as self-medication, whilst the work of Davies (1996/1997a) outlines the construction of drug use as addiction (Type Three discourse).

Whilst the studies reviewed in this section have been extremely useful in terms of shedding light on possible constructions of alcohol consumption, it remains to be seen whether their findings are applicable in an Australian context. In particular, it is as yet unclear what discourses the young “binge drinkers” from the Northern Territory, mentioned at the beginning of this chapter, use to construct their consumption. This study will investigate exactly that. Building on previous discursive research, the purpose of the current study is an in-depth investigation, of the kind that only doctoral research allows, into talk about alcohol consumption. In particular, this study will examine the constructions that young drinkers from the Northern Territory of Australia use in talking about their consumption. In view of this research goal, the discursive approach adopted to guide the analysis of drinkers’ talk was Discursive Psychology (Edwards & Potter, 1992). This approach is arguably the one best suited to the delineation of different constructions within the field of psychology. The reasons for this will become clear following the explanation of this approach in the next section. In short, Discursive Psychology
facilitates the delineation of different ways of speaking about a particular topic, by guiding analysis towards variations in talk.

2.6. Theoretical Framework

Discursive Psychology has incited a considerable amount of research since its development in the 1990s by Jonathan Potter and colleagues at Loughborough University (Antaki et al., 2002; Edwards & Potter, 1992; Edwards & Potter, 2001; Potter & Wetherell, 1987; Potter & Edwards, 1993; Potter, 1996a; Potter, 1996b; Potter, 1996c; Wetherell & Potter, 1992). Whilst the label “Discursive Psychology” has been criticised for the implicit suggestion that it is a perspective restricted to the discipline of psychology, this is not what is intended (Wood & Kroger, 2000). In fact, this approach to discourse analysis draws on several different research traditions including ethnomethodology, conversation analysis, the sociology of scientific knowledge, as well as the work of Foucault and other continental post-structuralist discourse analysts. Although it is also occasionally referred to as Discursive Social Psychology (See Potter, 1998), the label Discursive Psychology (henceforth DP; Edwards & Potter, 1992) is most often used to delineate a particular form of discourse analysis developed within social psychology. DP is the label that will be used here.

Since DP often admittedly escapes precise definition, it is useful to quote a particularly eloquent definition. This approach to research has been defined by Edwards, Potter and Middleton (1992 p. 443 cited in Aiello & Bonaiuto, 2003 p. 245) as:
a theoretical orientation in which versions of mind and reality, including event reports, are explicable in terms of principles of report construction, as situated discursive action, prior to any status they may have as clues to the nature of the world, or to the workings of mind. Specific versions of events (and other things) are seen as socially produced outcomes, or accomplishments, of discourse, rather than as neutral inputs to psychological processes or as cognitive states that versions reveal.

Essentially, DP is based on three fundamental principles: Action orientation, Situation and Construction (Hepburn & Wiggins, 2007). Each will be discussed in turn in more detail.

§2.6.1. Action Orientation

If one accepts the notion of talk as social action, it follows that two accounts performing the same action or function (e.g. blaming, justifying etc…) are likely to be roughly consistent. Conversely, when two accounts are oriented to different functions, inconsistencies are expected. Thus, DP proposes that language variation can be analysed as evidence of the functional orientation of accounts which often involves the construction of different versions (Potter & Wetherell, 1987). From this perspective, apparent inconsistencies and variability in talk are examined as evidence that speakers are drawing on different resources to perform different functions (Harper, 1999).

DP’s focus on the variability of talk is not meant to imply anything about the nature of speakers themselves, such as how variable or inconsistent they may be. In fact, DP explicitly avoids theorising on “the self”, focussing instead on the construction of different notions of self and associated constructs (Edwards & Stokoe, 2004). Additionally the focus on variability is not intended to detract from the importance of consistency in everyday talk. Proponents of DP acknowledge that
consistency is usually a strongly sanctioned normative requirement for the smooth conduct of conversations. So much so that noticeable contradictions or variability often attract criticism and/or requests for more consistent accounting (Edwards & Stokoe, 2004). Whilst variability is present in talk, it often goes unnoticed during interactions, possibly because variable constructions are not normally sequentially proximate.

Within DP analysing variability allows the exploration of how and when different constructions are deployed and the kinds of implications they have for human practice and experience (Willig, 2001). Thus DP directs attention to the varied and mutually acceptable possibilities of description of a single event or phenomenon. Willig (2001) illustrates the availability of varied possibilities of description by offering the classic example of a glass of water that can be described as half-full or half-empty. Whilst both descriptions are accurate, one constitutes a positive, optimistic appraisal of the situation, whilst the other rather more pessimistically emphasises lack and absence. More pertinently, Winslade and Smith (1997) present the following example illustrating different constructions of what they argue is a similar phenomenon: “Take enough sleeping pills to poison your system and you are said to have overdosed…But take enough alcohol to poison your system and we- especially men- say things like ‘Must have been a good night’” (p. 170).

Discursive research has uncovered a myriad of examples of variations in talk (See for example, Gillies, 1999; Lawes, 1999; Wetherell & Potter, 1992). For example, within the same interview, some white New Zealanders were found to describe Maoris as “proud” (Wetherell & Potter, 1992 p. 189) and to note “they’ve
lost their pride and dignity” (Wetherell & Potter, 1992 p. 136). Had the researchers taken a more traditional approach, this inconsistency would have been treated as an anomaly to either be ignored or clarified by probing further in order to uncover what the participant “really” thought of Maoris. Generally however, the lack of any means to accurately distinguish between reality and rhetoric has often excused researchers from having to deal with variation in talk (Potter & Wetherell, 1987).

Instead of settling for the traditional approach which arguably overlooks the importance of variation, Wetherell and Potter (1992) considered the contradictory statements about Maoris in more depth in their respective contexts. They found that the statements only made sense when the practicality of situational usage was considered. Consequently, the analysis of seemingly contradictory utterances in their respective discursive settings led to perceptive insights into how racism is perpetuated in New Zealand (See Wetherell & Potter, 1992 for an in-depth discussion). It has been argued that these insights were only possible through the study of descriptions and categorisations in terms of the functions they accomplish in different contexts (Edwards, 1997). Essentially, within DP, the target of analysis shifts from a traditional focus on capturing what “really” happened or what a person “really” thinks, to the consideration of alternatives and the examination of how, and to what effect, these are produced (Potter & Wetherell, 1987).

In the alcohol and other drug studies field, research based on DP examines drug-related categories and concepts as constructions rather than assuming that these necessarily reflect objective distinctions based on substances’ inherent properties (Burrell, 2002). From this perspective, the contradictory societal messages discussed earlier in this chapter can be understood as different constructions of alcohol
consumption designed to achieve different functions in different contexts. DP offers a useful framework for the study of such contradictory constructions of drinking and what functions these might achieve in different contexts.

Whilst the discursive approach to language as functional and action oriented has been successful in recently prompting increasing amounts of research in the field of psychology, it is not without critics. What is viewed as the anti-realist perspective of reality at the centre of this approach has in fact often been attacked with what Edwards, Ashmore and Potter (1995 p. 25) call “death and furniture” arguments, or the citing of realities that should not or can not be denied. As if in reply to these arguments, Edwards (1997) reasons that rather than theorising on the nature of reality, DP is an attempt to draw attention to the point that reality, as constructed through talk and text, is a socially occasioned production and should be treated as such. DP does not put forward assumptions about the nature of reality but treats this as a genuine participant concern (Edwards, 1997). Take the example of an instance of intoxication. It is not the role of DP to “discover” what intoxication “really” is. Within this framework it is simply acknowledged that different people at different times or even the same people at different times may construe intoxication variously as, for example, having a good time, falling off the wagon, or a mistake among other things. These different constructions are not taken to suggest anything about the reality of intoxication. Proponents of DP do not suggest that reality does not exist or that we can never know anything (Phillips & Jørgensen, 2002). What DP proposes is that instead of knowledge, several knowledges are possible (Kroger & Wood, 1998). The point is that regardless of whether objects “really” exist, their meaning as well as the impact of reality is constructed through talk (Kroger & Wood, 1998). Given
the radical departure from much of traditional psychological work on the view of reality, it is important to note that DP is not simply “an alternative to conventional methodologies; it is an alternative to the perspectives in which those methodologies are embedded” (Wood & Kroger, 2000 p. 3).

§2.6.2. **Situation**

In addition to an emphasis on the action orientation of language, DP proposes that language is sequentially, institutionally and rhetorically situated. The sequential organization of language, similarly emphasized by Conversation Analysis (ten Have, 1999), draws attention to the context of utterances which is said to be created by what immediately preceded it, such that any point of talk can also be seen as creating a context for what comes next.

Discursive Psychologists argue that the functions performed by talk are predominantly achieved as parts of interaction sequences, usually involving other people. Since actions are inseparable from the ways they are achieved in the interactional context, the primary foci of DP are actions in sequence rather than isolated individual acts (Widdicombe, 1993). Actions do not hang in space, but are often responses to other actions and in turn create the setting for new actions. These may involve sequences such as blame and responsibility, compliment and acknowledgement, request and reply and so on (Potter & Edwards, 1993). Despite the implications of sequential positioning for subsequent turns, it is not argued that actions invariably predetermine subsequent actions. For example, although a request usually requires or sets the conditions for a reply, a reply does not necessarily, immediately or always follow a request. The point that is argued is that particular actions, such as a request, may make other actions, in this case a reply, relevant.
Within DP, talk is also said to be situated institutionally in so much as institutional identities (e.g. facilitator and participants in a focus group) and tasks (e.g. questioning and responding to facilitator enquiries) will be relevant to what takes place. That is, no analysis of a focus group, therapeutic encounter or classroom exchange for example, would be considered complete without a consideration of the institutional situation of that talk. In relation to qualitative research, DP thus advocates an approach to data which Rapley (2001a) calls interview-data-as-topic. This approach portrays qualitative data as reflecting a reality jointly constructed by interviewer and interviewee, or, by extension, a reality jointly constructed by a facilitator and focus group participants, rather than an information gathering exercise (Lee & Roth, 2004). As Rapley (2001a) notes, the interview-data-as-topic approach draws particular attention to the functions that different constructions can have in talk within an interview setting, particularly in relation to self-presentation.

DP proposes that language, in addition to being sequentially and institutionally situated, is also situated rhetorically. The rhetorical situation of language draws attention to the post structuralist notion that descriptions, arguments, events and so on, are constructed against alternative possibilities (Potter & Wetherell, 1995; Wetherell & Potter, 1992). Contrary to the social psychological assumption of humans as naturally disinterested information processors, DP proposes that the production of factual talk involves the consideration and inherent exclusion, refusal or undermining of possible, equally plausible alternatives. The task of discursive analysts is thus to identify the techniques that participants draw on during the course of talk, which contribute to the construction of factuality and the destabilisation of alternative versions (Edwards & Potter, 1992). By analysing
different versions of events, descriptions, accounts and so on, analysts demonstrate possible alternatives and highlight that customary ways of categorizing and ordering phenomena are reified and interest-driven rather than simple reflections of reality (Willig, 1999a).

The different and often contradictory possibilities of reality constructions mean that individuals must constantly wrestle with the contradictions of commonsense or what have come to be known as ideological dilemmas (Dixon, Levine & McAuley, 2006). Consider for example the contradictory nature of the following popular sayings: “many hands make light work” but “too many cooks spoil the broth”. Common knowledge is filled with similarly contradictory idioms based on different ideologies or world views. The concept of ideological dilemmas highlights the essentially contradictory nature of different ideologies or systems of meaning, which is in turn “…born out of a culture that produces more than one possible ideal world, more than one hierarchical arrangement of power, value and interest” (Billig et al., 1988, p.163).

Given the ease with which different idioms can construct different realities, it is important to note that within DP speakers are not considered wholly passive subjects of the ideologies implicated in their talk. Instead, speakers are considered active agents capable of reflecting on as well as reproducing ideological themes and tensions (Dixon et al., 2006). Such a strong focus on contradiction and alternate possibilities arguably makes DP particularly suited to the study of the myriad of variable and often contradictory publicly available constructions of drinking and in particular, getting drunk, that were highlighted earlier in this chapter.
§2.6.3. **Construction**

Another feature of talk to which DP draws particular attention is construction. From a DP perspective, language is said to be both constructed and constructive. It is said to be constructed in so much as it draws on various resources such as words, categories, and idiomatic expressions and so on, on a basic level, as well as more complex discursive resources such as “interpretative repertoires” on a more abstract level.

Interpretative repertoires are recurrently used sets or systems of resources and terms that participants use in the characterisation, description and evaluation of actions, events and other phenomena (Lawes, 1999; Potter & Wetherell, 1987). Potter and Wetherell define interpretative repertoires as “basically a lexicon or register of terms and metaphors drawn upon to characterise and evaluate actions and events” (1987 p. 138). Later they add that interpretative repertoires can be understood as “broadly discernible clusters of terms, descriptions and figures of speech often assembled around metaphors or vivid images… They are available resources for making evaluations, constructing factual versions and performing particular actions.” (Potter & Wetherell, 1995, p. 89).

Basically, interpretative repertoires are relatively coherent ways of constructing arguments or talking about objects and events. In the great tradition of metaphorical explanations which populate discursive works, Edley (2001) calls them “the building blocks of conversation” (p.198), or a range of linguistic references, part of a community’s common sense, that can be drawn upon and utilised in the course of everyday interactions. He also compares repertoires to “books on the shelves of a public library, permanently available for borrowing” (p.198), as well as
“pre-figured steps that can be flexibly and creatively strung together in the improvisation of a dance” (p.198). In a sense then, conversations can be understood as made up of a “patchwork of ‘quotations’ from various interpretative repertoires” (Edley, 2001 p. 198).

The notion of interpretative repertoires is not entirely new or exclusive to DP. Similar concepts have been previously advanced by other researchers and academics such as Serge Moscovici, Robin Room and Norman Denzin. Moscovici developed a whole approach to research based on the concept of Social Representations or “the ensemble of thoughts and feelings being expressed in verbal and overt behaviour of actors which constitutes an object for a social group” (Wagner et al., 1999 p. 96 italics in original). On the other hand, Robin Room has argued that research is guided by “governing images” or “a summary characterisation of the problem organised around a coherent perspective which determines the social rubric and usually the action model for the problem, both for social policy and in terms of individual cases” (Room, 1974 cited in Gusfield, 1996 p. 273). Norman Denzin (1993), in describing society’s “production of alcoholic selves”, outlines a similar concept which remains unnamed: “Our society provides the arenas for the production of alcoholic selves. It produces the language for describing such selves… Society makes available a variety of interpretations concerning how and why certain people become alcoholics and other do not” (Denzin, 1993 p. 361).

The major difference between these assorted notions and the way interpretative repertoires are conceptualised within DP, is the importance assigned to cognitive phenomena in people’s explanations (Potter & Wetherell, 1987). DP is
squarely focussed on language use and action, the way accounts are constructed to serve different functions. It does not treat accounts as products of mental entities, whether these are social representations, governing images or cognitive constructs such as attitudes, beliefs, goals or desires. Another significant difference is varying degrees of focus on variability and consensus. Unlike advocates of the Social Representations framework for example, discursive analysts predict variability rather than consensus among different people. Moreover they do not assume that some people consistently draw on the same repertoire whilst others draw on another (Potter & Wetherell, 1987).

The concept of interpretative repertoires is quite similar to the post-structuralist concept of discourses used by Davies (1997a, 1997b), which may create some confusion. Indeed both concepts relate to repertoires of meaning or distinctive ways of talking about objects, events or phenomena (Edley, 2001). In addition to Davies’ use of the term to denote a particular way of speaking, the concept of discourses is generally mostly used within Foucauldian Discourse Analysis, and is concerned with the operation of power and how people are both produced by and subjected to the ideology of their discourses. On the other hand, the concept of interpretative repertoires, most often used within DP, places more emphasis on personal agency and the flexible deployment of language than the Foucauldian approach (Edley, 2001).

Interpretative repertoires were most popular within discursive psychology during the mid to late 1980s, at a time when the discipline was still labelled discourse analysis (Potter, 2010). Studies conducted during this time used individual interviews or focus groups as a means of generating interpretative
repertoires to analyse (For a classic example see Potter & Wetherell, 1987). During the early 1990s a second strand of discursive work begun to emerge focussing on ‘naturalistic’ materials, such as everyday conversations and newspaper articles (See for example Edwards & Potter, 1992). This strand of work moved away from the identification of interpretative repertoires to the analysis of the work that descriptions and constructions of psychological states could achieve (Potter, 2010).

A third strand of Discursive Psychology, aligned more closely with Conversation analysis, emerged during the mid-1990s and began to dominate the field (Potter, 2010). This strand of work, arguably the most popular within the field today, focusses on the discursive work achieved within everyday as well as institutional conversations, beginning with a careful Jeffersonian transcription which plays close attention to the minutiae of talk.

Whilst work on interpretative repertoires continues today, the move away from such studies was headed by internal critiques of this concept as well as questions about the use of interviews and focus groups for discursive research (Potter, 2010). In particular, Potter (1996b) noted that it is impossible to determine whether repertoires are the product of preformed cognitive organizations or the result of a pragmatic organization of practices. Whilst this question might be put aside for the purposes of analysis, a more damning critique was that the reliable identification of repertoires required a series of procedures and criteria, whilst many studies often offered only a vague idea of how repertoires were identified and how they related to the data (Wiggins & Potter, 2008). Similar to the critique on the reliable identification of repertoires, Potter and Hepburn (2005) outlined problems with the production and analysis of open ended interviews which mostly related to
the way these are often treated as naturalistic conversations, which, of course, they are not. Despite these criticisms, it is argued that used correctly, that is, with clear explanations of how they were identified and how they relate to a corpus of data, alongside a careful consideration of interview-produced data, interpretative repertoires remain a fruitful and interesting concept to guide the study of talk in interaction.

The focus on interpretative repertoires highlights DP’s approach to language as constructed. In addition to constructed, within the framework of DP language is also viewed as constructive. The constructive property ascribed to language refers to its ability, as previously discussed, to erect different and alternative versions of descriptions, arguments, events and so on (Hepburn & Wiggins, 2007). Since there is always more than one way of describing anything, it becomes clear that word choice and usage can give rise to different versions of events and reality (Willig, 1999a).

Wetherell and Potter (1992) maintain that accounts of objects always construct those objects in certain ways for certain ends, and this construction is inescapable. This observation was also made outside of DP by Workman (2001), as previously noted, who reported that his participants’ stories effectively ruled out alternative possibilities of construction. In constructing one version of affairs instead of another, words convey different upshots of reality which inevitably have different consequences both for the speaker and in terms of the inferences that can be drawn from their utterances. Such a view of language could arguably be usefully applied to the alcohol field. Here it could be used to shed light on how different constructions of drinking, and especially, DTI, can be worked up. It could also help to elucidate
the functions these constructions achieve in different contexts as well as the implications and consequences that these make relevant.

In short, DP directs analytical attention to both talk and texts as a social practice by focussing on what people do with their talk and writing. Moreover, DP draws attention to the resources that people use in the course of those practices, such as interpretative repertoires, categories, identities and metaphors, which make those practices possible (Potter, 2004b). These two individual foci equally contribute to the overall aims of DP, which are to show how talk is performative, that is, how it is used to build up reality; and to outline the resources and devices that are used to construct plausible versions of reality (Potter, 2004a). Whilst the two foci are complimentary, most DP studies tend to address either one of the two rather than considering them simultaneously. However, it has been suggested that answering research questions adequately usually requires a combined consideration of both aspects (Potter & Wetherell, 1995; Wetherell, 1998). Accordingly, the current study seeks to investigate what speakers are doing when they construct instances of DTI, as well as the interpretative repertoires and other resources that speakers draw on in the course of that construction.

2.7. Research Questions

Overall, DP paves the way for research that takes a functional view of language whilst directing close attention to the institutional situation of talk. Its focus on variability and the possibility of alternative constructions appears particularly suited to the study of binge drinking among young people, a topic of research that has thus far been characterised by very different operationalisations
and constructions discussed earlier in this chapter. DP offers the possibility of examining exactly those different constructions, the purposes for which they are deployed, and the resources used in construction.

Whilst contradictory constructions of young people’s binge drinking can be found anywhere from everyday exchanges between friends to academic journal articles, it seems appropriate to launch an in-depth discursive approach to this topic by starting with an examination of the constructions that young people themselves use to describe their own binge drinking, or DTI. Arguably, the best place to find such constructions might be in unsolicited talk amongst peers. However, the logistics of accessing such a body of data are complicated beyond the scope of this particular research. Consequently, focus groups were employed as a means of generating a vast body of talk about drinking and in particular, about DTI, in order to investigate possible discursive constructions of DTI available to young people.

Within this research design the questions made relevant by a discursive approach to DTI, or binge drinking are two: What are the interpretative repertoires that young people draw upon when recounting experiences of DTI in a focus group setting? And, what functions do different repertoires serve in that context? These questions will be addressed by employing DP to analyse the patterns of talk and the rhetorical constructions used in focus group discussions on drinking. The analysis will identify the resources and discursive practices, as well as their consequences, which speakers draw on when talking about drinking. The goal is not to describe young people’s attitudes towards drinking, but to show how discursive practices are used to construct episodes of DTI.
This research extends the scope of the original strand of DP which used interviews and focus groups as means of generating interpretative repertoires to be analysed. It builds on previous work by addressing the previously mentioned critiques of this strand of scholarship. To reiterate, the original strand of DP was subsequently criticised on two most important analytical fronts. One was the pervasive failure to treat interview data as interview data instead of, as was most often the case, as an unproblematic stand-in for more naturalistic talk. In response to this critique, the current study is squarely focussed on the analysis of focus group talk as focus group talk. This concern will be evident throughout the remainder of this thesis, where the status of the data as focus group produced will remain at the forefront of analysis. The other critique that will be addressed in this study is the failure of some previous research to clearly specify how interpretative repertoires are identified. To this end, the current study will employ the approach described by Wetherell (1998) which champions the identification of interpretative repertoires based on the micro particulars of social interaction.

It has been argued that social psychological work of recent years tends to distinguish between two styles of discourse analysis: broader post-structuralist analysis and one considerably and more minutely more grounded in Conversation Analysis (Wetherell, 1998). In contrast to this division, Wetherell (1998) recommends a “more synthetic approach” (p. 388). She argues that “a stance which reads one (style of discourse analysis) in terms of the other continues to provide the most productive basis for discourse work in social psychology” (Wetherell, 1998 p. 388). Indeed the requirement to ground any broad identification of interpretative repertoires in the minutiae of talk would successfully address previous critiques
regarding the explication of the identification of repertoires. This eclectic approach, employing analytical concepts from all strands of DP, including such concepts as interpretative repertoires, positioning and ideological dilemmas alongside concepts derived within Conversation Analysis, is the approach that will guide the analysis expounded in this thesis.
3. **Method and Analytic Technique**
The previous chapter presented the issue of heavy or “binge” drinking among young people in Australia, and in the Northern Territory (NT) in particular. It outlined some of the social psychological approaches that have been used to study it. Discursive Psychology (DP) was introduced as a novel and underused perspective on the issue of alcohol consumption. Lastly, the questions guiding this research were outlined. In this chapter, the research methods as well as the process of analysis undertaken in carrying out this study will be outlined and discussed. This will provide a context and a basis for understanding the findings of this research, which will be outlined in subsequent chapters.

The aim of this research was to examine some of the possible discursive constructions of personal episodes of drinking to intoxication (DTI) used by young people. To answer these questions appropriately, several decisions were made regarding data “collection”, analysis and interpretation. These are discussed in the following sections.

3.1. Focus Groups as Methods of Data Generation

The title of this section refers to data generation to distinguish the procedures used from the implications of the more commonly used expression: data collection. The latter implies the extraction of materials of study from a naturally occurring source and this cannot be said to have occurred in this study. It would be more accurate to say that the participants and I contributed to a co-construction of data in this study. This does not necessarily make this study any less “accurate” or useful than studies which “collect” data. This point will be discussed in more detail in a later section.
In order to answer the research questions outlined above, focus groups were chosen as the means of data generation to enable the production of a vast body of talk on drinking. Other researchers had previously noted that focus groups “are a useful qualitative tool when the objective is to generate lots of information, ranges of experience… Focus groups are an ideal arena in which to explore the ‘social construction’ of knowledge and attitudes” (Engineer et al., 2003 p. 70). The main reason for the conduct of focus groups in this study was similar to that reported by previous researchers: to generate a lot of data in a relatively fast manner. However, as will become clear, the particular discursive analytical treatment of focus group data in this study differs greatly from the way focus groups have been traditionally analysed to date.

Classical definitions of “focus groups” describe this research method as an open discussion on a pre-defined topic among a group of participants who share some characteristic, followed by an analysis collecting the viewpoints of participants (Hamel, 2001). Other classical elements of focus group research are: the presence of a facilitator or facilitator to guide discussion, a topic guide or outline and interaction amongst respondents (Greenbaum, 1988). Although the focus groups conducted for the purpose of this research adhered to classical definitions of the method in terms of execution, the analysis of the resulting data constitutes a significant departure from traditional approaches.

An important point of difference between this research and classical definitions of focus groups is that the former was not conducted as a means to collect different “viewpoints”. For this study, focus groups were conducted as a means to generate interaction to be analysed. Analysis consisted of the identification
of a number of interpretative repertoires that focus group speakers used to construct DTI and a through examination of how these repertories were constructed, how they operated and to what ends they were employed. As Potter (2004b) has noted in relation to research procedures such as interviews, “instead of treating these as machinery for harvesting data from respondents they can be viewed as an arena for interaction in its own right; that is natural-interaction-in-interview” (p. 205, my emphasis). That is how focus groups were treated for the purposes of this research.

Whilst there has been some debate amongst analysts in terms of exactly what constitutes “natural” interaction (see for example the exchange published in Discourse Studies: Lynch, 2002; Potter, 2002; Speer, 2002a, 2002b; ten Have, 2002), the analytical perspective applied in the course of this research was to treat focus groups as “a form of natural conversational interaction” (Potter, 2004b p. 206).

Ultimately, the data generated in the course of this study are not presented as “naturally occurring” in the strictest sense of the term, being produced in response to and within the “researcher provoked” context of a focus group. However, they are presented as legitimate interactions which help to elucidate the discursive resources that participants draw on in their talk about, and accounts of, drinking experiences. The researcher-provoked characteristic of talk, as well as the active involvement of the facilitator in the production of the data, was considered throughout analysis. The audio and transcripts of the groups were treated as interactions in their entirety, rather than treating the questioner as researcher, the question schedule as “method” and only the responses as “data” (cf Edwards, 1997; Wetherell & Potter 1992; Widdicombe & Wooffitt 1995; Wooffitt, 1992).
Focus groups were selected for the purposes of this research, in preference to individual interviews, to facilitate a closer approximation to the kind of spontaneous talk, argument and debate likely to be found in everyday interaction. This approach to data generation has previously been used in Australian discursive studies of racism, for example by Augoustinos, Tuffin and Every (2005), and Riggs and Augoustinos (2004). Another advantage of the between-participant interaction facilitated by focus groups is the introduction of the possibility that participants themselves may help reveal the constructed nature of talk by directly challenging, undermining and questioning each other’s versions (Potter & Wetherell, 1987). This particular interactive modality presents possibilities for participants themselves to compare their ways of talking (Morgan, 1996). Moreover, some researchers argue that participant interaction enables minimum “artificiality” of response as well as the generation of data on shared or co-constructed interpretative repertoires (Carson, Gilmore, Perry & Gronhaug, 2001; Kitzinger, 1994; Sim, 1998; Stewart & Shamdasani, 1990).

The selection of focus groups as a method of data generation was also based on the assumption that the discursive resources and interpretative repertoires available in interviews would resemble those employed outside the interview situation, to some degree. Theoretically, as Potter and Mulkay (1985) point out, this assumption could be misguided. Nevertheless there is no evidence to suggest that the differences between participants’ accounting techniques in and outside interviews are so great as to prevent the use of interviews as a useful means of data generation. On the contrary, studies generally suggest that there may be more similarities than
differences in participants’ accounts obtained from “natural” and “artificial” circumstances (Potter & Mulkay, 1985).

It has previously been suggested that focus group talk can be considered “peer group conversations”, at least when the participants are friends or acquaintances (Lyons & Willott, 2008). This approach presents focus group talk as allowing “researchers to see how topics were talked about in everyday social settings” (Lyons & Willott, 2008 p. 697). Nevertheless, this is not the approach taken in the current study. For the purposes of this research it is assumed that whilst focus group talk may be considered similar to peer group conversations, it is likely to differ in some respects. In support of this assumption Rapley (2001a) argues that “interviewing is a specific form of social interaction” (p. 308 emphasis in original). The same could arguably be said of focus groups; they are another specific form of social interaction. The similarities between focus group talk and peer group conversations arguably stem from the conversational apparatus likely to be used in both settings. Mazeland and Ten Have (1996) argue that features of conversation such as the preference for agreement (Sacks, 1987) for example, are likely to be present in both settings. However, that may be where the similarities end. Therefore, for the purposes of this research, the focus groups were treated as focus groups and not as peer group conversations both during analysis and in drawing conclusions.

§3.1.1. The Participants: Recruitment

Recruitment followed MacDougall and Fudge’s (2001) three-stage checklist of effective recruiting strategies for focus group participants: 1) prepare, 2) contact and 3) follow-up. The checklist was designed to maximise acceptance to participate as well as attendance at the focus groups.
Preparation.

The first stage of preparation involved outlining the selection criteria as well as a recruitment strategy. At the beginning of recruitment there were two selection criteria: an age range of 18 to 24 years and the ability to provide personal accounts of drinking alcohol. The age bracket was in keeping with the majority of youth drinking research, which deals with that age group. It was set purely so as to limit the scope of this research and render it more manageable. It was not intended to imply that young people as a group are likely to differ from other age groups in terms of the interpretative repertoires they might use. The criterion relating to the provision of personal accounts of drinking was fundamental in the generation of data for the study of personal accounts of DTI. Participant selection was not restricted only to persons who could relate accounts of gross intoxication since it was anticipated that a more heterogeneous mixture of participants would result in the production of more diverse constructions of alcohol consumption than a more homogenous group.

After the first two focus groups, it became clear that the age criterion, whilst useful for research purposes, was not meaningful in light of the participants’ talk. In fact, where participants oriented to the issue of age, they seemed to loosely differentiate between drinking when really young at the ages of about 16 to 19, and drinking in later years. Thus, after this observation, the original age category was no longer rigidly applied as a selection criterion. Participants were still required to be eighteen years of age or over, in accordance with the recruitment procedures approved by the University Human Ethics Committee. However, the upper age limit was relaxed. Ultimately, despite the revision, participants were almost entirely
between the ages of 18 and 25, with only one volunteer reporting his age to be 33 (See Table 1). The age range of the sample is reflective of the recruitment procedures, in particular the search for participants from within my peer group, discussed later in this section.

Having decided on the selection criteria, the next step was to contact potential participants. Recruitment was based on the principles of purposive sampling, whereby participants are selected based on their ability to provide insights that are relevant to the topic under study (Carson et al., 2001). The object of study of this research was talk and not people. Therefore the aim of recruitment was not the assembly of a representative sample of drinkers, but the generation of as much talk as possible so as to allow the examination of a variety of (but not necessarily all) possible ways of talking about DTI. In other words, the aim of recruitment was to collect rich and purposive rather than random data (MacDougall & Fudge, 2001). The groups of people recruited were useful for illustrative and not definitive ends; participants were not intended to be representative of young people as a whole (Patton, 2002). As Wood and Kroger (2000) note:

Selection is thus provisional but it is not haphazard, as long as it permits the inclusion of discourses that are relevant to the phenomenon of interest. The important thing is to avoid unwarranted assumptions about the persons who generate the discourse (p.79).

The initial strategy employed to attract potential volunteers was to publicise the research through various means. I approached the local newspaper, the NT News, with a photograph and a story briefly outlining the study and ending with a plea for volunteers to come forward and contact me (for a copy of the printed story see Appendix F). The publication of both the story and the photo in the Territory’s highest circulating newspaper generated no responses from potential volunteers.
Nevertheless it did prompt two invitations to speak on the morning program of two local radio stations. I used the air time to similarly publicise the research and ask for volunteers. This approach was also unsuccessful in eliciting responses from potential volunteers, apart from an almost incomprehensible voicemail from someone claiming to be drunk. In a further attempt to reach potential volunteers, I posted posters asking for volunteers to participate in discussions about drinking and promising a free movie pass on noticeboards around the university campus. This third strategy was also completely unsuccessful.

It is possible that the effort involved in taking the initiative to contact me may have deterred potential candidates from volunteering to participate. However, it is also possible that the provision of a free movie ticket, which is the only token of recognition that the University Human Ethics Committee would approve, may have been a grossly inappropriate compensation for the time and effort required of participants. Certainly it was not in line with the level of incentives being offered around the country to focus group participants. As Phillips and Smith (2000) point out, in 2000 the value of incentives was closer to $40 than that of a movie ticket, an amount which is likely to have increased since then. It is widely accepted among focus group experts that some level of monetary compensation is appropriate and sometimes necessary in order to recruit participants (Greenbaum, 1993; Krueger, 1994; Morgan, 1988); however the University Human Ethics Committee did not agree.

Considering the difficulties encountered in recruiting participants according to the strategies outlined above, and the large amount of time invested with no results, I drafted a list of potential participants and their phone numbers from my
pool of acquaintances. As an additional means of approaching further potential participants, I attended lectures and tutorials at the university, with the permission of lecturers and tutors, and spoke to students about the research. I invited them to volunteer and provide their contact details. Course credit was not offered in exchange for participation. It was made clear that participation was voluntary and not a part of their course. Students were informed that even if they did provide their contact details, they would be free to refuse to participate or to withdraw from the study at any time. Those who provided their contact details were informed that they would be contacted at a later date with the time and venue of the focus groups.

Some lecturers and tutors preferred to hand out information sheets instead of allowing me to talk to students. In these cases the lecturers and tutors were given copies of the plain language statement (reproduced in Appendix B) which contains the same information that I explained in person in other classes. These lecturers and tutors were also provided with a sign up sheet which allowed participants to fill in their name and contact details as well as their availability.

The combination of these methods resulted in a list of 66 contactable, potential participants. A snowballing technique was also employed to gain access to more potential participants, a technique previously used in focus group studies of alcohol consumption (See for example Lyons, 2006). At the end of the focus groups participants were asked to either suggest some of their friends who they thought may be interested in participating and provide their contact details, or to hand out my business cards to their friends urging them to contact me to volunteer. The snowballing technique allowed me to contact four more potential participants.
Contact.

I contacted potential participants by phone one week before a scheduled focus group. During the phone conversation I introduced myself and reminded the person of how I had obtained their phone number. This part was omitted for acquaintances. All those contacted were informed of the research being undertaken and were given the opportunity to ask questions. I explained that I was looking for people who were willing to share drinking stories in a group setting and take part in a research project. When further clarification was sought, I expressed an interest in the experiences of the participants as they related to drinking. The same explanations were offered during all contact with participants. It was reiterated to all who were contacted that if they chose to participate, they would be free to withdraw at any time.

During this first phone call potential participants were also informed of the venue for the next group discussion, starting and finishing times, the availability of refreshments and the offer of a movie ticket as a token of appreciation. The people who declined to participate were thanked for their time and their details were erased from the list of potential contacts. People who were willing to participate but were unavailable for the scheduled focus group were asked whether they would be willing to be contacted at a later stage for the same purpose, albeit with an alternative date. If they said they were, their number was retained and they were contacted again at a later date. If they said they weren’t, their details were erased from the list of potential participants. Those who agreed to participate in the scheduled focus group were asked for their postal address in order to establish and maintain direct communication about the research.
Approximately ten potential participants were contacted for each focus group. I tried to confirm at least six people for each group. This decision was directly informed by the consideration that not all invitees would eventually participate. Over-recruitment was a strategy consciously employed in anticipation of a relatively high drop-out rate. Ultimately the groups were deliberately designed to be small in order to provide ample time for each participant to discuss topics which they all had considerable experience with (Morgan, 1996). This also facilitated the management of active discussions by the facilitator. Although the person leading a focus group is commonly called a “facilitator”, I use the term “facilitator” after Myers (2007) to display an orientation to their discursive work as “enabling talk rather than mediating pre-existing positions” (p.102). Moreover, as I hired a professional to lead the first focus group, in order to learn the art of facilitating, I use the term facilitator to refer both to myself and to them.

*Follow-up.*

Volunteers who agreed to participate were contacted two subsequent times prior to the group meeting. This repeated contact was a strategy designed to enhance the likelihood that invitees would attend the focus groups (Stewart & Shamdasani, 1990). Written confirmation of the willingness to participate was posted to all who accepted the invitation, the same or the next day the phone calls were made. This included a letter of confirmation (reproduced in Appendix C) and a Plain Language Statement (reproduced in Appendix B). Those who had agreed to participate were again contacted by phone a day before the scheduled group to confirm attendance. All those contacted confirmed their attendance at the group the next day, though not all eventually attended.
Sixty eight people were contacted and invited to take part. Of these, 13 declined the invitation citing reasons such as prior commitments or lack of transportation. Of the 55 willing to take part, 27 simply did not show up and were either untraceable by phone at the start of the groups or, when contacted, apologised and confirmed they could not attend after all. This resulted in a sample of 28 participants recruited in the aforementioned manner. Another participant, an acquaintance of mine, joined Focus Group 3 when she walked past the postgraduate lounge as I was about to commence the discussion with that group. On another occasion, a participant whom I had not previously contacted was brought along to the discussion by his friends. Since these last two people had not received an information sheet in the mail like the others, they were given one to read at the time. The 30 young people who participated in the eight focus groups conducted generated just under 14 hours of discussion (13 hours and 52 minutes). Group size ranged from three to seven including the facilitator.

Although eight focus groups or thirty participants might be criticised as too small a sample for the purposes of a PhD, as previously noted, the object of study in this research was talk rather than the people generating the language. Thus the critical issue was the generation of sufficient data to yield numerous instances of the talk to be studied, so as to enable the warranting of a solid argument through, for example, the outlining of exceptions that can be used to assess claims (Wood & Kroger, 2000). In this regard, small samples or a few focus groups are adequate for the investigation of an interesting range of phenomena, since a large number of linguistic patterns are likely to emerge from a few participants (Potter & Wetherell,
Consequently, just less than 14 hours of discussion were considered sufficient for the purposes of this research.

§3.1.2. The Participants: Description

The inclusion of a section on participant description in this thesis follows traditional psychological report-writing formats. However, unlike traditional psychological reports, the reflexivity of the discursive approach utilised in this study invites a discussion of the underlying issues inherent in conventional “participant description” sections.

Inherent in participant descriptions within social psychology is the implicit assumption that the characteristics described, most commonly age, gender and socio-economic status, indicate something relevant and important about the participants. This assumption is one that is not often questioned, particularly as participant description often contributes to the assessment of the validity of much research. On the other hand, the discursive approach raises the broader issue of “context” within qualitative social research and in particular the use of contextual details to enhance analysis. The question disputed within DP is the degree to which analysts need to look “beyond” the words of participants to extrinsic factors such as demographics in order to understand their participants’ activities.

Whilst the issue of context is often hotly debated amongst discursive psychologists, the term context itself is not always easily defined and often means different things in different research paradigms (Buttny, 1998; Tracy, 1998). At the most abstract level, context involves the juxtaposition of a focal event and a surrounding field, where the latter is considered context (see Tracy, 1998 for an in-
depth discussion of context). What is considered focal, as well as what is considered surrounding, varies considerably across disciplines. For example, Tracy (1998) notes that context can be considered bodily activities such as gaze, gestures and posture, where the subject of study is language. However, context can also be the social, historical, political or physical setting of a conversation, a speaker’s socio-cultural features like gender, age, social class, education, ethnicity, and profession to name a few, as well as social-cognitive features such as beliefs, expectations, goals and the like (Tracy, 1998).

Within the social science tradition, context is usually divided into extrinsic and intrinsic context (Tracy, 1998). The former refers to information that is outside the text that is being analysed, for example, information about demographic variables, settings, circumstances, etcetera… The latter refers to parts of a text that are outside the particular segment under scrutiny at any particular moment, such as what a speaker said at another point in a discussion (Wood & Kroger, 2000). It is generally accepted among discursive as well as conversation analysts that the consideration of intrinsic context is not only desirable during analysis, but necessary. The consideration of intrinsic context in discursive and conversation analytic research reflects a recognition of the reliance of utterances on prior utterances both for their production and interpretation. Essentially it is a recognition that utterances constitute context for subsequent utterances. Wood and Kroger (2000) note that participants themselves rely on this conceptualisation of utterances, as can be clearly demonstrated in any passage of talk.

The contentious issue is the use of extrinsic context in discursive analyses. To what extent should an analyst rely on information that is outside the text they are
considering, like the age or gender of a speaker for example, in order to aid their analysis? It has been suggested, for example, that the problem is not that it would be incorrect to say that a speaker is a 20 year old woman (Wood & Kroger, 2000). The problem is that both this and many more characterisations of that same speaker are possible. Other equally accurate characterisations might be, for example, full-time student, part-time bank teller, mother of three, housewife, middle child, migrant, smoker, and so on. So how does an analyst choose between them? On what basis should an analyst select extra-textual information deemed relevant to the text under study?

One of the ways that is often recommended to deal with the issue of extrinsic context is to introduce it into analysis only if it is demonstratively relevant to participants (See for example Wood & Kroger, 2000; Potter, 2004b; Willig, 2001). The importance of demonstrative relevance was first proposed by Schegloff (1992 cited in Tracy, 1998) and was subsequently often erroneously described as the conversation analytic position. Since then, Schegloff’s recommendation has become the standard to which authors relate their views. His view has the practical virtue of limiting an analyst’s theorising regarding all the possible external factors that may have impacted on talk (Edwards, 1997). After all, as Potter (1998) argues, there is an indefinite number of possible contextual descriptions of any one interaction, thus making a selection process fraught with difficulties. How do we know that the contextual information an analyst provide is relevant to participants in the here and now of their talk? Schegloff’s view circumvents these questions by conceptualising context as *that which is talked into being* by the speakers (Buttny, 1998).
Both discursive psychologists and scholars adopting Schegloff’s view of context are primarily concerned with evidence to be found in talk, rather than basing interpretations on prior assumptions about people, society or whatever else. However, unlike the latter, discursive psychologists generally take a more moderate approach. Within the field of DP, it is sometimes acceptable for analysts to use information not strictly found in talk, in order to aid analysis (See Potter, 2004b for example). The consensus is that the occasional introduction of extra-conversational knowledge, whether acquired through fieldwork or other means such as personal experience, needs to be justified as relevant and meaningful to the speakers themselves by reference to the data at hand (Wood & Kroger, 2000). Essentially, in the words of Wood and Kroger (2000) “the recommendation is not to ignore context, to leave out what is important, but to be very careful about how it is brought into analysis.” (p. 129).

The only exception to this treatment of context, at least according to Wood and Kroger (2000), is the consideration of the general circumstances in which the interaction under study took place. This helps to “set the scene” for the text to be analysed, rather than warrant any claims about the text. The presentation of information relating to the circumstances in which the interaction to be analysed took place aids reader comprehension regarding the possible contexts in which the text would make sense. This is why information regarding recruitment and the general conduct of the focus groups like location, availability of refreshments, timing and the like is included in this chapter. Nevertheless I must stress that the status of the information presented as context is always provisional. The provisional nature of contextual information arises from the fact that the written version of the
circumstances under which the talk was generated, for example, within a university classroom, might not match the participant’s version, that is, the circumstances identified by the participants as relevant (Wood & Kroger, 2000).

In addition to the consideration of general circumstances, unlike other discursive work, this particular study also includes information regarding the participants. Such information is included with the strict proviso that it is not used to inform analysis or as the basis upon which to form conclusions regarding the data. However, it has been suggested that the inclusion of some form of participant description, much like the consideration of general circumstances, might help the reader to contextualise the data produced. Therefore, the table on the next page presents a necessarily restricted number of possible participant characteristics, in order to provide the reader with some information, however limited, regarding the people involved in the production of the data that will be analysed in this study.
Table 1.
Participant Characteristics

<table>
<thead>
<tr>
<th>Focus Group 1</th>
<th>Age</th>
<th>Gender</th>
<th>Study</th>
<th>Employment</th>
<th>Group Dynamics</th>
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<tr>
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</tr>
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<tr>
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### Participant Characteristics (continued)

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<th>Gender</th>
<th>Study</th>
<th>Employment</th>
<th>Group Dynamics</th>
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<tr>
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</tr>
</tbody>
</table>

| Focus Group 7          |     |        |       |            |                |
| at the researcher’s home |    |        |       |            |                |
| Emily                  | 22  | Female | PT    | PT         | Acquaintance   |
| Sophie                 | 19  | Female | FT    | PT         | Acquaintance   |
| Olivia                 | 19  | Female | PT    | PT         | Acquaintance   |

| Focus Group 8          |     |        |       |            |                |
| at the researcher’s home |    |        |       |            |                |
| Ian                    | 25  | Male   | No    | FT         | Acquaintance   |
| Jim                    | 22  | Male   | No    | FT         | Acquaintance   |
| Tom                    | 25  | Male   | No    | FT         | Acquaintance   |
| Van                    | 33  | Male   | No    | FT         | Acquaintance   |
| Ethan                  | 23  | Male   | No    | PT         | Acquaintance   |

* Note. As these participants left the session before the end, they did not complete a questionnaire and therefore not all data are available.

**FT** = Full time, **PT** = Part time.

### 3.1.3. The Logistics

The focus groups were carried out in two stages. During the first stage, two focus groups were conducted in February and March 2005. During the period of
analysis following the first two groups, several personal factors intervened making it impossible to continue running the focus groups until two years later. The remaining six groups were conducted between April and June 2007.

*The venues.*

All focus groups were conducted in one of three possible venues: the university’s postgraduate students’ lounge, my home, or a local urban drinking establishment. The venues were selected after considerable thought, in view of suggestions that environmental factors influence communication as well as the level of rapport between participants (Stewart & Shamdasani, 1990). The specific choice of venue for each group was informed by its accessibility to participants and its ability to maximise the participants’ comfort and facilitate an informal discussion.

Three focus groups conducted with participants recruited from university lectures and tutorials were conducted on university campus in the postgraduate students’ lounge. The participants involved appreciated this venue as it minimised the disruption to their day, given that most of them were already on campus at the time their focus group was scheduled. On the other hand, some of my acquaintances who had never been on university grounds expressed discomfort at the thought of travelling there. Therefore, three focus groups made up of my acquaintances were conducted at my home. Lastly, two other focus groups were conducted in a local urban pub close to the participants’ work places, just after the end of their work day. These focus groups were held in a back corner of the establishment with the music appropriately turned down by the manager. During the two sessions we were undisturbed by the few patrons having a quiet drink at the bar.
In all instances I was at the venue early to set it up according to the recommendations in the focus group literature (Greenbaum, 1988; 1993; Kreuger, 1994; Stewart & Shamdasani, 1990). Seating was arranged in a circle where possible; usually around a table in order to maximise opportunities for eye contact among participants and facilitate discussion. First names were displayed on tags in front of the participants, a strategy said to enhance rapport (Kreuger, 1994). The recording equipment was always placed in the centre of the group.

The time.

The focus groups were usually held during weekday afternoons around 5pm so as to minimise the possibility of clashing with work, study or social commitments. The exceptions were the three focus groups conducted at my home which were held at 6pm, at 8pm and at 1pm respectively, to accommodate participants’ wishes.

The facilitator.

Since I had never conducted qualitative research before, a professional facilitator was engaged to conduct the first focus group. This decision was based on the conceptualization of a doctoral degree as a time of learning and a lack of confidence in my facilitating skills. It must be stressed that the engagement of a professional facilitator had nothing to do with getting at the “truth” behind participant responses, which is the reason why the use of experienced facilitators is usually highly encouraged (Greenbaum, 1993; Kitzinger, 1994). The engagement of a professional facilitator for the first focus group allowed me to observe and learn effective “facilitating” techniques.
After the first focus group, in the interests of professional development, learning and experience, I facilitated the second group under the supervision of the professional facilitator. During the second focus group, the professional facilitator took on the role of assistant, handling the technical side of things like recording and unexpected interruptions, leaving me free to focus entirely on the conduct of the discussion. Additionally, the professional facilitator carefully observed my interaction with participants and provided valuable feedback designed to improve my facilitating skills, for example, I should not be too quick to jump in to fill moments of silence in order to allow sufficient time for speakers to continue or for other participants to comment. Since the professional facilitator was confident that I was sufficiently competent to manage groups by myself, I proceeded to conduct the rest of the focus groups alone.

My approach to facilitating was based on Wood and Kroger’s (2000) recommendations that facilitators should be interventionist, that is, neither neutral nor indifferently supportive. They advocate the role of the facilitator as one who challenges participants not by criticising their contributions, but by providing opportunities for participants to consider alternatives and possibilities (Wood & Kroger, 2000). This approach to facilitation is at odds with more standardised interviewing procedures where facilitator contributions are scripted, minimised and usually not the subject of analysis. This digression from more traditional interviewing protocols is understandable from a discursive perspective which considers both the interviewer and interviewees as constructing and co-constructing versions as well as drawing on interpretative resources during talk (Gough, 2003b).
In the interests of reflexivity, it is worth pausing to consider how my facilitating of the focus groups, with the exception of the first, influenced data generation. Whilst it is clear that as a co-producer of the data I contributed to its production, it is more difficult to specify exactly how. It could be argued that my young age and student status may have made participants more at ease and more willing to discuss intoxication than if the facilitator had been an older professional. Nonetheless, there appeared to be no major differences in terms of disclosure between the focus groups that I facilitated and that facilitated by the professional facilitator.

There was one particular aspect of the focus groups in which I feel my influence is worth noting. In re-listening to the focus groups I noticed that perhaps I had tried to overcompensate for my comparatively moderate drinking experience by treating intoxication as unproblematic and even going as far as to respond to it positively. That is, in hindsight it appeared to me that I may have been particularly supportive of intoxication during the focus groups, whereas in a more natural situation I probably would have been more inclined to question it. It could be argued that it was this attitude toward intoxication that helped to generate what, on the whole, were quite favourable accounts of intoxication. Perhaps, had I taken a more contrary or argumentative approach, the repertoires that I would have ended up describing might have been entirely different. This is certainly possible, though I would argue, unlikely. First of all, positive accounts of intoxication also permeated the first focus group, which I did not facilitate. Secondly, what I have described as my positive attitude towards accounts of intoxication did not prevent the generation of more negative accounts, which is particularly best illustrated in my analysis of the
repertoire of addiction. Clearly, whilst it is uncontroversial to suggest that I influenced data generation, it is definitely harder to explicate exactly how.

*The facilitator guide.*

The focus group discussions were facilitated with the use of a number of topics that I outlined in the form of a facilitator guide. This guide (reproduced in Appendix E) was employed to stimulate and guide discussions as well as to ensure the generation of relevant instances of talk (Goodman, 2001). The guide was also a reminder to ensure that the main focus of the session was to be personal experiences of DTI, rather than values or beliefs. This focus on narratives was useful during analysis in terms of identifying the constructed sense of events, their causes and consequently, issues of accountability (Edwards, 1997).

The facilitator guide briefly outlined three specific areas that required coverage: 1) typical drinking patterns, 2) high consumption patterns and 3) binge drinking. At the same time, it incorporated sufficient flexibility to pursue the topics of importance, relevance and interest to the group members themselves, a strategy suggested by various focus group researchers (Stewart & Shamdasani, 1990; Morgan, 1996). The topics were arranged in order from most general to more specific. In practice, there were only slight variations from the guide in the order of presentation of the issues, necessary to keep the conversation flowing as smoothly as possible. Although the guide included suggestions of specific questions to ask (just in case the facilitator was stuck for words), the exact wording was left to the facilitator.
Audio Recording.

One of the technical issues considered with regards to data generation was the mode of recording, that is, whether this should include both audio and video channels, or whether audio alone would suffice for the purposes of this research. Wood and Kroger (2000) suggest that the advantages of video recording need to be weighed against the substantially greater technical difficulties involved. Based on this advice, a decision was made against video recording mainly due to logistical limitations. Moreover, focus group audio was considered sufficient for the purposes of the current research considering its stated aims.

The audio of the groups was recorded using a digital recorder. The resulting sound quality was very good although frequent overlapping talk and laughter proved extremely challenging to transcribe. The first and second focus groups were also recorded using an analogue recorder for back up. The resulting sound quality was extremely poor in comparison to the digital recordings. As a result, the analogue recordings were not used for the purposes of transcription, with one exception. After the digital file of the second focus group recording was lost (along with a number of other files) during a University-wide server migration, the analogue recording was used to complete transcription. Consequently, the transcription of Focus Group 2 is not as detailed as that of transcripts from other focus groups.

Conducting the groups.

Once most participants had arrived at the venue and prior to the commencement of the session, refreshments were served following indications that the presence of food relaxes participants (Sheehan & Ridge, 2001; Stewart &
Shamdasani, 1990). These consisted of non-alcoholic\textsuperscript{1} drinks and a platter of finger food such as bread sticks, cheese and olives or pizzas. Refreshments were available to participants throughout the duration of the focus groups. Prior to the commencement of the session participants were also handed the consent forms for perusal and signature.

After a brief introduction outlining the purpose of the session and limits to confidentiality, the facilitator, that is, either myself or the professional engaged for the first focus group, encouraged participants to introduce themselves before moving on to stimulate discussion on the topics outlined in the facilitator guide. Once each topic had been thoroughly explored, that is, when conversation came to a halt and could not be revived, the facilitator summarised the main experiences discussed and invited feedback on the participants’ experience of the group. At the conclusion of discussion, participants were handed their free movie pass. The groups ran between 90 and 175 minutes.

\textit{Ethical Issues.}

This research has been approved by the University Human Ethics Committee. All individuals were fully informed regarding the objectives and procedures of the research on contact with the researcher, and made aware that participation was voluntary. Before the commencement of the focus groups, participants were provided with an honest assessment of potential risks and benefits inherent in the study, made aware of their rights as participants and invited to

\textsuperscript{1} This was the subject of a few jokes which could have made for an interesting analysis in themselves, especially during the groups conducted at the pub.
provide voluntary informed consent. All this information was also summarised in the Plain Language Statement which all participants received. Even the two participants who joined the focus groups at the last minute and thus did not previously receive a Plain Language Statement, were given the opportunity to peruse such a statement at length and ask questions before the discussion started.

It was not anticipated that the proposed procedures would induce any harm greater than that encountered in daily life and indeed they did not. Participants were made aware through the Plain Language Statement that should they encounter some discomfort as a result of the procedures they could leave at any time. No one did so. The Plain Language Statement also contained the phone number of an alcohol and other drug counselling service as well as of the Executive Officer of the Charles Darwin University Human Ethics Committee. Additionally, the researcher was available after the sessions to discuss any concerns that may have arisen, though no one took the opportunity to voice any.

Participants were made explicitly aware of the audio taping and given the opportunity to leave if they do not agree to their voice being recorded. No one did so. All identifying information (e.g. names, particular locations, background details) were changed during transcription. Ultimately, comments are not traceable to specific participants. The identity of contributors is known only to those who actually attended the sessions and participants were asked to maintain the confidentiality of the discussions. The secure storage of audio recordings and omission of identifiable information in the transcripts ensures the anonymity of participants and their contribution. Furthermore, the confidentiality of discussions taking place in a pub was ensured by our acoustic isolation from other patrons.
Illegal or criminal information provided by participants was dealt with in accordance with the Australian Psychological Society’s Code of Ethics, Section B.6: “Members must not disclose information about criminal acts of a client unless there is an overriding legal obligation to do so or when failure to disclose may result in a clear risk to themselves or others”. The exception would have been the reporting of instances of child abuse, which Northern Territory law (Community Welfare Act 1983) requires to be reported. However, no such instances were disclosed. The consent form and plain language statement made the limits of confidentiality explicit. Confidentiality issues were also reiterated at the beginning of the focus groups, allowing time for questions and clarification, which ultimately no one took up. Had I been worried about the level of risk or harm to any one participant, I would have endeavoured to speak to them privately and discreetly following the open discussion. However, I was not greatly worried about anyone person in particular.

3.2. Discursive Analysis: “Sexing the Chicken”

The previous section of this chapter discussed the “generation” of data for the purposes of this research. This section deals with the subsequent treatment of the recorded focus group audio. It begins with a discussion of the process of transcription before beginning to delineate a rough constellation of analytical procedures which facilitated the analysis reported in the next few chapters of this thesis.
§3.2.1. **Transcription: A Preliminary Analysis of the Data**

Although transcripts of audio recordings are necessary to facilitate analysis, it is important to point out that the data for the purposes of this research are the recordings themselves (Wood & Kroger, 2000). The transcripts allow the consideration of details of the talk such as pauses, intonation, overlapping speech etc… that are impossible to fully consider and keep in mind whilst listening to audio recordings. Transcripts are also necessary to allow others to check the analysis (Wood & Kroger, 2000). However, since a perfectly accurate rendering of audio in a written format is impossible, analysis was consistently based on the close simultaneous consideration of both transcripts and audio.

There is some debate amongst discourse analysts regarding the level of detail required for an adequate research transcript. The most widely used system of notation employed by discourse analysts is that developed by Gail Jefferson for Conversation Analysis (Jefferson, 2004b). This takes into consideration the requirements for the analysis of talk as a social act rather than an expression of ideas or phonetics for example. It includes details such as shifts in pitch, stress, and volume, as well as latching, sound elongations, closing and continuing intonation as well as pause length, to name a few. The debate over level of detail required for an adequate transcript regards just to what extent the Jeffersonian system should be applied to discursive research; whether a complete and full transcription of all data is required, or whether simpler versions, including only selected features of conversation, are sufficient for the purpose of some discursive analyses.

Most researchers draw on a selection of notations only, sometimes called a Jeffersonian-Lite transcription (for example see Ahmed, 2000; Kaminer & Dixon,
1995; Lawes, 1999; Potter & Wetherell, 1987; Tileaga, 2005; Augoustinos et al., 2005). This usually captures the words and some gross indications of stress and intonation, but omits pause timing and more subtle elements such as closing and continuing intonation, as well as latching. The usual arguments cited in support of the “lite” approach are the extraordinary amount of time a full transcription involves, the interference of excess details with readability, the adequacy of a reduced transcription in capturing the broader ideological content of talk and the distraction provided by the minutiae of conversation in this context (Potter & Hepburn, 2005; Potter & Wetherell, 1995).

Despite the widespread use of the Jeffersonian-Lite transcriptions, some analysts and especially Potter and Hepburn (2005), strongly advocate the use of the full system of notation. They argue that the analysis of even broad patterns of talk will be most effective if it deals with the more subtle details of conversation. Moreover, according to these scholars, a more comprehensive representation of talk facilitates the demonstration of the jointly constructed nature of conversational encounters, including the close interdependence of participant and facilitator talk. Lastly, a more complete mode of transcription is proposed as the most effective means to facilitate evaluation of discourse analytic work. Wood and Kroger (2000) also argue for a full and detailed transcription of all data. However they also acknowledge the difficulty inherent in this for a beginner and the fact that a full transcription may not always be the most suitable course of action.

In practice, the choice of transcription system and level of detail normally depend on the level and type of analysis one wishes to conduct (Edwards & Potter, 1992). Varying levels of information in transcripts reflect differences in analytical
concerns. For example, whilst the use of a Jeffersonian system, both the full and Lite versions, reflects a concern with how talk accomplishes social actions, a less detailed transcription such as that found in almost all qualitative youth drinking studies (see for example Engineer et al., 2003; Sheehan & Ridge, 2001; Workman, 2001) is likely to coincide with broader concerns about the meaning of drinking experiences (Edwards & Potter, 1992). Clearly then, the transcription carried out for the purposes of this research was not simply a translation of auditory information into written cues, but a theoretical and analytical activity (Wood & Kroger, 2000). It involved theories of language, method and topic. In fact transcription formed a part of analysis, encompassing decisions regarding the features of talk considered potentially analytically relevant, as well as other analytical judgements such as whether and how to time pauses, the norm against which to compare vowel elongations and so on (Edwards & Potter, 1992).

For the purposes of this thesis a full Jeffersonian transcription of all audio recordings would have been impractical. In particular, the time-consuming nature of a detailed transcription of all talk, including that not subjected to in-depth analysis, was considered to outweigh its advantages. It was considered beyond the scope and resources of this study, particularly as I was a novice at this type of transcription. At the same time, the importance of a detailed transcription of data to be analysed in further detail was clear. Consequently, in the initial exploratory stages of analysis, simple transcripts were produced of all individual focus group recordings which captured only the words and some obvious features of conversation such as long pauses and strong emphases. However, as analysis progressed to more in-depth exploration of selected data, the transcription of relevant passages was augmented
with more exhaustive minutiae of talk such as intonation, emphasis, precise pause timing and volume, using a slightly modified version of the Jefferson system (see Appendix G for a list and explanation of transcription notations). Such an approach to transcription has been previously used in the literature (see for example Brooks, 2009; Tileaga, 2004) and is particularly advantageous in that it repeatedly forces the analyst to turn back to and base analysis on the audio recordings. It thwarts the temptation provided by beginning analysis with a full transcription to base the analysis solely on the transcript rather than the audio.

The only exception to a Jeffersonian transcription of excerpts of data used for in-depth analysis, was the lack of transcription of laughter where this involved three or more speakers. Whilst the work of Jefferson (1979, 1984, 1985, 1988, 2004a) and others (Jefferson, Sacks & Schegloff, 1987; Potter & Hepburn, 2010) on the transcription and analysis of laughter makes it clear that it is preferable to transcribe it, it was not possible in this case. The coordination of laughter by three or more participants proved too difficult to transcribe partly due to the lack of distinguishable sounds from individual participants as well as the lack of visual cues. Whilst it is unquestionable that the transcription of laughter would have provided fascinating data for further analysis, it was not deemed critical to the purpose of the current analysis, which was to identify broad interpretative repertoires.

During transcription, passages of talk that were hard to understand were marked as inaudible to prevent the guessing of content. These sections were omitted from analysis. Additionally, all names of people and places were changed to ensure anonymity. Despite some criticisms of pseudonyms in the literature, these were used in preference to other ways of differentiating between speakers, such as randomly
assigned letters or numbers, as a way to indicate that the speaker is a person, and not some insignificant data producer. Taylor (2001a) argues that the use of names, even pseudonyms which indicate gender, could be viewed as an implicit claim that gender is relevant to the interaction, whereas in fact, it may not be. In this study, the use of pseudonyms reflected another procedure involved in the conduct of the focus groups, that is, the aforementioned display of first names on tags in front of participants.

The only people to be distinguished by the identification of speaker roles rather than a pseudonym are the facilitators (the professional facilitator of the first focus group and me). We are identified by the abbreviated form of “fac” in the transcripts. Whilst this practice has been criticised for suggesting that the identity encompassed by a role is more important to the interaction than the speaker’s gender or any other identity (Taylor, 2001a; Wood & Kroger, 2000), this label was used to draw attention to the nature of the data as derived from a researcher-contrived situation, rather than as simple conversation between friends which could otherwise be implied by the use of a pseudonym.

Despite possible criticisms of the transcription conventions used here, for the purposes of this thesis, gender and speaker roles were treated as analytical concerns only when they were made relevant in talk. This will become clearer in the next four chapters. Ultimately, any choice of signifier to indicate different speakers makes certain features of a speaker salient over others; it has both merits and grounds for criticism. In the end, the practices of using pseudonyms or category labels are not inherently problematic. As long as the analyst is aware of their implications and can
reflect critically on choices made, he or she can refrain from basing analyses on implicit assumption about the importance of extra-textual details.

§3.2.2. Further Analysis

Before presenting further details of analysis, it is important to emphasise that DP does not offer a series of analytical steps or procedures to follow. “There are no hard and fast rules for discourse research- it is defined by its interest in, and appreciation of, action and interaction as situated, practical and orderly” (Wiggins & Potter, 2008 p. 81). What DP offers is a broad theoretical framework outlining the nature of discourse and its role in social life (Potter & Wetherell, 1987). In perusing writings on how to conduct discourse analysis (DA), one often encounters instructions such as the need to develop an “analytic mentality” (Potter, 2004b p.207) or to follow “hunches” (Edley, 2001 p198), alongside ingenious metaphors such as that offered by Potter (2004b) which describes doing discourse analysis as “sometimes more like sexing a chicken than following the recipe for a mild Chicken Rogan Josh” (p. 207).

The expression “to develop an analytic mentality” is borrowed from Conversation Analysis for its eloquence in describing what the practice of discourse analysis entails (Potter, 2004b). Potter (2004b) maintains that doing this type of analysis “has an important element of craft skill” (p. 207), hence the chicken sexing simile. This point is often reiterated in discourse analytic writings where the development of analytic skills is often aligned with the development of a particular mentality, or way of approaching and interrogating the data (See for example Edley, 2001; Stanley, 2004). Discourse analysts stress that doing analysis does not involve
rigid procedures, steps or rules to follow but that the process of analysis is a more fluid, indeterminate and eclectic exercise (Potter, 2004b; Potter & Wetherell, 1987).

Despite many guides available on how to and how not to do discourse analysis, it is interesting that there is not a single guide that spells out a series of steps or procedures to follow (Wood & Kroger, 2000; Phillips & Jorgensen, 2002; Antaki et al., 2002). This lack of a set of procedures to follow in discursive analyses means that the exposition of the kind of methods employed to analyse data should be paramount in any report of discursive research. An explication of how data were interrogated allows a reader to more fully understand an analysis, especially the selection of particular features for further investigation over others, since no analysis can hope to exhaustively investigate any set of data.

It is difficult to describe a process as fluid as that of discourse analysis which hardly follows a series of pre-determined steps. A detailed step by step account of exactly how I analysed the data, of the endless transcript readings, listening to the audio, and all the “hunches” followed, is likely to be redundant and highly repetitive. Nevertheless, it is possible to outline the types of procedures, concerns and questions that guided analysis even if their explication does not follow the step by step, chronological account of procedures prominent in experimental research. The description of types of procedures that guided my analysis is not meant to imply that analysis was a structured and orderly exercise following the series of procedures outlined hereafter in a strictly sequential manner. There was no necessary sequence of activities. It would be more accurate to say that analysis was a messy and sometimes confusing exercise, and that the separate procedures outlined hereafter were more often than not conducted in combination with one or more of the others.
Procedures were also often repeated several times both in order to check a particular point of analysis and to investigate others. Ultimately this section is intended to provide a background to the insights and conclusions outlined in the next four chapters.

Before delving into a description of the kind of procedures and techniques that aided analysis, I would like to note that my experience of the process of analysis was not an entirely solitary one. In reporting analytical techniques, methods etc… it is easy to give the impression of analysis as a lonely endeavour. Even discourse analysis guides often neglect to mention the collaborative nature of much discursive work. However, I do not wish to perpetuate this inaccuracy here.

The role of supervisors, mentors and colleagues in the process of analysis is one that should not be dismissed lightly, especially in the case of a doctoral study where the student is learning to do discourse analysis, or indeed any novel approach. I cannot deny or fail to mention that my acquisition of what is often called a “craft skill” was guided by more experienced teachers and colleagues, through a process that has been likened to an apprenticeship (Stanley, 2004). One of the things that I found particularly invaluable during my candidature was my attendance at a Summer School on Discourse Analysis and Critical Psychology chaired by Martha Augoustinos and Ann Wetherell. This gave me the opportunity to learn from respected discourse analysts as well as from my peers. In fact one of the activities during the program was the collective analysis of a page of transcript from one of my focus groups. The discussion that ensued proved helpful in terms of sparking ideas for analysis (e.g. the role of laughter) that I pursued in more depth on my own. Other activities which contributed in different measures to my development of a
discourse analytic stance and prompted ideas for analysis were my discussions with supervisors and other colleagues, including email exchanges, as well as attendance and presentations at several conferences.

The acknowledgement of the influence and assistance of other people is not meant to imply that the work presented here is not my own. The working up of the analysis that will be presented in the appropriate chapter of this thesis was a long and intense process, which although greatly aided by the expertise and comments of others, is entirely my own, original scholarship.

§3.2.3. Selecting a Focus and a Corpus of Excerpts

Analysis of the recorded focus groups began with a general concern surrounding the construction of alcohol consumption by focus group participants. This was soon replaced by a concern with how participants constructed level of consumption (see for example Mancini-Pena & Tyson, 2007). This particular focus, in turn, sparked a more specific interest with the construction of heavy drinking, and in particular, with personal instances of DTI. The latter concern eventually resulted in the analysis reported in this thesis. The shifts in focus were due partly to the need to refine the topic of analysis and in part to the periodic topicalisation of binge drinking by the media. Regardless of the cause, the decision to focus analysis on constructions of personal instances of DTI obviously and necessarily had immediate consequences for analysis. The most pertinent was the forfeiting of more in-depth analysis of certain other aspects of the data, like laughter for example, which were not immediately and directly relevant to this chosen research focus. It is possible that there may have been a range of concerns not explored in the analysis presented in this thesis that could otherwise have been brought to bear on this same data.
However, arguably, it would not have been reasonable to attempt a more comprehensive analysis than the one presented here, since what would have been gained in breadth of scope would have been lost in density of detail.

As noted in the previous chapter, the questions guiding the analysis reported in this thesis were “What are the interpretative repertoires that young people draw upon when recounting experiences of DTI in a focus group setting? And, what functions do different repertoires serve in that context?” To answer these questions, all instances of talk constructing personal instances of DTI were gathered into one place or “node” using the software NVivo 7. The main aim of this coding was to produce a body of instances which could be later retrieved and explored in more depth.

Initially analysis was restricted to talk that explicitly referenced intoxication with words such as “drunk” as well as slang terms such as “pissed”, “maggoted”, “legless” and the like. However, as analysis progressed the corpus of data for study was expanded to include talk which although not explicitly constructing intoxication with the use of clear vernacular expressions, somehow seemed to allude to it. Thus, ultimately, analysis included all talk that demonstrably constructed intoxication, even in the absence of explicit references to intoxication. By “demonstrably” I mean that impressions that a particular segment of talk constructed intoxication were always checked by re-listening to the audio, whilst following the transcripts, with a view to determine how the talk was interpreted by the respondents in the interaction. For example, stories that did not explicitly mention intoxication, but were offered in reply to a facilitator’s question about intoxication were considered for subsequent analysis. Such stories were included in the corpus of talk to be analysed, as long as it
could be shown that the story was treated in subsequent talk as an acceptable contribution or one that adequately addressed the facilitator’s question.

In practice, inclusion or exclusion of instances of talk from the corpus of data under scrutiny was not definite, but constantly subject to revision following more in-depth analysis. The audio was often re-listened to alongside the transcripts to determine whether all relevant cases had been selected and analysed, following particularly illuminating insights. For example, when it became clear that intoxication could be constructed as recreation, therapy and addiction, all data was re-examined with a view to considering all segments of talk, and not just talk about intoxication, that appeared to include references to these three constructs. Although the final analysis reported in this thesis is firmly focussed on the construction of personal instances of DTI, it was informed by the unreported analysis of a much wider selection of talk.

The analysis presented in this thesis is supported by direct reference to excerpts which will be reproduced for the benefit of the reader. Given the importance of intrinsic context in the production of sequential talk, an effort was made to include as much intrinsic context in the presentation of excerpts as possible. Nevertheless, despite this consideration, the need to present contextualised talk was necessarily restricted by considerations of space.

The label “excerpt” is deliberately used in this thesis over others such as extract and example, according to the argument put forward by Wood and Kroeger (2000). They advocate its use over “extract”, which, they argue, may suggest an inappropriate concentration of that which is extracted, and over “example”, for the latter’s erroneous suggestion that analysis is something completed previously and
only now being merely reported. Thus, in accordance with Wood and Kroeger’s (2000) argument, the label “excerpt” is used in this thesis as a way to draw attention to the reported data as that which is picked out from a larger text. It functions as a reminder of the analyst’s role in the articulation and presentation of analytical claims.

With regards to the particular excerpts selected for reproduction in this thesis, each excerpt’s inclusion was governed by two main considerations. These were, the illustration of a critical aspect of analysis in as succinct a manner as possible, and the inclusion of excerpts from as many different focus groups as possible. Despite these considerations, the analysis presented in this thesis nevertheless does not include excerpts from Focus Groups 3 and 4. No excerpts are included from the latter group as this was made up of only two participants, both of whom consistently constructed moderate and low levels of consumption throughout the group. In terms of Focus Group 3, no excerpts are included from this particular focus group since the inclusion of excerpts from other focus groups was consistently considered more appropriate in each instance in terms of allowing crucial conclusions to be drawn in more succinct terms.

In Chapters 5 to 7, a number of excerpts are presented and analysed in detail in order to illustrate the employment of individual repertoires. In addition to the excerpts presented, there were more instances of strikingly similar constructions of DTI in the data. However, these are not reported since, whilst they may have differed in exact wording, their content and deployment were essentially similar. Moreover, it would have been most impractical to include all instances of a
particular use of a repertoire. Thus, the excerpts that will be reproduced are presented as evidence of a greater phenomenon.

Each excerpt included in the analysis presented in this thesis is accompanied by an identifier modelled along the following lines: Excerpt 4.1 FG2 29:00-31:00. The number after “Excerpt” identifies the chapter within which the excerpt is located, as well as its position within that chapter. For example, the code above identifies the excerpt to follow as the first excerpt located in Chapter 4. The next code identifies the Focus Group from which the excerpt is taken. Thus FG2 indicates that the excerpt to follow is taken from the second focus group. The numbers following this code function as a timestamp abstracted from the audio recording delineating the exact time within the recording of the focus group from which excerpt was taken.

Before moving on to describe a series of analytical procedures, in the interests of reflexivity it is important to comment on the influence that I may have had on the analytical process. Certainly my fascination with intoxication among Australian youth, mentioned in Chapter 1, helped to shape the focus of my analytical attention. Also, the keen awareness of alternative means of constructing intoxication, experienced during my childhood in Italy, likely influenced my analysis. Moreover, as a mostly moderate drinker, I found myself focussing heavily on the excuses or justifications of DTI in order to better understand what I perceived to be its normalisation among young people. Unquestionably, my influence on analysis, from the selection of a focus to the selection of Excerpts included in this thesis, is likely to have been pervasive. It is clear that the way I approached the data was influenced by my own experiences and preconceived ideas about the topic of talk. To list all the
possible ways I could have influenced analysis would be time consuming, but more importantly, it would be difficult to ever define such a list as complete. Therefore, without unnecessarily prolonging this discussion, it is sufficient to note that whilst I influenced analysis, I was also careful to ground all analytical claims in the data so as to be able to make verifiable analytical observations independent of any idiosyncrasies that I may have brought to bear on the analytical process.

§3.2.4. “Immersion”, Coding and the Search for Patterns

In preparation for analysis, the audio files were listened, and re-listened to several times in order to “immerse” myself in the data and obtain a sense of it as a whole, as advocated by Creswell (1998). I tried to follow the suggestion that analysing talk is a lengthy process of “living with” one’s data, reading, re-reading and following up hunches until a pattern of language use emerges (Stanley, 2004). Accordingly, one of the main preoccupations during this time was the identification of recurrent formations in linguistic constructions (Gillies, 1999). This involved searching for different ways of talking about DTI, signaled by repetitive idioms or metaphors (Lawes, 1999). Several recurring ways of talking about DTI were noted, coded using NVivo and marked for further analysis. For instance, one recurring way of talking about DTI identified early on during analysis was through the use of metaphors constructing the outcome of consumption such as getting “plastered”, “legless” or “shit-faced”. Instances of talk constructing DTI in this manner were thus coded under the node “metaphorical intoxication”. Later, as analysis progressed, this particular node became redundant and the instances of talk it encompassed were eventually subsumed under more sophisticated nodes.
Summaries of analytical observations were periodically compiled encompassing not only recurring constructions to investigate, but also thoughts on what these constructions achieved, what alternatives they were constructed against and what possible functions they might serve. The summaries also included ideas to be followed up and questions such as, for example, does talk about enjoyable instances of DTI always omit references to possibly negative consequences of consumption? They also included hunches on the importance of certain conversational features such as the importance of co-construction of particular “versions” of DTI by a number of participants. As analysis proceeded the list of hunches expanded and developed appropriately as some ideas turned out to be unfounded or incompatible with the data whilst others proved more fruitful.

Initially, analysis was conducted by selecting potentially interesting excerpts of audio from the collection of excerpts marked for further analysis and conducting a written, in-depth analysis of each one. This strategy was particularly useful in overcoming writer’s or analyst’s “block” when faced with vast amounts of data. The analysis of selected excerpts reflected the concerns of the broader analysis, directing these toward specific instances of data. Each excerpt was analysed with a view to addressing the previously mentioned (see Section 2.6.3) questions directed at the data as a whole:

i) What are the interpretative repertoires that young people draw upon when recounting experiences of DTI in a focus group setting?

ii) What functions do different repertoires serve in that context?
These questions were tailored to individual excerpts, allowing for the interrogation of smaller instances of data along the following lines: how is DTI being constructed in this instance? What functions does this particular construction serve in this context? And how is this construction worked up to sound credible, counter possible alternatives, as well as to report and simultaneously justify or excuse the events?

The analysis of random excerpts of audio allowed me to focus at length and in detail on specific ideas which inevitably changed and evolved as analysis proceeded and more excerpts were examined in detail. It allowed the quick modification, deletion or emphasis of different analytical observations. Additionally, writing up many individual analyses also served as a check for the plausibility of the analytical claims being made and as a basis for the consideration of possible alternatives. Lastly and most importantly, the detailed analysis of different excerpts facilitated comparisons between different instances of talk.

Consistency and variability both within and across excerpts were the main considerations guiding the identification and delineation of patterns of talk. The search for consistency both within and between different excerpts enabled the identification of features shared by different accounts. On the other hand, the search for variability, also within and across different excerpts, enabled the identification of differences in content, form and function of accounts. The latter was particularly helpful in signalling different ways of constructing DTI. Patterns of variation and consistency helped to map out different ways of talking about DTI leading to the identification of three “interpretative repertoires”, by providing important clues as to the rhetorical organisation of accounts. The rhetorical organisation of accounts, that
is, their construction, was explicated by comparing different accounts as recommended by ten Have (1999). The search for variability across excerpts also directed analytical attention to the kind of activity, such as explaining, justifying or persuading, that different versions of events are designed to achieve. Based on the patterns of consistency and variability observed, hypotheses were formulated regarding the possible functions and consequences of different accounts in different contexts.

§3.2.5. Exceptions and Negative Case Analysis

The purpose of hypotheses regarding function and consequence of different accounts was to make sense of the patterns of consistency and variability regularly found in the data, as well as the inevitable exceptions. The explication of the function and consequences of different accounts helped to explain why a particular event could be described in one way on one occasion and in a different way on another. It also helped to explain how a particular account could be used as an excuse in one context and as a justification in another. Exceptions or “negative cases” were actively searched out throughout analysis with a view to revising conclusions until they could account for all instances of talk. The analysis of exceptions or “negative case analysis” (Franklin & Ballan, 2001; Gilgun, 2001) often advocated by discourse analysts, is an analytical technique not particular to this discipline, indeed it is the process involved in analytic induction (Wood & Kroger, 2000).

Negative cases or exceptions, essentially excerpts that did not seem to fit in with the analytical observations supported by all other excerpts, were dealt with in one of three ways advocated by discourse and conversation analysts. Exceptions
could be used to reinforce analysis by showing the participants’ orientation to both the standard basic pattern of speech, and the excusability or local rationality of deviance from it (ten Have, 1999). Potter and Wetherell (1987) have explained that this can be achieved by outlining special features of the organisation of exceptions that allow them to fulfil the required function in some other way. However, they state that if these additions do not work out, then the adequacy of the original explanations needs to be reassessed (Potter & Wetherell, 1987). In effect, this is the second option. In the instance of cases that could not be integrated into the original analysis, revisions were made to the proposed hypotheses until these could also account for the deviant cases where this was possible. Finally, another possibility was to produce a separate analysis for the negative cases which treated them as bringing about an alternate reality (ten Have, 1999).

Whilst the analytical considerations outlined in this section might appear to be a rather abstract account of analytical moves, their delineation is fundamental for an in-depth appreciation of the analysis that will be recounted in more detail in the following chapters of this thesis. Specifically, the discussion of analytical moves such as “negative case analysis” in this section prepares the reader for the forthcoming analysis. It provides a background to the conduct of analysis designed to enhance appreciation of the subsequently reported analytical observations.

### 3.3. Constructions of Drinking to Intoxication in Focus Group Talk: Recreation, Self-Therapy and Addiction

In essence, the main question that this thesis begins to address is: How are personal instances of DTI constructed in focus group talk? An in-depth analysis of
the focus groups conducted for the purposes of this study suggested there were at least three major, distinct possibilities of construction. Each construction can be understood as an interpretative repertoire or a recurrently used characterisation of DTI. These interpretative repertoires were labelled: Recreation, Therapy and Addiction.

With the exception of addiction, the labels delineating each repertoire are not taken from the data. They were employed to succinctly convey a picture of the three major, distinct ways of talking about personal experiences of DTI, whilst, through broadness of scope, adequately encompassing the extremely flexible ways in which DTI could be constructed as three distinct phenomena. Each repertoire is discussed in detail in the following three chapters.

The analysis presented in this thesis is not intended as absolutely comprehensive. As Taylor (2001a) points out, discourse data are so rich that it is impossible to reach a point where the analysis is complete, such that there may be nothing more to note about it. Thus the analyses that follow this chapter are not intended as exhaustive explications of all the possible ways that focus group speakers can construct DTI. Such a feat, if it were possibly achieved within the period of doctoral candidature, could not be contained within a reasonably sized thesis. Thus, the analyses outlined in this thesis are presented as a detailed illustration of the three main constructions of DTI used in the focus groups conducted for the purposes of this study. Further research, with additional data from a wider range of sources, would be necessary to consider the possibility of still more repertoires and the functions these may serve.
It is also important to note that the individual analyses of excerpts are not presented as definitive illustrations of all the analytically interesting features of the reproduced talk. There were a number of aspects of talk that I considered during analysis that are not commented on in this thesis (for example see Mancini-Pena & Tyson, 2007). That is because they were not considered strictly relevant to the final analysis presented here. Moreover, there are a number of potentially interesting aspects of the data, which went beyond the scope of this study, that were not considered at all. The construction of gender identity, of femininity and masculinity, is an example. Lastly, it is taken for granted that given the rich nature of the data, new insights would come to light on further consideration. Consequently, the following three chapters reproduce the state of my analysis at a particular point in time when it was considered sufficiently developed to be meaningful and to make a significant contribution, as well as to generate interest and discussion.

3.4. Conclusion

The purpose of this chapter was twofold: to delineate the methods of data generation and to provide the background to analysis. The first part of this chapter delineated the aim of the research reported in this thesis as well as the research questions formulated to fulfil that aim. What followed constitutes a recount of the operations performed in order to answer the research questions. The recount began with a discussion of the data generation methods employed for the purposes of this research. This included a discussion on participant recruitment and description, as well the logistics involved in this study. The second part of this chapter then dealt with the subsequent treatment of the
recorded focus group audio, namely the type of analysis that it was subjected to, beginning with the style of transcription. It also introduced the three main repertoires identified in this research, which will be discussed in later chapters. The next chapter builds on this to paint a still richer portrait of the background to this study by expanding on the detail highlighted here and rendering a more adequate picture of the focus group set up.
4. **Setting the Scene**
The previous chapter outlined the procedures involved in data generation for the purposes of this focus group study. It also outlined some of the analytical steps guiding the examination of the resultant audio recordings. This chapter now sets the scene for the detailed analysis to follow by discussing the grounds on which participants were recruited as well as the task understanding constructed for them.

4.1. Constructions of the Focus Groups’ Purpose

The use of interview, and by extension, focus group data for discursive analyses has previously been criticised for a failure to sufficiently elucidate “the interview set up” (Potter & Hepburn, 2005 p. 281). Potter and Hepburn (2005) argue that at least some discursive research has failed to address what are considered critical questions pertaining to participant recruitment. These include questions such as, for what purposes were participants recruited, and on what premises? Or how was the topic of study constructed for participants? In order to avoid that criticism in my study, I will address the aforementioned questions in this section. Since similar and more in-depth analyses of focus group and interview set ups have already been conducted (see for example Potter & Puchta, 2007; Puchta & Potter, 2004; Rapley, 2001a; Rapley, 2001b) what is reported here is, in the interests of parsimony, only a cursory analysis of the set up of the focus groups conducted specifically for the purposes of this study.

The participants’ introduction to the focus groups was usually by way of a phone call, and occasionally in person, during which I explained that I was researching “drinking among young people” and was interested in collecting “drinking stories” and “thoughts on drinking”. These initial conversations were not
recorded due to practical as well as ethical considerations. Nevertheless, the recruitment documentation, as well as the facilitators’ recorded introductions to the focus groups, provides a means to illustrate how the focus groups were constructed for participants both verbally and in writing.

§4.1.1. Written Constructions from the Recruitment Literature

The Letter of Confirmation (Appendix C), Plain Language Statement (Appendix B), and the Consent Form (Appendix D) allow for what will be a necessarily cursory analysis of the way the focus groups were “officially” presented to participants in writing. As the following discussion will show, the construction of the focus groups in these documents is carefully managed to balance a tension between the competing needs of conforming to standard research protocols and presenting the focus groups as an unpretentious, informal and thus potentially enjoyable exercise in order to increase likelihood of participation. The result is that the focus groups are constructed in these documents both as serious research and informal discussions.

The importance and seriousness of the focus groups is immediately conveyed by the formal university letterhead on which the Letter of Confirmation is printed. This is supported by further in-text mentions of the university and expert figures within it throughout all three documents. For example, the Plain Language Statement mentions “Dr Graham Tyson” (Appendix B line 5), and accords Hemali Seneviratne the formal title of “Executive officer of the Charles Darwin University Human Ethics Committee” (Appendix B lines 52-54). The serious nature of the enterprise is also more explicitly constructed with references to what is constructed as implicitly required “success and quality of our discussion” in the Letter of
Confirmation (lines 9-10). Furthermore, the mentions of a PhD or doctorate in psychology also contribute to this construction of importance and seriousness, whilst the requirement to sign a Consent Form similarly infuses the proceedings themselves with an official nature.

Alongside this formal construction, the focus groups are simultaneously constructed as informal and unpretentious. This is done in a number of subtle and not so subtle ways, such as, by addressing participants by their first name in the Letter of Confirmation, and personally signing it. Additionally, the strong and repeated foci on “your experiences” (Letter of Confirmation lines 13 and 15) and “your views” (Plain Language Statement line 18, emphasis in original), as well as the first person wording of the Consent Form to be signed, position the participants as experts. Although the wording of the Consent Form can be traced to legal and ethical requirements, it could be argued that its effect, in this case, is to somewhat demystify the research process by reversing the traditional power dynamic between researcher and participants, where the researcher may be seen as an “expert”. Moreover, the references to “views and experiences” address the kinds of questions that might be asked during the focus groups and demonstrates their simplicity. Such references also implicitly signal that there are no right or wrong answers and that every contribution will be valued. Thus, overall, the recruitment documents collectively constructed the focus groups as both serious research and informal discussions.

In addition to revealing a conflicted construction of the nature of the focus groups, the recruitment documents also reveal a very specific positioning of focus group participants. Alongside the previously mentioned focus on personal
experience, all three recruitment documents position participants as “young people” and justify their recruitment based on their membership of this category as determined by the researcher. The Letter of Confirmation, Plain Language Statement and Consent Form all construct the research interest as “drinking among young people” (Letter of Confirmation lines 12-13 emphasis added), “the experience and views of drinking of young people” (Plain Language Statement lines 7-8, emphasis added), and “young people’s lives” (Consent Form line 4, emphasis added). The inference is that participants are being recruited as members of the category of “young people” rather than say as university students or Darwin residents or binge drinkers for example. Whilst the documents do not contain any references to the 18 to 24 age criterion, I verbally clarified this on many occasions when questioned regarding what was meant by “young”.

Whilst positioning the participants as “young people”, the recruitment literature also offers an indication of the way the “topic” of the focus groups was constructed. The Letter of Confirmation explicitly constructs “drinking” (lines 2 and 12) as the topic of the focus group discussion. In this manner it portrays “drinking” as an action of research interest and an action in which participants are assumed to have engaged in, in order to be able to contribute to a discussion of it. The Letter expands on the predetermined focus of the discussion on lines 12 to 13 where it introduces the clause “among young people”, within which it locates the invitee. Thus, even before participants contribute to the research they are positioned both as “young” and as having “experiences and stories” of drinking. This positioning is further reiterated in the Plain Language Statement (see lines 3, 7-8, and 17-18) and the Consent Form (lines 4-5).
Note that the construction of “drinking” in the Letter of Confirmation does not include an evaluative dimension. The use of the term drinking (as opposed to say binge drinking or any other possible term) refers to alcohol consumption whilst avoiding any moral connotations, thereby positioning it as an “amoral” activity. On the other hand, the Consent Form portrays drinking in a somewhat more positive manner by constructing “the importance of alcohol in young people’s lives” as an undisputed fact which a researcher may examine and seek to understand (line 4). The Consent Form also introduces the concept of diversity and of drinking styles, in contrast to the more unitary construction of drinking in the Letter of Confirmation (Consent Form lines 4-5).

Despite the non judgemental construction of drinking in the Consent Form, the Plain Language Statement betrays a more critical evaluation. In particular, within the section “Benefits of the Study”, “alcohol-related harm among young people” (Plain Language Statement, lines 13-14) is constructed as a fact that the present study’s findings will help to reduce. The reference to “harm” here and the portrayal of its reduction as a “benefit” introduces a more critical view of drinking and its consequences. As it stands, the particular formulation employed avoids placing the blame for harm on young people, by portraying it as simply “alcohol-related” (added emphasis). Thus overall, the topic of these focus groups is constructed as the activity of “drinking”, an activity constructed at different times with neutral, critical and accepting overtones.

Overall then, the recruitment literature for the study can be said to achieve a number of things. Paramount among these are: a conflicted construction of the research as both formal and informal, as well as a multifaceted positioning of
participants as both “young” and as having experiences and views on “drinking”. In
the documents, the topic of drinking is also constructed variously as a neutral,
somewhat positive as well as a possibly harmful activity. Despite this analysis, it is
important not to put too much weight on these observations, since participants may
not have carefully read the documents discussed. Therefore it is also important to
examine how the focus groups and their purpose were constructed in interaction.

In addition to the recruitment materials, the purpose of the focus groups was
re-constructed by the facilitator during the introductory welcoming address at the
beginning of each group, after the commencement of recording. In the spirit of a
discursive analysis, rather than describing how the purpose of the focus groups was
constructed, the following discussion will illustrate how it was constructed in
interaction.

§4.1.2. Verbal Constructions from the Facilitator Introductions

To show how the purpose of the focus groups was constructed in interaction,
my introduction to the third focus group will be considered in some detail. Since the
introductions to each focus group were based on the same Facilitator Guide
(reproduced in Appendix E), they were, in the end, similar in terms of content. The
reproduction of the analysis of one of these introductions is intended for broader
illustrative purposes.

The introduction reproduced below was chosen over seven possible others
because it allowed the illustration of a number of relevant points in the briefest
possible manner. The focus group it is taken from was only the second I facilitated
by myself and the first I facilitate without a professional present. Needless to say I
was very nervous. Although I am somewhat embarrassed by my performance, a
necessarily brief examination of it allows for the elucidation of a number of relevant
points. Prior to the start of the recording I had welcomed three scheduled
participants and a fourth acquaintance who happened to walk past at the time, into
the university’s postgraduate lounge. All participants read and signed consent forms
consenting to the recording of the discussion. Once everyone was settled in their
seat, I started the recording.

Excerpt 4.1 FG3 00:00 – 02:55

1 Fac okay=i’ll start the recording. (1.0) and uh:m
2        (0.9).hhh >i’ll jus let you know a
3 bit.<=basically tch uhm what you’re all here
4 for is uh: (. ) cause you’re all ↑young (0.1)
5 a:::nd >cause lucy w(h)alked p(h)ast at the
6 r(h)ight [t(h)ime<]
7 Lucy     [hhh .hhh.]
8 Fac eh .hhhh (. ) a:nd uh:m (. ) and=because you
9 _drink. or have drunk- at some stage a:nd >what
10 I wann to do=basically is to:< find out uh::m
11 (0.3) you know >when you drink=how you
12 drink=that type of stuff.< .hh get some-
13 _drinking sto;ries (. ) the types of things that
14 you get up to? .hh uh:m or=maybe (. )if=you (. )
15 _don’t drink then- explain why you don’t ander:
16 (. ) y-=uhm >.h also your views on young people
17 drinking.< uh:m >BAsically anything to do with
drinking< i wanna know about. uh:m (0.5) what i
wan is- as many different view- > points of
view< as possible .hh so if you:: disagree
with-> what somebody is saying or if you have a
different experience< .hh then you know uh:
jump in and speak up .hh and uh > the emphasis
is really on personal experience< so:: you know
(.) everyone’s- different and- it’s all-
equally important. (0.3) uh:m hh mobile
phones=if > you can put them on silent or
whatever, cause sometimes they interfere with
the recording< .hh and- you will notice that i
am recording the conversation > i think that it
says something< (0.2) to that effect on the
↑ consent form. .hh uh::m tch er BUT I WILL
maintain all confidentiality in that uhm if
there’s any names and stuff uh- they will be
deleted from the recordings and not published
etcetera .hh > so even though< what you say
might end up say (0.3) uhm in my ↑ thesis o: r uh
(0.2) in a journal article (0.4) uh > nobody
will know that it was you that said it.< hhh
.hhh a:: nd there are limits to the- uh:
confidentiality in=that if you: (.)report (.)
child abuse .hhh uh:m > i’m gonna to have
to report you< to the po: lice so ° >don’t say
anything about that—if you know anything about
it. .hh uh >but not— for example—if you talk
about dee you aye and stuff like that< that’s—
fine. .hhh UHM TRY N have one person speaking
at the ti:me and— not like— little groups— of
people speaking. .hhh uhm (0.6) uh=basically
give—everyone— a go. uhm >try not to talk over
each other.< (0. ) .hh SO TO START, .hhhh
some people don’t know each other here.=well—
just have— if everyone can just say (0.3)>just
tell us a little bit about themselves< uh:m(.)
tch how they drink, that type of thing. .hhuhm
(1.3) jst— (0. ) >a little bit of an—<
introduction to who you are. .hh i can start,
my name’s Ester=obviously i’m— doing this
research=I’m doing a pee haych dee at
the university. .hh o::n uh (0. ) drinking among
young peop:le .hh and er hh (.in terms of how
i drink .hhh i:: >i’m a pretty casual drinker<
in that uhm (0.2) >you know< I drink with
mea:ls and stuff like that. .hh I don’t drink—
I don’t tend to: (.) drink a lot. .hh EXCEPT
FOR HHH sa:y >special occasions< if— there’s—
like— hen’s nights uhm new year’s eve parties
>an stuff like that< big stuff. .hh uh::m hh
>that’s about it from me< (0.5) so:
This introduction, similar to the ones for other focus groups, formally introduces the discussion to follow “on the record”, so to speak, once the recording device was switched on. It also deals with ethical issues such as confidentiality and consent forms. Over and above that, however, this and generally all focus group introductions, create a context for the discussion to follow by demonstrating, through particular language use and style of delivery, the kind of discussion and input expected, as well as allowed, from participants (Puchta & Potter, 2004).

In all introductions the formality of the forthcoming interaction was constructed by references to considerations that characterise research encounters including recording, confidentiality and consent. Explicit references to these features of the encounter draw attention to the research context of the interaction, thus contributing to the construction of at least some level of formality. In the excerpt above note the multiple references to recording (lines 1, 29, 30 and 35), as well as the reference to consent forms (line 32), and confidentiality (lines 33 and 41). Essentially, all introductions constructed the interaction to follow as “formal” in one way or another, even if simply by virtue of drawing attention to the research context of the interaction. That is arguably one of the effects of dealing with the necessary bureaucratic formalities of research encounters.

In Excerpt 4.1, like most other focus group introductions, the purpose of the interaction is formulated along the lines of what “i”, that is, the researcher and/or facilitator, want to “find out” and what “you”, the participants, can tell me about drinking. Thus the purpose of the focus groups is constructed as information-gathering, with the information sought relating to details of the participants’ experience of drinking (when, how much, how often, what happens), as well as their
“points of view”. This construction of the interaction positions participants as the experts on the topic of study. It reiterates a position made available in the recruitment literature which depicts the participants’ practices and experiences as the focus of interest. That is, it underlines that participants were recruited on the basis of their own experiences rather than as spokespeople for the experiences of the youth population in general.

The construction of the focus group as an information gathering exercise during the introduction somewhat reiterates the formal, research context of the interaction. Nevertheless this was then undermined through the use of various rhetorical devices to construct a more “informal” and relaxed context for the discussion. The construction of the focus groups as both formal and informal mirrors the conflicted construction available in the recruitment literature as discussed in the preceding section of this chapter.

There are numerous rhetorical devices that can be used to construct informality in a focus group setting. Puchta and Potter (2004) name seven devices relevant to a traditional, market research focus group setting. Some of these are also relevant to the focus groups conducted for the purposes of this research. In Excerpt 4.1 in particular, I, as facilitator, use at least four devices they mention to construct informality. These are: 1) the display of informality through pauses and hesitations, as well as through 2) word choice and 3) intonation, in addition to 4) managing the physical setting.

Puchta and Potter (2004; Potter & Puchta, 2007) note that a facilitator can encourage informality, in part, by “displaying her own stance to the interaction as informal and not rule bound” (Potter & Puchta, 2007 p. 112 emphasis in original).
This is evident in my introduction above. Note for example my somewhat lengthy construction of the kind of information sought (lines 10 - 26). It starts off as a quick listing of topics “when you drink=how you drink=that type of stuff.” which could suggest scripted, predetermined topics. However, it does not end there. Subsequent elaboration is interspersed by pauses, “uhmming”, and elongated final vowels. This style of delivery works to suggest that I’m thinking of the topics off the top of my head, rather than reading through pre-determined topics or questions. Note also the questioning intonation of “the types of things that you get up to?” which additionally works to construct the questions as “off the cuff” rather than scripted. By starting with a quick listing of topics of interest, followed by a more “unscripted” elaboration, I set the precedent for the conversation to emerge as answers to predetermined questions, yet not limited by these. The potential is made available for the discussions to also be more organic and free-flowing.

The request for “stories” (Excerpt 4.1 line 13) also encourages a certain degree of informality by constructing a particular mode of information delivery

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^2 Whilst the wording of this brief analysis might suggest a deliberate attempt to fashion the conversation in a particular way, this in not what is intended. It is more likely that the way I introduced the focus group, including the presence of ‘uhmming’, changes in tempo of delivery etc… was at least partly due to a certain level of nervousness. Nevertheless, the point of the discussion is not to comment on the factors influencing my particular production of the introduction, but rather the effect that such an introduction was likely to have on the subsequent development of the focus group discussion.
normally associated with more informal rather than formal settings. With this particular word choice I encourage informality by explicitly telling participants to contribute to the group in an informal manner, as facilitators sometimes do (Potter & Puchta, 2007). Other word choices were also similarly important in displaying my stance to the interaction as informal, and thereby constructing an informal setting. For example, see the references to “stuff” (Ex 4.1 lines 12, 34 and 46), and “etcetera” (Ex 4.1 line 36), as well as the idiomatic expression on Excerpt 4.1 line 23 to “jump in and speak up”, and the informal enunciation of “cause” (Excerpt 4.1 lines 4 and 5) as well as “wonna” (Excerpt 4.1 line 18), among other things. Through the use of words and expressions characteristic of an informal register I encouraged informality by personally setting the tone for the interaction or demonstrating with words, the kind of interaction expected or allowed to follow.

In addition the use of an informal register, as well as pauses and hesitations, I also set the scene for the discussion to follow by demonstrating the kind of input expected or required of the participants. In other words, by producing a personal introduction at the end of my introduction to the focus groups, I was, as it were, providing participants with a model reply or contribution. Note in particular how the introduction is delivered as organic and informal with pauses, hesitations, the repeated use of “stuff”, and a false start on lines 42 and 43 in the excerpt above (I don’t drink- I don’t tend to: (. ) drink a lot.). I did not talk
about my drinking during any other focus group\textsuperscript{3}; nevertheless its production here communicates to participants an acceptable style of contribution to the discussion.

Another way in which I demonstrated the kind of relaxed, informal discussion expected from the group was through the use of intonation. That is, smiling intonation, as well as laughter. I made use of these rhetorical devices right at the beginning of my introduction, with a humorous construction of one particular participant’s reason for attending. By using a smiling intonation and interspersing words with laughter particles, I was able to mark Lucy’s unexpected attendance as a humorous event. Lucy then goes on to affiliate with this kind of characterisation by responding with what could be heard as light laughter. The importance of this event in terms of setting the scene for the discussion to follow is that it characterises the interaction as one in which laughter is condoned and even encouraged, as opposed to a more serious interaction where laughter may not be appropriate.

Interestingly, laughter was present in the introductory exchanges of all focus groups. Despite differences in production in each case, both in terms of who initiated the laughter, who participated, and how it was managed, its presence in each

\textsuperscript{3} In retrospect I think this particular description of my drinking was specifically designed to make one participant- Lucy- feel at ease. Lucy was the accidental participant that walked past the postgraduate lounge on the university grounds at the time of that focus group and decided to join us. As I knew most of the participants in this group, I thought she may have been the only light drinker or abstinent person in a group of heavy drinkers. Therefore I tried to make her feel at ease by describing a personal, moderate style of consumption. The other reference in the introduction to “if you don’t drink” was also probably directed at her. This was also not ever again mentioned in any other focus group introduction.
introductory exchange arguably contributed to the characterisation of the encounter as an informal, relaxed affair; the kind of encounter where laughter was possible. It is also likely that the laughter would have served other more specific functions in each case, however those go beyond the scope and purpose of this analysis.

Another major aspect of the focus groups which contributed to the construction of informality was my manipulation of the physical setting. As discussed in the Logistics section of the Method chapter, the focus groups were carried out at either one of three possible sites: the university’s postgraduate students’ lounge, my home, or a local urban drinking establishment. The sites were specifically chosen for their informality and therefore their ability to make participants feel at ease. In each setting I was able to provide comfortable seating, usually around a coffee table or table, and food. These are all aspects of a focus group which arguably contribute an air of informality to the proceedings (Puchta & Potter, 2004).

To summarise, the focus groups were constructed in various contrasting manners for participants across the recruitment materials and facilitator introductions. Paramount in each setting was a struggle between constructions of the focus groups as formal, information seeking research endeavours, and more informal, almost anything-goes discussions. The topic of the interactions was also variously portrayed as either “drinking among young people”, or the participants’ own drinking experiences. In the former case, the participants were also subtly posited as being recruited based on their researcher-assigned membership to the “young people” category. Essentially such contrasting constructions can be explained as a result of the competing needs to balance the extra local need to
generate data in accordance with research protocols with the requirements of the interaction at hand (cf. Mazeland & ten Have, 1996).

Whilst the recruitment literature and facilitator introductions make available different constructions of the focus group interaction— as research, “talk” and information gathering— the purpose of the focus groups was always further negotiated throughout the interaction. As Lawrence (1996) so eloquently noted in relation to interviews, “the discussion parameters achieved in an interview’s opening section are not permanent but are renewed, altered, and transformed as the interview unfolds” (p. 188). As such, the purpose and research context of the elicited talk will feature as an analytical concern in the rest of the analysis, where this becomes or is made relevant by speakers.
5. **DRINKING TO INTOXICATION AS RECREATION**
The previous chapter set the scene for the analysis of the construction of drinking to intoxication (DTI) in the focus groups conducted for the purposes of this study. This chapter outlines how speakers constructed DTI as recreation and discusses some of the possible functions of this construction as it was employed during the focus groups. In writing about speakers as opposed to participants I mean to draw attention to the discursive work of the facilitator as well as study participants.

The interpretative repertoire of recreation was by far the most often used construction of DTI during the eight focus groups. The term “recreation” was employed for the purposes of this study to describe a particular way of constructing DTI. It was deemed to capture the essence of a cluster of sometimes considerably different means of constructing DTI as fun, enjoyable and of little serious consequence.

The literature contains a number of terms or expressions used to describe young people’s alcohol consumption in a manner that emphasises enjoyment and pleasure derived from drinking. As indicated in Chapter 2, Szmigin and colleagues (2008) write that their participants’ “alcohol consumption is a form of calculated hedonism allowing a type of pleasure which is contained by time, space and social situation” (p. 365, my emphasis). Similarly, Brain (2000) writes about “bounded hedonistic consumption” (p. 8) and “rational hedonism” (p. 9). More similarly to this study, Harnett and colleagues (2000) write about “recreational drinking styles” as “hedonistic ways of drinking where alcohol and its related activities are seen as means to attain a high” (p. 70). Additionally, Mayock (2004) notes that the young Irish people in her study consistently described their drinking and drug consumption
as “social” and “recreational” (p. 126). These terms are similar to the label “recreation” employed in this thesis, in that they underline a pleasurable aspect of consumption. However, where the terms used in previous literature were employed to describe a particular pattern of alcohol consumption, the current research utilises the label recreation to convey a particular manner in which focus group speakers constructed DTI as an enjoyable leisure activity.

Focus group speakers constructed DTI as recreation in a number of different ways. These included portraying DTI as a positive means of diversion in itself, such as a “game” in Excerpt 5.1; by portraying it alongside recreational activities such as going out in Excerpt 5.2; or within a recreational setting such as a birthday occasion in Excerpt 5.3. Despite considerable variations in exact mode of construction, a great deal of focus group talk tended to position DTI as a pleasurable pastime or as recreation. How this was achieved and the purposes it served are now illustrated by reproducing analyses of three separate excerpts (5.1, 5.2 and 5.3) that construct recreation in different ways.

5.1. Enquiring about Intoxication: A story of “drinking heaps”

The first excerpt constitutes a “prototypical” case of the construction of DTI as recreation, in the sense used by Jacobs (1986 cited in Wood & Kroger, 2000). It is a case that is prototypical in appearance rather than typical in occurrence. In the following excerpt, John works up DTI as recreation by portraying drinking to the point of vomiting as a game. Moreover, the excerpt below also documents the role of the facilitator in eliciting “recreation” accounts of heavy alcohol consumption. It is taken from the middle of the second focus group. Prior to it, participants had been
answering a question about when drinking becomes too much and when one should stop drinking. The excerpt begins with my formulation of a new question.

**Excerpt 5.1 (FG2 29:00–32:35)**

1 Fac okay=now i want-=we’ve >sort of<- >kind of<- talked (..) a little bit about this .hh uhm but
2 i want more examples- of [situations]=
3 ((cough )))
4 Fac =where you’ve drunk (..)a lot. >other than what you’ve already told me,< where you’ve drunk perhaps >a little bit mo:re< than normal.
5 (2.0)
6 Fac but i want- a story=>I wanchu to tell me< the story of how it happened. i want from start to finish (0.3) how didju (0.2)decide to start drinking=like- what happened, uh:m what happened during, what happened af ter, (0.2) this is (1.0) >when you were drinking< A LOT.
7 And- (0.2) what to you is a lot might- not be- what to >somebody else=like<- (0.3) might be like- not much to somebody ;else .hh so, for you specifically (0.3) a story of:: er::m when you >foundyourself drinking ;heaps<=other than the one that you’ve already told °of course.°
8 (1.0)
John Oh. when i uh: _first_ rocked up tuh college=so t’was about (0.3) a week into it (0.5) uh:m (0.7) ay:: mate of mine took me over (0.6)uh:: (. ) to his mates’ (where)- who were living on ah-nother _t_ower and uh:m (0.4) so we went over to their place. and (0.7) they were just (0.6) uhm >actually that story’s shit< uhm ((shared laughter))

Fac w(h)y is t(h)at? heh [heh]
John [O::h] I’ll tell you another one. [My=a]= Fac [heh h]
John =mate of mine [ok- like-]= Fac [ heh eh ]
John =it’s still at college, (0.4) _rocks_ up with a slab⁵ and uhm (0.7) and he >chucks it down<=we all had- you know- perhaps- between us >we had about< (0.2) two slabs between >°you know°< four o-four people and _he_ brought another slab and he says (0.2) let’s play eights.=and he’s- when it comes to _drinking_ this particular fellow is uh:: (. ) @he’s hard _core_=you know=he really (0.6) he’s enthusiastic=getss (. ) gets

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⁴ Refer to Chapter 3, Section 3.1.2 for an explanation of the nontranscription of laughter.

⁵ A “slab” is a slang term denoting a carton of 24 cans or bottles of beer.
the boys going and stuff like that (0.3) and so
we all sat down to a game of eights ☺ (1.0) uh
as i’ve discussed thee (0.2) eights is like uhm
(0.4) >a drinking game<= and (0.8) uhm and you
can pick on people= you know= like you (0.3) deal
out a set o’ cards and (0.5) uhm (0.3) like
(0.4) one - one card is- a sip of (0.3) beer and
(0.4) you can (0.4) dish out- thirteen cards
and (0.3) that’s- that- you have to skull the
beer, like that.

Fac Mm
John and uhm so (0.4) you can find yourself jus
(0.7) uh nailing cans >left right and centre<
(0.5) and uh:: there’s (0.5) one time where at
( ) (0.6) oh i (0.7) uhm i got
hit with (0.3) uh >two lots of thirteen cards
and had teh:< knock down (.) two beers straight
away=i’d already (.). had about- six beers or
something like that (0.5) and by the end of it
(.) i think you know (0.8) uh: (0.4) i i
would’ve had (.). about three quarters of the
slab and (.). you know (it was) oh (0.6) i’m not
ah: (.). big bloke (.). by anyone’s [standards]=
Fac [ heh heh ]
John =so (.). it was uh: (.). all over red rover after
that.
So what happened? What happened after that, tell me? 😊=

John =uh::m (0.1) s: i- i- i told the fellas i was goin 'ome=and 😊 then i ended up going to the toilet😊 (.) but- (0.5) like- (0.2) we were doing it in the kitchen and my (0.7) home was >you know< my room was just down the corridor

John and uhm (0.4) ended up in the toilet, spewed my guts up (0.6) uh:: had a shower (0.5) went back out and started-dr(h)ink(h)ing (h)ag(h)ain hhh .hh heh heh heh heh .hh=but (0.4) °yeah° (0.8)

Fac so tell me how it ended

John uh::m (1.0) well oh- it’s just (0.5) died down=like it (0.5) people just started dissipating and=

Fac =yep (1.2)

John °that’s pretty much° (0.3)

Fac alright (0.6)

John ((coughs)) (1.2)

Fac anyone else?
The question I asked at the beginning of this excerpt requests information about “situations” (line 3) when participants have “drunk (. ) a lot” (line 5). There are two particularly interesting features of this question for the purposes of this analysis. The first is an emphasis on high levels of consumption, constructed through varied, repeated references to volume in the above excerpt: “a lot” (lines 5, 14 and 15), “a little bit more than normal.” (line 7), and “heaps” (line 19). The other is the emphasis on story (lines 9, 10 and 18) or the request that participant contributions conform to a story format (line 10ff), which mirrors the facilitator’s request in Excerpt 4.1 of the previous chapter. These observations are crucial to an analytical appreciation of the talk that follows my query.

John responds to the request for a story about heavy consumption by beginning to formulate a story about when he “first rocked up toh college” (Excerpt 5.1 line 22). However, this story is not finished as John subsequently goes on to describe it as “shit” (Excerpt 5.1 line 28) and to launch into the telling of “another one” (Excerpt 5.1 line 32). This overt demonstration of a change of mind regarding the information contributed to the focus group discussion can be traced back to my influence, as facilitator, on the talk produced by participants.

6 There are many other features of the talk that I could comment on at length but have consciously refrained from doing so. In my analysis I present only the features of talk required to support my analysis and consider alternative interpretations. To do an in-depth exploration and exposé of all the features of each excerpt would be well beyond the scope of this study.
The question I used introduced the concept of a story to this particular group. I used the word to refer to a particular style of delivery with a beginning, middle and end (see in particular Excerpt 5.1 line 12ff). However John orients to another implication of this word, which is the notion of a good versus a bad or “shit” (Excerpt 5.1 line 28) story, a notion also employed by the facilitator in the previous chapter (Excerpt 4.1), albeit with a different meaning and for a different purpose. In this context John treats shit stories as ones not worth telling by halting his production of the first story on line 28 of Excerpt 5.1. By inference then, one can assume that the second story that John does tell is a good one, or one worth contributing to the group.

§5.1.1. *“Let’s play eights”: Drinking to Intoxication as a Game*

The story that John tells in Excerpt 5.1 (lines 32ff) complies with my request about occasions involving drinking “a lot”. John orients to my request for stories of heavy consumption by constructing volume of consumption in some detail. First he constructs an initial level of alcohol available between four friends. Then he adds that another friend brought more alcohol to the group and finally, John constructs his actual level of consumption. This level of detail regarding volume allows John to present the level of alcohol available as ordinary, whilst positioning his actual consumption as particularly elevated, in line with my request for stories involving high volumes of consumption.

The initial “two slabs between >°you know°< four o-four people” (Excerpt 5.1 lines 39-40), to which another “mate” added a third, yields a total of 3 slabs or 72 cans of beer between 5 people. Whilst the potential level of consumption that such a distribution of alcohol implies, that is, nearly 14.5
beers per person, would be considered alarming from a professional public health perspective, this is not the way it was depicted by John. In fact, John employs two discursive moves which, combined, function to present this particular volume of alcohol as ordinary.

First and foremost the localisation of the story as taking place “at college” conjures a context frequently associated with heavy alcohol consumption. As Kypri, Matthew & Wright (2005 p. 713) note in relation to college and university, “folklore depicts drunkenness as integral to the student experience”. This is true especially for countries like Australia and the U.S. Thus John’s reference to college is not an inconsequential comment, but one that performs an important function.

Edwards (1997) observes that the narrative detail of “stage setting comments” produces an interpretative frame for what happens later. Thus, even before he mentions alcohol consumption, John constructs a conducive context for its occurrence. In this way, by depicting drinking as taking place at college, John minimises the potential excessiveness of the constructed level of consumption by locating it in a context where heavy consumption could be considered unremarkable. This discursive move was frequently used as a means of “normalising” one’s consumption or placing it in a context within which it could be heard as normal. Other examples of this discursive move are Kim’s contextualisation of her intoxication as part of her sister’s birthday in Excerpt 5.3, and Tom’s positioning of his past consumption as “in the army” in Excerpt 7.1.

The second discursive move that allows John to present the level of alcohol available as ordinary is his construction of the initial amount of alcohol four friends
had between them (“two slabs between you know four o-
four people”). Specifically, the use of “you know” within this sentence works to establish consensus regarding the normality of such a situation (cf. Saxton, 2004). Also, the construction of initial volume of alcohol available as the division of two slabs between four people contributes to a depiction of reasonableness in that the individuals are portrayed as sharing, rather than consuming an absolute quantity individually. The fact that a fifth “mate” then brings along a third slab (“and he brought another slab”) is explained by depicting the particular individual as “hard core”. In other words, the fact that one mate brought an entire slab whilst four others were initially sharing two is explained on the basis of an individual characteristic, or the fact that “when it comes to drinking this particular fellow is uh:: (.) he’s hard core”.

In addition to this construction of the level of alcohol available on the occasion, John constructs his personal level of consumption as particularly elevated in accordance with the facilitator’s emphasis on elevated consumption. He does this with four discursive moves. First, John’s construction of the fast consumption of two beers in addition to a previous “six beers or something like that”, indicates a rapid one third increase in consumption. This works up a portrayal of consumption as snowballing in contrast to the relatively steady increase in consumption that might be expected of less excessive occasions. Second, John constructs his overall consumption as a majority proportion of a slab (three quarters); a proportion in excess of what was previously constructed as ordinary, that is, two slabs between four people or half a slab each. Third, the significance of this level of consumption is underscored by a reference to body size. The construction of
himself as “not ah: (. ) big bloke (. ) by anyone’s standards” emphasises the significance of the reported level of consumption for a “small” bloke. Last, the reference to “it” being “all over red rover after that” suggests that consumption reached a level that could not allow the game to continue, on the basis that further consumption would not have been physically possible. Combined, these four discursive moves position John’s actual consumption as particularly elevated on the recounted occasion, thus complying with my request for instances of particularly heavy consumption.

Whilst the construction of the consumption of three quarters of a slab or 18 beers might be expected to present problems for self-presentation in that it could suggest a “stigmatised identity” (Benford & Gough, 2006 p. 428) such as alcoholic or heavy drinker, it does not appear to do so in this instance. Note in particular how the shared laughter on line 29 (Excerpt 5.1) functions as a demonstration that participants are responding to John’s story as a trivial affair, one that can be laughed at. In this way, the possibility of a stigmatised identity is jointly dismissed by all focus group speakers through a demonstration of treating the story as trivial. Laughter has also been similarly used to normalise “passing out” in the stories of some young English drinkers, allowing speakers to distance themselves from what the researchers called the “potentially risky and humiliating loss of (self-) control associated with drinking to excess” (Griffin et al., 2009 p. 465).

In the excerpt above, the shared laughter punctuating John’s story is suggestive of the rest of the participants’ receipt and validation of the recounted events as inconsequential. After all, co-conversants do not generally reply with laughter when a speaker constructs some kind of trouble (Jefferson, 1984). The
question then is: if other participants responded to John’s story as humorous or inconsequential, how was this inconsequentiality conveyed in John’s story? I will argue that John’s story depicted the recounted occasion and level of consumption as inconsequential at least in part through its construction of alcohol consumption as a game. I specify “in part” because it is easy to imagine how the same construction in a different context could nevertheless be taken as an indication of problematic alcohol consumption. In a counselling context for example, the construction of this level of consumption as part of a “game” might be taken as indicative of a considerable problem with alcohol which the drinker is unaware of or unwilling to admit.

John’s consumption is portrayed as part of a game through reported speech—“let’s play eights” (Excerpt 5.1 line 43)—attributed to the “hard core” (Excerpt 5.1 line 48) friend. In this manner, through the construction of a game (see also: “we all sat down to a game of eights” Excerpt 5.1 line 46), the act of drinking that is essentially the heart of the game (see Excerpt 5.1 lines 48ff) is positively constructed as “playing”. The verb “to play” positions the behaviour performed as part of the game, that is, drinking, as an activity engaged in for enjoyment or recreation. In this way, John positions the drinking that occurred as a form of recreation and therefore as trivial and inconsequential.

Within this construction of DTI, the actual act of drinking appears to be mentioned mostly for the benefit of the recording (see Excerpt 5.1 lines 47ff)\(^7\). In

\(^7\) John had mentioned the game earlier in the focus groups (data not shown). Although the context was somewhat different, the content was very similar and is therefore not reproduced.
particular, several linguistic features suggest that the mention of drinking may be occasioned by an orientation to the research context of the interaction. For example, the sudden change in tone from smiling to serious (Excerpt 5.1 line 46) audibly marks the mention of drinking as somewhat separate from the story being told. This separation could be taken to suggest that the rules of the game are being explained as a matter of protocol. Moreover, the formality of the expression: “as I’ve discussed”, which introduces the concept of drinking, stands in stark contrast to the informality of the language with which John had previously been describing the occasion. Previously in Excerpt 5.1 John had used the slang term “slab” on lines 37, 39 and 40, as well as colloquialisms such as “rocks up” on line 36 and “>chucks it down<” on line 37. The switch between an informal to a formal register reinforces the separation of the mention of drinking from the rest of the story. One way to understand this separation is as a display of an orientation to the research context of the conversational encounter, or to the function of John’s talk as input into a research project.

In the context of a game then, note how to “knock down (.) two beers straight away” is positioned as rule governed behaviour, or something he “had to” do according to the rules of the game, following being “hit with (0.3) uh >two lots of thirteen cards”. The construction of the consumption of two beers in quick succession as something he “had to” do somewhat diminishes John’s responsibility for the reported level of consumption on the grounds that it was a crucial part of the game. Also, the light hearted manner in which the story is concluded with the colloquial expression “all over red rover” adds to the construction of the triviality of the reported consumption.
The expression “all over red rover” constructs the conclusion of the game with a certain degree of finality, without actually detailing what happened. Nevertheless, the use of this expression conveys that whatever did happen was of no consequence. This particular construction of the conclusion of the game is one that I, as facilitator, then go on to affiliate with and thereby validate. This was achieved by replying to John’s statement with laughter and a smiling intonation. Such a reply, like the previous shared laughter, constitutes a display of having received and accepted John’s story as a humorous or trivial one of little serious consequence.

Overall then, it is argued that John’s construction of his past consumption on one occasion as a “drinking game” contributed to a trivialisation of his reported level of consumption. This construction was particularly useful in the context in which it was deployed, in that it allowed for the portrayal of elevated levels of consumption in a neutral or positive manner. Specifically it allowed John to respond to a facilitator question regarding heavy consumption with little or no threat to face.

Facilitator questions regarding elevated consumption could pose a potential dilemma for focus group participants. How to oblige the facilitator’s request for information about heavy consumption, a practice that could be regarded as morally questionable, without presenting personal behaviour as morally questionable? As previously noted, from a public health perspective the level of drinking John reported could be considered problematic, placing him at high risk for a number of negative consequences. The repertoire of recreation allowed John, as well as other participants, to manage this potential dilemma by facilitating the portrayal of heavy consumption as a positive, frivolous activity.
In addition to the trivialisation of consumption achieved by the repertoire of recreation, John’s conclusion of the story subtly circumvents the issue of the consequences of such consumption by halting the story at what appears to be the conclusion of consumption\(^8\). I displayed an orientation to John’s story as incomplete by requesting further information regarding what happened next. In response to my question John constructs vomiting, showering and drinking again. On this occasion therefore John constructs what could be considered a potentially negative consequence of consumption, that is, vomiting. However, this is constructed as a relatively minor obstacle to further alcohol consumption. Specifically, John’s reference to showering and drinking again functions to demonstrate that the vomiting was of no consequence. This particular treatment of what could otherwise be understood as a negative consequence of consumption further contributes to John’s trivialisation of his DTI and beyond; a trivialisation that was achieved and collectively validated through the various discursive moves discussed throughout this section of the analysis.

Of the various discursive moves discussed, including for example stage setting comments and particular constructions of consequences (or lack of), the repertoire of recreation was but one rhetorical device employed to present personal consumption and therefore the self in a positive manner. The way that repertoires can form part of complex webs of justification will be discussed in more detail in the

\(^8\) I stress “appears to be” because the end constructed on lines 69-70 (Excerpt 5.1) is later reconstructed as the end of one drinking session, only to be swiftly followed by the commencement of another (Excerpt 5.1 lines 80-81).
next chapter. For now, suffice it to note that in the aforementioned instance the employment of the repertoire of recreation proved to be particularly useful in a situation where the facilitator requested information about heavy drinking. In the next excerpt, the repertoire of recreation is also employed in response to a facilitator about heavy(er) drinking. However, the specific manner in which the repertoire is deployed differs markedly from its deployment in Excerpt 5.1, making different inferences available about the speaker.

5.2. **Necessity vs. Enjoyment of Intoxication**

The next excerpt demonstrates another employment of the repertoire of recreation. This time it is Mark, a participant from the fifth focus group, who employs the repertoire to construct DTI. Whilst the repertoire is employed under similar circumstances to those in the previous excerpt, that is, in response to a facilitator’s query about DTI, the manner in which it is deployed is different. In Excerpt 5.1 John’s talk constructed his drinking as recreation in a somewhat subtle manner by positioning it as a game. Mark, however, constructs DTI as recreation in a very explicit manner by positioning intoxication as *necessary* for enjoyment of at least some social situations. The excerpt begins as I, as facilitator, pose a new question to participants.

*Excerpt 5.2 (FG5 45:42 – 48:00)*

1 Fac we’ve talked about=you know, (0.4)>6big nights and stuff lie’ that°<=but what about
2 normal(0.5).hh uh::mff >other normal occasions
3 that you might be drinking less=like there’s
4 after wo:rk<, °you might have one drink or
whatever,° m.hh are there any other sort of occasions >where you wouldn’t drink
as much or you wouldn’t have such a big night but<= you know- still
go out an’ stuff?

(0.4)
Fac .hh
(1.8)
Fac ‘part from after woer’ beers?
(1.8)
( ) mff
(0.4)
Fac Or- when- you- go out- does ‘at- usually end up being a big night?
(1.3)
Mark =usually=°
Fac hus(h)uall(h)y? >heh heh<=
Mark =(so)-sort of- yeah. i dunno. going out t’
town an all that sort o’ thing its- .hh i find it pretty boring unless i’m (0.7) pretty drunk,so
Leo °mm°
Mark .hh sort o’=if i’m planning to go out i plan to get (0.2) pretty smashed before †hand
Fac mm.
Mark .hh °so:. (0.9) n’ yeah js sort of°- an also cause I hate-.h hh (.7) °mnuhm° spending heaps of money=you know seven- eight dollars for a drink. (0.8) .hh so you sort of=if you get drun before ha:nd, (0.3)sort o’ >works out a bit cheaper if you jus gotta< (0.3) have a drink just tuh- (0.4) sort o’ keep yourself goin’. (0.3) instead of tryna get drunk in
"town sort o' [thin°]

Fac [↓mm ]

( ) .hh

(0.9)

( ) °mm°

Mark °but yeah (.) jus sort of°

(2.6)

Mark ye:ah if i’m going out with

(1.1)

Mark you know if i’ve gotta- do: something the

next da:y or:: (0.1)you know (0.4)obviously,

work (1.0) you know i’ll (1.6) try ‘n limit it

an’ hh just have one or two (1.6) °an’ uhm

(.4) yea°

(2.3)

Leo yeah=i know=i mean (0.9) not necessarily=i

mea’=like last ni:ght=you know=like (0.4)it w’

a good ni:ght but i wouldn’t classify it as a

big night=

Greg =no=

Leo =you know=so (0.6) >i mean i drank a six pack

and couple o’ shots< you know=like (0.9)

>didn’t consider myself shitfaced.< (0.9)so::

(0.1) ye:ah like (0.6) if you go out to town

like (0.5) i ↑du↓nno (2.7) uhm (2.8) yeah i

wouldn’t cl- >like i wouldn’t go out there

just to get shitfaced=i mean you do sometimes

but< not no:rmally. (0.7) probably go out

there have a good time (0.1) and uhm (1.3)
yeah that’s about it.

(0.6)

Greg i only do it if there’s a special function
on=like if there’s a- good dee jay that’s
come up or uhm (.) a good band playing

Fac mm

Greg or someone’s birth[day then]=

Leo [birthday]

Greg =i’ll go=i don’t really- have the need just
to go out t’ town and go oh let’s get
shitfaced you know=i’m [sort]=

Leo [yeah]

Greg =’o a bit over that

Leo yeah same here [like]

Greg [ mm ] sort o’ have a purpose

for it

(0.9)

Leo yeah.

(0.5)

Greg ((clears throat))

The question at the start of this excerpt enquires about what I position as “normal” (line 3) episodes of consumption, that is, “occasions” (line 3) involving low(er) levels of alcohol. When a response is not forthcoming (see Excerpt 5.2 lines 13 and 15 especially), I take the silence as an indication that my
positioning of lower consumption as normal when “going out and stuff” is incorrect. This is evident in my proposal of the alternative possibility, which is that going out usually leads to heavy consumption (Excerpt 5.2 lines 18-19)⁹.

The resulting juxtaposition of two opposing possibilities (see in particular my use of the conjunction “or” in Excerpt 5.2 line 18) makes a choice between two contrasting scenarios relevant for participants. The options presented were that, a) normal occasions involve going out and not drinking much and, b) going out usually leads to DTI. Mark is the first to respond by agreeing with the latter.

§5.2.1. Intoxication as Necessary

It must be pointed out that Mark’s concession that going out usually leads to intoxication is somewhat reluctant. Note the long silence (Excerpt 5.2 line 20) between my proposition and the time he takes the floor. This reluctance may be explained by the fact that the construction of going out as “usually” (Excerpt 5.2 line 18) ending up being a “big night” (Excerpt 5.2 line 19) is suggestive of a lack of control over consumption. In turn, the portrayal of one’s consumption as out of control is likely to be problematic for self-presentation purposes in that it could

⁹ Interestingly, Leo and Greg later go on to construct exactly the type of experience that I was enquiring about: occasions when one might be drinking less than when having a big night. However, it is unclear why they did not produce such examples of consumption in answer to my question. Perhaps it has something to do with my example of such occasions as ‘after work beers’ which I construct as involving the consumption of “one” drink (Excerpt 5.2 line 2ff). This is at odds with the occasion that Leo goes on to construct which involves a higher level of consumption: “a six pack and couple o’ shots”.

148
lead to negative inferences of compulsion, addiction or, in Benford and Gough’s (2006) words, “a stigmatised identity” (p. 428).

Congruently, Mark’s smiling delivery of “usually” (Excerpt 5.2 line 21) can be understood as suggestive of an awareness of the negative inference associated with the construction of usually ending up drunk when going out. This particular delivery functions as an invitation to treat the constructed correlation light heartedly, rather than taking it more seriously as sign of lack of control for example. In my reply (Excerpt 5.2 line 22) to Mark’s agreement, I accept his invitation by responding with some subdued laugh tokens. These serve as a demonstration of my affiliation with Mark’s positioning of the matter as light hearted. My turn on line 22 (Excerpt 5.2) functions as an invitation for Mark to provide further information, safe in the knowledge that I am treating the association between going out and getting drunk in a light hearted manner and not as evidence of problematic consumption.

The account that Mark works up for the correlation between going out and having a “big night” is essentially a deployment of the repertoire of recreation. He claims that he finds “going out t’ town an all that

\[\text{going out t’ town an all that}^{10}\]

The recurring use of the expression “big night” or “big night out” made for an interesting though tangential analysis which will not be presented here in the interests of parsimony. Previous qualitative research on drinking among young people often comments on and describes what participants mean by “big nights out” (See for example DeCrespigny, Vincent & Ask, 1999; Engineer et al., 2001; Lyons & Willott, 2008). The expression was used in the same manner in my focus groups, though for the purposes of this analysis it is sufficient to note that “big nights”, as the expression suggests, were treated as involving considerable alcohol consumption, usually leading to intoxication.
sort o’ thing” “pretty boring” unless he’s “pretty drunk” (Excerpt 5.2 lines 23-25). The implication is that being drunk allows him to enjoy going to town. More than that however, Mark positions intoxication as necessary for enjoyment. This constructs intoxication as recreation in a very explicit manner.

Mark’s positioning of intoxication as necessary for enjoyment is what distinguishes his employment of the recreation repertoire from John’s in Excerpt 5.1. Whilst John simply constructed one occasion of DTI as recreation, Mark constructed DTI as necessary for recreation on occasions involving going to town “an all that sort o’ thing” (Excerpt 5.2 line 24). Despite this wider classification of “recreational intoxication”, it is interesting to note that Mark’s reference to “going out t’ town an all that sort o’ thing” (Excerpt 5.2 lines 23-24) serves to specify a particular time when he finds intoxication necessary for enjoyment, and, by implication, to indicate that this is not always the case. Thus intoxication is not positioned as categorically necessary for enjoyment—a construction that could be heard as suggestive of addiction or compulsion. Instead, the construction of intoxication as necessary on a particular occasion, positions the necessity of intoxication as due to an inherent attribute of such an occasion, rather than to Mark’s compulsion.

Collectively, Mark’s subtle counteracting of a categorical construction of necessity and the light hearted treatment of this topic, are suggestive of a delicate management of the issues at hand. In addition to these discursive moves, note that Mark’s explanation is constructed tentatively. This is achieved in Excerpt 5.2 through a disfluent delivery enacted by the pauses preceding constructions of intoxication on lines 25 and 29 and the false starts on lines 23, 24 and 28. Moreover,
Mark’s explanation is constructed tentatively through the use of epistemic hedging throughout the excerpt. See in particular the utterance “I dunno” on line 23 and the repeated use of “sort of” on lines 23, 24, 28, 31, 34, 35, 37 and 44. The tentativeness of Mark’s account allows him to construct a particular pattern of consumption without explicitly committing to it. This lack of commitment is useful in a context where other participant’s views on the regularity of intoxication have not thus far been forthcoming.

The tentative construction of DTI as necessary for enjoyment suggests that there might be something inherently problematic in such a construction, at least in the local conversational context. Tedeschi and Reiss (1981) argue that “hedging involves verbal expressions that the actor is uncertain about how others will respond to an action and that he has minimal commitment to the action” (p. 294). Tentative constructions can indicate that what the speaker is saying is not set in stone and might be subject to revision, in this way the speaker “can avoid negative typifications should he find that such attributions would be the likely reaction to the proposed action” (Tedeschi & Reiss, 1981 p. 294).

Another factor that might help to explain Mark’s display of hesitation or tentative delivery is that the constructed relationship between recreation and heavy drinking contradicts the assumption on which my initial question (Excerpt 5.2 lines 1-5) was based. That is, that “normal” drinking occasions involve low levels of consumption. Such a contradiction would go against the preference for agreement in conversation (Sacks, 1987). Therefore Mark’s hesitation could also be considered as demonstrative of a dispreferred response. The two possibilities are not mutually exclusive. Most likely, Mark’s hesitation may stem from a mixture of the production
of a dispreferred response, as well as the production of something that may be considered problematic.

Indeed, the positioning of intoxication as necessary could lead to unfavourable attributions of addiction. Mark’s positioning of intoxication as necessary for enjoyment could be discounted as a mere excuse for a lack of control over consumption. Whatever the reason, it is clear that Mark’s particular deployment of the recreation repertoire is potentially problematic, at least for self-presentation purposes. Indeed, Leo and Greg, the other two focus group participants, later take the floor to distance themselves from it. Prior to that, however, it is interesting to note how Mark himself goes on to dismiss some of the possibly unfavourable attributions that could be inferred from his positioning of intoxication as necessary.

§5.2.2. The Construction and Importance of Control

One of the previously discussed problems with constructions of DTI as necessary for enjoyment is that they are suggestive of a lack of control over consumption, which is generally at odds with participants’ attempts to portray their consumption as nonproblematic.

The concept of control was a recurrent theme during the focus groups. The same was also found in interviews with heavy drinking British women (Rolfe et al., 2009). The concept of self-control “is considered important in identity protection” (Rolfe et al., 2009 p. 332). The construction of control serves important self-presentation functions as it works against negative images of loss of control or compulsion in a society where agency and self-control are valued as indicators of good moral standing.
During my focus groups, speakers mostly worked to counter inferences of their drinking as out of control and therefore pathological, instead portraying their consumption as nonproblematic. The only major exception, which will be discussed in Chapter 7, was when some speakers positioned a past pattern of consumption as addiction. On those occasions, constructions of lack of control were used specifically to depict the self as addicted\(^{11}\) (cf Chapter 7). These exceptions aside, all other focus group participants generally strived to present personal alcohol consumption as under control. As I will demonstrate in the remainder of this chapter, the construction of control was crucial to portrayal of the self in a positive manner.

Excerpt 5.2 shows how Mark in particular strived to portray his consumption as nonproblematic by constructing control, and thus countering possible unfavourable attributions of lack of control, with at least three separate discursive moves. First of all, the reference to “planning” (Excerpt 5.2 line 28) constructs considerable agency and personal control over actions by countering the possibility that big nights out are an unplanned consequence of Mark’s inability to stop drinking. By constructing himself as planning to get drunk, Mark attributes to himself considerable forethought and strategising. This helps to present an image of a reasonable and conscientious drinker in control of his consumption.

\(^{11}\) That is not to say that self ascriptions of “addiction” and “loss of control” automatically lead to negative inferences. As I will show in Chapter 7, participants were able to present themselves as “addicted” as well as reasonable and conscientious at the same time through various discursive moves. Interestingly, these discursive moves occasionally included the construction of control, although not necessarily over alcohol consumption but over other aspects of behaviour.
Interestingly, the idea that young people’s consumption, including intoxication, is often planned or controlled appears to be a recurring theme in qualitative studies of drinking among young people. Focus group research often concludes with claims such as: “they had considerable agency… they plan their drinking” (Sheehan & Ridge, 2001) or “young women’s drinking choices and behaviours are deliberate” (DeCrespigny, Vincent & Ask, 1999 p. 452). Although it is difficult to tell without having heard the interactions, based on the analysis of my data, it is possible that the construction of control and planning in previous focus groups may have served a similar function to that discussed here. From this perspective, previous researchers’ conclusions could be taken as evidence that their participants’ discursive moves were successful in presenting positive images of control. Thus, past researchers’ conclusions could be understood as a validation or a ratification of a particular construction worked up by their participants.

In addition to constructing the planning of intoxication, the second discursive strategy that Mark employs to construct control is an economic rationalisation (Excerpt 5.2 lines 31-39). Stating that it is cheaper to get drunk before going out rather than whilst “in town” positions intoxication as a rational decision based on a cost/benefit analysis, as opposed to, for example, the compulsive behaviour of an alcoholic. This cost/benefit construction contributes to the portrayal of Mark as a thoughtful and strategic drinker with considerable foresight and thus counters potential attributions of lack of control. Moreover the construction of this rationalisation as widespread through the use of second person pronoun (see the switch from first to second person in Excerpt 5.2 lines 32-34) helps to construct
getting drunk (cheaply) before going out as normative, rather than idiosyncratic, and therefore possibly problematic, behaviour.

Consistent with Mark’s portrayal of drinking before going out as normative behaviour, previous research has concluded that such a practice appears to be widespread. DeCrespigny et al. (1999) note that “many young women planned to drink before going out as a way of saving money on drinks” (p.448). Although their mixed method ethnographic study included both interviews and observation, such a finding was likely derived from the interviews, as it is impossible to establish intention from observation. If this is the case, it may be that participants across different studies are using the same discursive moves when questioned about alcohol consumption, perhaps for similar positive self-presentation ends.

To return to Excerpt 5.2, the third discursive resource that Mark employs to portray control is a construction of occasional moderation (lines 48-52). Mark’s reference to moderate consumption in view of next day commitments works to demonstrate his capability of restraint and self discipline (when required), thus reinforcing the construction of control. This move counters the otherwise possible, and stigmatising, image of a compulsively heavy drinker who is not able to control consumption once he starts drinking, and thus drinks to intoxication on every drinking occasion.

Similar to the construction of planning and drinking before going out, the construction of moderation as part of a varied pattern of drinking, including intoxication, has also been noted in previous qualitative studies enquiring about alcohol consumption (for example see Brain, 2000; DeCrespigny et al., 1999; Engineer et al., 2003; Szmigin et al., 2008). Brain’s (2000) study in particular notes
the relevance of the construction of consumption as “planned”, at “specific times” and in “control” as I have done here. Specifically, his analysis, based on an ethnographic study of young street drinkers which included in-depth interviews, concludes:

Here a sophisticated consumer engages in a search for hedonistic experiences, in this case by pharmacologically altering their mood and engaging in symbolic display through the process of consumption, but always in planned structured ways. Drinking occurs at specific times and in specific places. The consumer drinker is able to separate one life-world from another and carefully control his or her own behaviour in each of these life-worlds. In the leisure sphere this behaviour is increasingly organised around the pleasures of instant gratification (p. 9, emphasis added).

The difference between Brain’s (2000) analysis and the one conducted here is that whilst Brain takes references to planning, specific times and control as indications of a pattern of consumption he calls “bounded hedonistic consumption”, in the current analysis these same references are understood as discursive devices.

From the discursive perspective employed in this thesis, Mark’s construction of his consumption as “planned”, at “specific times” and in “control” can be understood to function as discursive devices designed to counter the possible unfavourable attributions potentially associated with his construction of DTI as necessary for enjoyment. The construction of control in particular appears to be a very important discursive move for the purpose of positive self-presentation. Likewise, the discursive study by Rolfe et al. (2009) on women heavy drinkers showed that control was used in a similar way to that noted here, to protect “the moral status” of speakers “and to present themselves as ‘good women’” (p. 329). Moreover, an interview study with women smokers showed how they also
constructed control to similar ends in various ways such as emphasising the frequency with which they said no to cigarettes or occasionally declining to smoke, even in the face of strong social pressure (Gillies & Willig, 1997). Based on these observations, in addition to my own, perhaps the construction of control could be understood as a functional discursive move that helps to counter the possibility of otherwise problematic ascriptions of behaviour. This possibility requires further research.

To summarise the analysis in this section, Mark’s talk in Excerpt 5.2 can be understood as a construction and account of the regular frequency of going out and ending up having a big night, in response to a facilitator’s presentation of two alternative possibilities. In accounting for the positive correlation between going out and having a big night, Mark draws on the repertoire of recreation to position intoxication as necessary for the enjoyment of certain occasions. This positioning of intoxication as necessary raises an unspoken inference of a possible lack of control over consumption. Mark then goes on to dismiss such an unfavourable attribution by constructing control with a number of discursive moves similar to some previously reported by other qualitative researchers. Essentially Mark’s talk is organised to project an image of himself as a moral drinker, and to protect this image from possible attack. Recourse to the interpretative repertoire of recreation is but one discursive move that contributes to the achievement of these goals. It is as a result of these impression-oriented discursive moves that repeated intoxication, a pattern of consumption that health professionals construct as harmful, is “justified” in the sense intended by Potter and Wetherell (1987) as constructed as acceptable, at least in some circumstances.
Mark’s explicit construction of his DTI as recreation illustrates what Billig (1987) called the argumentative nature of talk. In particular, the previously discussed discursive devices, designed to counter specific possible alternatives, demonstrate the availability of more than one construction of the same event. In essence, in constructing a particular version of events speakers effectively counter a myriad of possible others. However, despite speakers’ attempts to counter alternative versions, these attempts may or may not be accepted or validated by others. Note in fact that unlike the shared laughter in the previous excerpt which arguably allows others to validate John’s particular construction, in this excerpt, other participants are notably silent during Mark’s talk. That is, they offer no sign of affiliation or validation of Mark’s talk. Indeed they then go on to disaffiliate from Mark’s particular construction of DTI as necessary recreation.

§5.2.3. Interpretative Repertoires as Double Edged Swords

The first indication of other participants’ disagreement with Mark is the lengthy pause after Mark’s clear end of turn (Excerpt 5.2 line 53). When Leo does eventually take the floor, the dysfluent beginning of his turn is suggestive of a dispreferred action that is quite possibly disagreement with Mark’s previous turn. Note how Leo prefaces his disagreement (“not necessarily” Excerpt 5.2 line 54), with a display of “weak agreement” (“yeah=i know” Excerpt 5.2 line 54). These are recognised features of disagreement design (Edwards, 1997; Potter, 1996b). Leo then goes on to present an example of an enjoyable occasion which was nevertheless not a “big night”. By presenting an example of an enjoyable night when he did not get drunk, Leo works up a subtle demonstration of difference from Mark.
Leo’s example demonstrates, rather than states, that he can enjoy recreational activities without the need to be drunk. The presentation of “last night” as an example allows Leo to achieve disaffiliation from Mark’s argument without actually having to more clearly verbalise disagreement. A more explicit construction of disagreement might have in fact retrospectively positioned Mark’s account as problematic, or as one worth distancing oneself from. In this way Leo is able to distance himself from Mark’s construction of intoxication as necessary for enjoyment and to minimise the threat that this poses to Mark’s positive self image or “face” (Goffman, 1967). In Brown and Levinson’s (1987) terms Leo did an off record Face Threatening Action to minimise Mark’s loss of face (see Brown & Levinson, 1987 as well as Goffman, 1967 for more on face and politeness).

Leo continues his turn with a shift in footing to second person “so:: (0.1) ye:ah like (0.6) if you go out to _town like (0.5) i ↑du↓nno (2.7) uhm” (Excerpt which is followed, after a lengthy pause, by a self correction back to first person “yeah I wouldn’t cl- >like i wouldn’t go out there just to get shitfaced” (Excerpt 5.2 lines 63-65). It is easy to imagine that Leo might have started to say something along the lines of: if you go out to town, you wouldn’t go out there just to get shitfaced. The use of the second person would have allowed him to present such behaviour as the norm. However, such a portrayal would have retrospectively positioned Mark’s constructed behaviour as deviant. This could explain Leo’s switch back to first person, so as to not position Mark’s behaviour as deviant.

So, in the first person, Leo constructs himself as not purposefully going “out there just to get shitfaced”. In doing so he positions going out
to get shitfaced as a somewhat problematic practice, or at least, one that he wishes to distance himself from. Going out *just* to get drunk is in fact a practice that the focus group participants often denied engaging in, although there were exceptions (see for example Mark in Excerpt 5.2, as well as Mary in Excerpt 6.1). The concession that “you *do* sometimes” (Excerpt 5.2 line 65, my italics) go out to get drunk, strengthens Leo’s previously categorical claim of not going out just to get drunk by acknowledging possible exceptions. The switch to second person in this clause also references Mark’s experience and recasts *occasional* going out to get drunk as the norm, thus softening the strength of Leo’s disagreement with Mark’s previous turn.

The crux of Leo’s argument is as follows: “>like i wouldn’t go out there just to get shitfaced=i mean you *do* sometimes but<- not no:rmally. (0.7) probably go out there have a good time” (Excerpt 5.2 lines 64-67). This formulation constructs the difference between Leo and Mark as being on the basis of motivation. By constructing going out to get drunk as something “you” don’t normally do, Leo positions this motivation as atypical. The contrast with going out to have a good time as a normative motivation sets the latter up as comparatively more acceptable. Interestingly however, although Leo positions his drinking as different from Mark’s on the basis of motivation, the pattern of consumption he constructs appears to be essentially very similar to the pattern of consumption constructed by Mark. Both Leo and Mark construct occasional intoxication interspersed by occasions of lower alcohol consumption.

In a similar way to Leo, Greg also constructs disagreement with Mark, only to work up what is essentially a very similar pattern of consumption. Greg positions
his experience as contradictory to that of Mark by demonstrating his affiliation, in the sense used by Jefferson and colleagues (1987), with Leo’s argument rather than merely claiming agreement with it. He does this by specifying the special occasions presumably involving going out to get shitfaced, previously mentioned by Leo. In this way Greg justifies occasional intoxication on the grounds that it occurs infrequently, only when the situation calls for it. Thus, the only difference from Mark’s account is that Greg constructs his DTI as purposeful rather than necessary (see especially Excerpt 5.2 lines 82-83).

The contested nature of the acceptability of justifications and excuses of occasional intoxication was frequently made relevant by both the participants and the facilitator throughout the focus groups. Other examples can be found in Excerpt 6.3 and 7.3. Overall, speakers constructed different versions of what could function as an acceptable account for intoxication. Often differences between acceptable and unacceptable versions related to the actor’s motivation for consumption. Some motivations, like Leo and Greg’s above, were constructed as more acceptable than others—in this case Mark’s. It was through the construction of different motivations that some patterns of consumption could be presented as more or less acceptable than others. This observation concurs with Scott and Lyman’s argument that “in ordinary affairs and in law a person’s actions are usually distinguished according to their intent” (p. 48).

12 I write ‘presumably’ because it is potentially unclear what Greg’s “it” (83) is referring to. Is it going out to get shitfaced or going out to have a good time? The sequential location of Greg’s talk as following Leo’s is more suggestive of the former.
The use of motivation as an assessment criterion for the acceptability or otherwise of a pattern of consumption is different from the criteria usually employed to evaluate a pattern of consumption in professional literature. As the excerpt above illustrates, during the focus groups participants often judged other speakers’ patterns of consumption according to their recounted or implied motivation. Moreover, often speakers would present their consumption as acceptable by constructing a particular motivation as opposed to another. However, in the research and professional literature, alcohol consumption is usually evaluated based on the volume of alcohol consumed and the consequences or harms that it has been statistically associated with. For example, the recent Australian Guidelines to Reduce Health Risks from Drinking Alcohol (NHMRC, 2009) position any consumption above two standard drinks a day as risky and hence unacceptable. These different criteria suggest that alcohol consumption may be evaluated differently in varying contexts, according to criteria that are functional at the time.

In Excerpt 5.2, the speakers’ varying constructions of what is presented as more or less acceptable instances of DTI highlight the tension or dilemma made available by the interpretative repertoire of recreation. When intoxication is constructed as recreation, the possibility arises that such intoxication may be heard as necessary for enjoyment. As I have argued, this possibility suggests potential stigmatising attributions about the speaker. Beyond the repertoire of recreation, the following chapters will demonstrate that other repertoires pose similar dilemmas. Essentially, in countering more negative constructions, the use of particular repertoires to justify or excuse DTI inescapably makes those other more negative possibilities relevant. Thus, interpretative repertoires could be considered double
edged swords in that they could be used both to justify DTI and to portray it as unacceptable or somewhat problematic.

Mark managed this tension by explicitly constructing his intoxication as necessary for the enjoyment of some recreational occasions, whilst simultaneously constructing control over consumption. However, as Leo and Greg’s replies demonstrate, other participants constructed their DTI against the possibility that such consumption may be heard as necessary for enjoyment. Indeed, Mark’s construction of intoxication as necessary can essentially be considered an exception.

5.3. Intoxication as Part and Parcel of an Occasion

As I have shown thus far, within the repertoire of recreation there are several possible ways to construct intoxication: to portray it as part of a game, as necessary for enjoyment, as an exception or as purposeful - the means to an end. The next excerpt illustrates a slightly different employment of the recreation repertoire. It shows an additional way of managing the tension subtly raised by this repertoire, and made explicit by Mark in the previous excerpt, between presenting the self as engaging in an enjoyable pastime and positioning intoxication as necessary for enjoyment.

In the following excerpt, DTI is constructed as recreation by constructing this pattern of consumption within a recreational setting, as part of a birthday occasion. By constructing intoxication in the context of an entertaining recreational activity, DTI can be positioned as part of the activities that contributed to the entertainment. In this way, intoxication is subtly justified on the grounds that it constitutes part and parcel of a positive, entertaining occasion. To some extent, this is the depiction of
DTI worked up by Greg in the excerpt above to justify occasional intoxication. The following excerpt illustrates its deployment in more detail.

During the sixth focus group, I asked participants to tell me stories of “good times” they had whilst drinking. After two participants had replied, one of those participants excused himself due to prior commitments and left. I moved on from the interruption that this caused to the flow of the conversation by addressing the same question to one participant in particular, Kim, by simply calling her name. In the following excerpt, Kim replies to the invitation to respond to my question with an account of her sister’s most recent birthday.

*Excerpt* 5.3 (*FG6 01:09:33 – 01:10:44*)

1 Fac uh::m: kim.  
2 (0.8)  
3 Kim uh:- >couple o’ months< (. ) ago (. )for my  
4 sisters birthday? (0.4) .hh uhm (0.3) it  
5 started off ((thud)) (1.0) ”pretty shit i  
6 s’pposeº=>coz everyone else ws drunk when i  
7 got there and i was sober,<( (0.4)  
8 Fac m[m  
9 Kim [a::nd (0.2) we ended up going to club x”  
10 (0.9) ended up having- couple of  
11 sho::tties=some (0.7).hh drinking uhm  
12 (1.1)”>what’s it called?<” bacardi an cola?

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13 Place names have been changed to protect privacy.
Kim and uhm (0.3) >yeah we just ended up having a good night.< (0.6) got really dru::nk, (0.5)
danced=and couple of- .hh cousins and that (0.3) jumped on the front stage and was (0.4)
. hh ☹ grabbing any blokes an making f(h)ools of t(h)ems(h)elves☺
Sky mh heh heh heh
Fac oh:::
Kim s(h)o it w(h)as real funny night and (0.1) .hh yeah=we had a real good time (0.9) .hh except
when my cousin: (0.4) when i took my earrings out (0.3) i left them (0.4) in my friends car
and (0.6) >she grabbed them and put them in her bag.<
Fac ♦oh ♦okay
Kim °yeah (0.2) still haven’t got em back.°
Fac o:h
Kim but we had a really good night=It was the first time like(0.5) i enjoyed myself in ages (0.8) and it’s probably the last time\textsuperscript{14} I’ll

\textsuperscript{14} This is probably a reference to the previously mentioned fact that Kim now has a young child (data not shown).
Here, unlike John in Excerpt 5.1, Kim explicitly constructs drinking to the point of intoxication (Excerpt 5.3 line 16). Prior to that however, her construction of the occasion as “for my sisters birthday?” (Excerpt 5.3 lines 3-4) performs crucial rhetorical work. The mention of a birthday immediately marks the occasion as a special occurrence to be differentiated from other, more frequent occasions. This specification essentially exempts subsequently reported behaviour from carrying implications regarding a speaker’s “normal”, everyday behaviour. After all, what a speaker constructs as having done during a special occasion cannot be interpreted as what the speaker would normally do on any other occasion.

In addition to setting the scene as an “exceptional” circumstance, Kim’s contextualisation of the occasion as a birthday carries a number of implications regarding the sort of behaviour that may be considered culturally acceptable during such an occasion. In this context, it is very likely these include the possibility of greater alcohol consumption relative to other, more everyday occasions. Indeed Kim then goes on to state that everyone else was drunk when she arrived. No explanation of “everyone else”’s (Excerpt 5.3 line 6) drunkenness is offered. However, in the sequential context of the interaction, the widespread drunkenness can be heard as at least partly due to or related to the “birthday?” (Excerpt 5.3 line 4) nature of the occasion. In other words, Kim, as well as other focus group participants, treats
her construction of the occasion as a birthday as a sufficient account of the prevalence of intoxication. In the absence of such a reference, Kim’s portrayal of everyone else as drunk might have attracted questions such as “why was everyone drunk?” The fact that everyone else’s intoxication was never questioned suggests that Kim’s account of a birthday occasion was treated as a sufficient explanation for everyone’s intoxication.

Whilst the mention of the widespread intoxication could be considered an almost superfluous contextual detail, its production contributes something very important to the story. Although there are several possible interpretations of this particular statement, it is argued that by stating that “everyone else was drunk” (Excerpt 5.3 line 6, my emphasis), Kim positions intoxication on that particular occasion as a normative and accepted state rather than a special occurrence requiring explanation. The use of Extreme Case Formulations such as “everyone else” for example, has been shown to portray behaviour as unremarkable or acceptable, by presenting it as frequently occurring or commonly done (Edwards, 2000; Edwards & Potter, 1992; Pomerantz, 1986). In this case, it constructs a sequence of events which makes the speaker’s own subsequently reported intoxication entirely unexceptional.

The construction of everyone else as drunk, combined with the expectation of heavy(er) consumption that a reference to a birthday makes relevant, facilitates an interpretation of Kim’s subsequently reported intoxication as normative and situationally appropriate. In other words, it contributes to a justification of intoxication on the grounds that it is the norm, even before personal intoxication is mentioned. As noted in relation to John’s contextualisation of his consumption as
“at college” in Excerpt 5.1, “stage setting comments” (Edwards, 1997) were often used by focus group speakers to position subsequently reported alcohol consumption in a context that could be heard as being conducive to heavy drinking. Personal responsibility is lessened through a denial of agency that is, in turn, achieved by employing a modified version of the excuse that has been labelled “joint production” (Semin & Manstead, 1983 cited in Potter & Wetherell, 1987). This excuse is based on the following assumption: since I wasn’t the only one that performed a particular behaviour, I cannot be held accountable.

A critic might argue that the use of stage setting comments, such as Kim’s portrayal of everyone as drunk, is essentially an artefact of the focus group situation; that they are a device that allowed participants to address the questions posed by the facilitator, especially requests for details of occasions. I would not dispute such a claim. However, it is likely that talk is organised to fulfil a number of functions simultaneously such as to respond to facilitator queries, present the self in a favourable manner, criticise another participants’ consumption and so on. Moreover, “stage setting comments” are not solely used in research settings, but have been previously noted in what some might call more “naturalistic” settings such as counselling sessions (Edwards, 1997).

Kim’s normalisation of intoxication through contextualisation within a recreational setting like a birthday occasion, as well as her possible positioning of intoxication as normative in such a setting, allows her subsequently reported drunkenness to be heard as part and parcel of the festivities or as recreation. This interweaving of intoxication and recreation is a crucial move toward the justification of intoxication, its presentation as unremarkable and to some extent, expected, at
least on such an occasion. Similar ways of speaking were noted in a longitudinal, ethnographic study of young drinkers in inner city Dublin. Mayock (2004) in fact concluded that: “for the majority of young people, consuming alcohol was central to having a good time… alcohol consumption was integral to going out and its legitimacy and acceptability was at no stage questioned” (p. 129).

The construction of the night as starting off “pretty shit” when everyone else was drunk and Kim was sober can also be considered part of a discursive move to justify getting drunk. What is particularly interesting about this specific formulation is its strong similarity to Mark’s portrayal of going out being “pretty boring” unless he’s “pretty drunk” in Excerpt 5.2. In Mark’s case, the explicit association between sobriety and boredom was part of a positioning of intoxication as necessary for enjoyment. Similarly, in this instance, the association between sobriety and the night being “pretty shit” could be taken to suggest that Kim did not initially enjoy herself because she was not drunk. Indeed her subsequent construction of enjoyment alongside the construction of intoxication could be taken as supportive of such an interpretation. However, as noted in relation to Mark’s talk, constructions of intoxication as necessary can be problematic for self-presentation purposes in that they are suggestive of negative inferences of compulsion. In line with this observation, Kim’s talk is rhetorically organised to counter such a possibility.

Kim counters the possibility that she found intoxication necessary for her enjoyment of the situation by portraying DTI as group behaviour. Note that Kim never explicitly states “I got drunk”. The lack of a pronoun on line 16 (Excerpt 5.3) leaves the subject ambiguous. Furthermore, note the multiple footing shifts from “i”
to “we” throughout the above excerpt. Footing shifts routinely occur when contentious, delicate or potentially debatable claims are made in interaction (Potter, 2004b). Although Kim begins her story in the first person she then uses “we” to denote going to Club X and drinking as group behaviour. This formulation counters the inference made available by Kim’s preceding talk, that she may not have initially enjoyed herself because she cannot do so when sober. In particular, the positioning of alcohol consumption as group behaviour counters the possibility that Kim’s drinking may have been an individual attempt to get drunk so as to enjoy the occasion.

Another discursive device that contributes to the dismissal of the possibility that Kim’s intoxication may have been necessary for enjoyment is her use of a three part list (Excerpt 5.3 line 16ff) to depict the occasion. Three part lists are said to be used to construct descriptions that are treated as complete or representative (Edwards & Potter, 1992; Potter, 1996b). That appears to be the way in which the list is being used by Kim. After all in this instance it is fair to say that Kim’s experience of the night would have arguably included many more experiences that she did not recount, such as talking with others, wishing her sister a happy birthday and going home for example. However, the experiences that she does recount, including getting drunk, appear to be offered as representative of the occasion in question or as a sufficiently complete account of the events that transpired.

The use of a three part list as a sufficiently complete account of events displays an orientation to the other interactants’ ability to draw on cultural knowledge to “fill the gaps” as it were. Thus the list subtly positions the recounted items: intoxication, dancing and other event participants making fools of themselves,
as indicative of the experience portrayed. By treating intoxication as indicative of
the occasion in question, Kim subtly suggests that it is a characteristic feature of the
occasion, in other words, part and parcel of it. This positioning of intoxication as
characteristic of the occasion in turn contributes to the dismissal of the possibility
that intoxication may have been necessary for enjoyment. In this manner, the
construction of intoxication as part and parcel of a recreational occasion can serve to
dismiss otherwise negative inferences made available by links between enjoyment of
an occasion and intoxication.

§5.3.1. Alcohol-Related Harm and “The Good Story”

With the possible exception of the positioning of intoxication as necessary
for enjoyment, the construction of intoxication as recreation lends itself particularly
well to positive self-presentation. This is due to its positioning of a pattern of
consumption that could otherwise be considered a problematic excess as a fun and
harmless activity. One of the implications of this formulation of consumption is that
it ignores or obscures what the research literature constructs as the “risks” associated
with DTI such as vomiting, hangovers, memory loss and the like, in order to
construct what other researchers have labelled a “good story” (Sheehan & Ridge,
2001 p. 347). In a sense, the way the interpretative repertoire of recreation has been
employed by speakers in this study could be considered a form of “ontological
gerrymandering”, or the selection and formulation of aspects of an occasion that are
advantageous to the rhetorical work one is trying to achieve, whilst ignoring others
(Woolgar & Pawluch, 1985 cited in Potter, 1996b). To put it plainly, the repertoire
of recreation lends itself particularly well to positive portrayals of intoxication by
constructing enjoyment and recreation, whilst ignoring the negative aspects of intoxication constructed in the research literature.

Despite the potential for ontological gerrymandering, focus group speakers employing the repertoire of recreation did in fact often mention what could be considered “negative” aspects of occasions of intoxication. Recall John’s construction of vomiting in Excerpt 5.1. Similarly, in Excerpt 5.3, Kim also constructs what she positions as an exception to a “really good night”. However, although speakers often constructed aspects of drinking occasions that could be otherwise considered negative, they did so in such a way so as to not interfere with an overall positive construction of the instance of intoxication. More than that, speakers’ constructions of “negative” aspects of drinking occasions often served to bolster predominantly positive depictions. In John’s case, I noted how the portrayal of vomiting, alongside showering and drinking again, contributed to his trivialisation of intoxication. In Kim’s case it could be argued that her mention of an exception to a really good night actually strengthens the positive portrayal of her intoxication.

Kim’s mention of the affair of the earrings (Excerpt 5.3 lines 24ff) is constructed as the only exception to the “real good time”. This construction marks the occurrence as a deviation from the norm, allowing Kim to portray the occasion as a really good night in spite of a relatively minor negative event. By constructing a minor inconvenience Kim works up a more balanced account of the occasion, in comparison to an account excluding any “negative” outcomes by omission. The construction of an inconvenience unrelated to alcohol consumption allows Kim to attend to and simultaneously dismiss the possibility of significantly
more negative consequences resulting from a night of intoxication. Essentially, by constructing the loss of her earrings as the only exception to a really good time, Kim subtly suggests that the night did not result in any other, including more serious and alcohol-related, negative consequences.

The only times that significant alcohol-related harm was mentioned during the focus groups was within discussions of addiction (see Chapter 7). It is possible that the participants in my focus groups did not really talk about significant harms outside of these discussions because they were not explicitly asked about them. Had they been asked, it is possible that they may have recounted other stories. Nevertheless, this absence of talk about significant alcohol-related harms, outside the context of addiction, has been consistently noted in previous literature, including in studies specifically enquiring about harms encountered as a result of drinking.

Previous research that had enquired about harm has similarly noted that “any harm encountered along the way tends to be filtered through the ‘good story’, brimming with tales of fun” (Sheehan & Ridge, 2001 p. 347). Other researchers have also noted that for young research participants “contrary to professional discourse, however, harm is rarely considered an outcome of drinking, either in this study or previous others… and in some cases positive and negative outcomes combine to create a ‘good whole’” (Szmigin et al 2008 p.19). Young participants often construct binge drinking or intoxication as a harmless, frivolous and therefore irreprehensible activity (Guise and Gill 2007; Workman, 2001). One researcher in particular pointed out that the drinking stories told among friends often not only construct heavy drinking in a positive manner, but effectively rule out alternative possibilities of
construction, including the one popular among experts which focuses on harm (Workman, 2001).

In line with previous research, this analysis suggests that minor negative occurrences such as vomiting and loss of property can be integrated or filtered through “the good story” whereby drinking episodes and all the experiences this includes are constructed overall as positive and enjoyable. Talk about significant harms seems to be restricted to talk about addiction. It would be interesting to explore whether this might be the case in other contexts as well.

5.4. Concluding Comments

This chapter outlined a particular way of talking about DTI labelled the “recreation” repertoire. The majority of focus group speakers in this study often used this interpretive repertoire to portray past personal instances of DTI as an enjoyable pastime or diversion. DTI was portrayed in this manner in a number of different ways. These included the portrayal of DTI as a game evidenced in Excerpt 5.1, the construction of DTI as a possible entertainment option or as purposeful on special occasions also used in Excerpt 5.2, as well as the positioning of DTI as part and parcel of an enjoyable occasion demonstrated in Excerpt 5.3.

The repertoire of recreation was used in contexts were DTI had been previously discussed and had not been framed as problematic. Note that all the excerpts in the recreation chapter are taken from well into each focus group (Excerpt 5.1 FG2 29:00–32:35; Excerpt 5.2 FG5 45:42 – 47:07; Excerpt 5.3 FG6 01:09:34 – 01:10:44). Although it would be impractical to present all the talk from all the focus groups preceding the excerpts above, suffice it to say that the construction of DTI as
recreation detailed above was not the first time DTI was introduced into the focus groups. Nevertheless, in relation to Excerpt 5.1 and Excerpt 5.3, taken from Focus Group 2 and 6 respectively, it is possible to turn to the next chapter and consult Excerpts 6.4 and 6.3 respectively to see how DTI was first introduced in each focus group. Essentially, the recreation repertoire was employed during the focus groups only after indications that DTI would not be treated as problematic by others within that particular focus group context.

The demarcation of what I have called the repertoire of recreation and its use to portray DTI as a positive diversion is consistent with the findings outlined in earlier literature. Other researchers have previously noted that young people often consume alcohol and get drunk for fun or entertainment (see for example Coleman & Cater, 2005; De Crespigny et al., 1999; Engineer et al., 2003; Griffin, 2007; Lyons, 2006; Lyons & Willott, 2008; Shanahan, Wilkins & Hurt, 2002; Sheehan & Ridge, 2001). The pleasurable aspect of drinking and getting drunk has also been noted in the past (see for example Brain, 2000; Brain et al., 2000; Measham, 2006; Measham & Brain, 2005; Szmigin et al., 2008; van Wersch & Walker, 2009). Moreover, recent constructionist oriented research has similarly concluded that drunkenness can be constituted as recreation or entertainment (Guise and Gill 2007; Rolfe et al., 2009). Similarly, Workman’s (2001) analysis of fraternity drinking stories concludes that “the story serves an important function for the culture in framing drunkenness as a form of recreational play” (p. 434). Lastly, the repertoire of recreation bears some resemblance to what Davies (1997a, 1997b) calls Type One discourse, or a way of talking about drug use that frames it as hedonistic, “as
positive, fun, problem free, and as having no negative consequences for health, social or economic functioning” (Davies, 1997b p.56).

The justification of DTI on the basis of recreation is a discursive move that is likely to work equally well in relation to other behaviours such as drug taking. This is likely influenced by the premium Western culture places on hedonism. Congruently, Brain et al., (2000) write that amongst many young people, ‘getting wrecked’ (drunk), ‘tripping (taking LSD), ‘speeding’ (taking amphetamine) and ‘getting stoned’ (taking cannabis) are all increasingly described by one generic word ‘buzzing’. This word can also describe anything else that induces an excited state of mind from ‘winding someone up’; to driving at high speed (Brain et al., 2000 p. 12).

The main difference between this study and previous research is that the former has shown that although overwhelmingly used as a justification of DTI, the repertoire of recreation also makes available a more problematic alternative which speakers must dismiss in order to avoid suggesting that personal alcohol consumption is problematic. The alternative, made explicit by Mark in Excerpt 5.2, was that intoxication may be necessary for enjoyment. As illustrated in this chapter, speakers generally countered such a possibility to avoid potential inferences of problematic consumption or compulsion. Mark proved to be an exception in that he explicitly constructed intoxication as necessary for enjoyment. He then went on to counter the inferences of compulsion or lack of self-control that such a construction normally makes available by constructing control over consumption.

On the whole, the foregoing analysis indicates that whilst interpretative repertoires may be predominantly used for one purpose or another, such as to justify DTI in the case of the recreation repertoire, that is not to say that repertoires are
inherent justifications of DTI for example. Repertoires do not invariably perform the same function, such as justification or excuse, in all contexts. Indeed as will be further discussed in subsequent chapters, interpretative repertoires are better understood as double edge swords which can just as readily be used to justify as to criticise a particular pattern of consumption depending on exact deployment.

The major implicit assumption underlying the positive portrayal of DTI afforded by the repertoire of recreation is that if something is enjoyable then it is good, or at least, it can’t be that bad. In 1981, Tedeschi and Reiss argued that such a premise was then part of “a new vocabulary of justifications” and that in earlier times such a justification “probably would not have been effective and might even have made the situation worse” (p. 292). Indeed one can imagine that in another time, perhaps when the republican moral of civic virtue prevailed, such a construction of DTI may not have been so accepted or taken for granted. As such, the use of the repertoire of recreation as a justification is likely a relatively “new” phenomenon. Congruently, Mayock (2004) argues that “consuming pleasure has become central to youth cultural forms at the turn of the century” (p. 121 emphasis in original).

Today, the employment of the recreation repertoire as a justification is at least in part supported by a hedonistic culture focussed on instant self gratification, a “culture of comfort and convenience” which presumes that “cultural goods and activities exist to give people easy pleasure” (Gitlin, 1990 p. 34, italics in original) and the youth embracement of “lifestyles that prioritise the pursuit of consumable pleasure” (Mayock, 2004 p. 134). Although Western popular culture might be said to promote the consumption of pleasure on the one hand, it also simultaneously
places a premium on self-control and frowns upon compulsiveness. This is evident in the social stigma attached to conditions said to involve a “loss of control”, such as addictions for example. During the focus groups speakers negotiated the tensions made salient by these occasionally competing ideals by deploying the repertoire of recreation in different manners that were suited to the local context of production.
6. **Drinking to Intoxication as Self-Therapy**
The previous chapter outlined the construction of drinking to intoxication (DTI) as recreation. Another way in which focus group speakers constructed DTI was by depicting it as self-therapy, that is, as a beneficial or restorative response to a stressful event. The term “self-therapy” is enlisted over the more commonly used “therapy” as it is considered a more neutral characterisation. Therapy can be considered to carry arguably positive connotations, which the inclusion of the prefix “self” is designed to counter. During the focus groups, constructions of stressful personal circumstances as preceding intoxication were treated as constructions of DTI as self-therapy. This manner of speaking about DTI was treated as inherently distinct from the construction of DTI as recreation outlined in the previous chapter.

The concept of drinking as self-therapy is by no means a novelty. Quite the contrary, there is a vast body of literature that examines drinking motives and perceptions of alcohol use which frequently reports similar concepts. For example, stress release (Engineer et al., 2003; Lyons, 2006; Lyons & Willott, 2008; Parks, Miller, Collins & Zetes-Zanatta, 1998; Perkins, 1999), suppression (e.g. drinking to forget troubles) (Labouvie & Bates, 2002), escapism (Coleman & Carter, 2008; Shanahan et al., 2002), relief of or coping with negative emotions (Bradizza, Reifman & Barnes, 1999, Carpenter & Hasin, 1999; Cooper, Russell, Skinner & Windle, 1992; Kassel, Jackson & Unrod, 2000; Martens, Cox & Beck, 2003; Palmqvist, Martikainen & Rauste von Wright, 2003; van Wersch, & Walker, 2009), self-medication (Rolfe et a., 2009) and negative reinforcement (Carey & Correia, 1997; McMahon, Kouzekanai, DeMarco, Kusel & Davidson, 1992) are often presented as motivations for drinking either spontaneously reported or otherwise endorsed by study participants. “Coping motives” have also been investigated in
relation to other drug use including the consumption of marijuana, nicotine and caffeine, among other drugs (see for example Stewart, Karp, Pihl & Johnson, 1997). Moreover, even within the field of psychopharmacology for example, the link between stress and drug abuse is widely accepted (Sinha, 2001).

During the focus groups, six participants and both facilitators constructed intoxication as therapeutic on at least one occasion. The following is an illustrative example of how the repertoire of self-therapy was mobilised in the context of focus groups. The excerpt comes from rather early in the beginning of the first focus group.


1 Fac .hh so are there any other- __occasions where
2 you sit there and you think, (0.4) °oh::: (0.4)
3 bugger this° (1.4) °(i’m) gonna get<> (1.3)
4 Jane let off steam.
5 Luke <ye:ah, though well [uhm> ]
6 Fac [whats] the occasion?]
7 Jane °[(i can’t think of one)]°.
8 Mary [ ACTUALLY YEAH ] yea.
9 when i’m stressing at work, if i’ve had a
10 really really bad day (. like ba:d day. on a
11 friday afternoon i think yep, i’m gonna go out
12 and get drunk tonight. hh and jus- relax and
13 >not have t’ think about<- (0.3) work. (1.0)
14 cause i don’t. (0.2) think- >about work<=if
there’s music playing and you’re dancing and stuff. (1.2) uh::m (1.0) that’s the only time i let off steam really.

Fac so it’s a- so it’s a- it’s- it’s- it’s being in there in the occasion it’s a sort of (.) to m-remove yourself away from what- what (on earth)is happening at \wo:rk and basically like, (.) get stuffed work

Mary ye:ah it’s just a good so:cial (0.9) thing. to talk to people an:: (0.3) you lighten up a bit, you relax.

(1.0)

Luke yeah=i mean some- sometimes i- (0.2) i just feel like i wannu just uhm (0.7) uhm (0.5) go out with with with friends >you know<=just (0.3) uh: spend the night with them. (0.8) BUT UHM (0.4) for me, (1.1) uh::m (1.4) if i- if i- (0.4) if i w-wonna (0.4) drink the night out i will, otherwise if i don’t- (0.8) uhm you know my friends can go ’n drink t(h)e n(h)ight (h)out and i’ll (0.3) i’ll stay (..) a little more sober

Fac: Mmm
In this excerpt, taken from early on in the first focus group, the professional facilitator begins to ask a question that sounds as though it was going to be about getting “drunk”. However, she doesn’t finish the sentence. This unfinished sentence implies, rather than explicitly states, the kind of behaviour that the facilitator is enquiring about. In this way the facilitator works up a construction of the topic of enquiry as a “delicate matter”, in the sense intended by Buttny and Kellog Rath (2007) “as possibly awkward or difficult” to discuss (p. 257). There are other features of the facilitator’s question that could also be understood as a demonstration of cautious enquiry. These include considerably long pauses, a lowering of volume, and increased tempo of delivery or “rush through” of “º>(i’m) gonna get<º” (Excerpt 6. 1 line 3) which is also barely audible. Silverman (1997) has noted similar linguistic features to be indicative of cautious enquiry.

Formulating questions with caution can be a useful means to request information about potentially “sensitive” topics (Silverman, 1997). Another means to request information about potentially sensitive topics is to present the respondent’s behaviour in the best possible light (Silverman, 1997). This is arguably what the facilitator is doing with the particular action description she works up as part of her question. The facilitator, with the quintessential Australian expression “bugger this” (Excerpt 6. 1 line 3) works up a state of resignation, giving up or letting go, due to a presumably unrelenting source of stress. She then starts to construct a different course of action: “º>(i’m) gonna get<º”, which, in the context of this focus group is easily heard as I’m gonna get drunk or any number of other synonyms. The facilitator’s unfinished “I’m gonna get” positions DTI as the pattern of consumption she is enquiring about, albeit in a very subtle manner. This is
achieved by using an expression, “º>(i’m) gonna get<º”, which has a very predictable yet unspoken outcome in this context, that is, drunkenness.

Mary’s answer in particular demonstrates that she treated the facilitator’s question as specifically enquiring about DTI. By replying with an example of a situation in which she purposely goes out to get “drunk” (Excerpt 6. 1 line 12), Mary demonstrates her understanding of the facilitator’s question as concerning such a pattern of consumption. Moreover, Mary’s specific use of the word drunk achieves further important rhetorical work. By employing the exact term that, arguably, the facilitator had only just previously refrained from producing, Mary effectively demonstrates her acceptance of the facilitator’s invitation to talk about what had been constructed as a delicate topic. Through the use of the term drunk Mary repositions intoxication from a “delicate” topic to one that can be talked about in no uncertain terms. She thus moves the conversation to a more “intimate” mode, in the sense used by Jefferson, and colleagues (1987), where topics previously constructed as “delicate” can be discussed freely.

Considering the manner of response to the facilitator’s question, it seems reasonable to deduce that her construction of DTI as a delicate matter was a move to facilitate the elicitation of information about DTI in the context of a focus group among strangers. The point, for the purpose of this analysis, is that the facilitator’s recourse to the interpretative repertoire of self-therapy was effected in the context of the construction of DTI as a delicate topic, relatively early in the beginning of the first focus group.

The facilitator’s cautious construction, with its depiction of preceding stress and subtle suggestion of subsequent intoxication, can be considered a recourse to the
repertoire of self-therapy due to its specific positioning, albeit implicitly, of DTI as a response to a stressful situation. By subtly portraying intoxication as self-therapy the facilitator provides participants with an in built excuse of the kind of behaviour she is enquiring about; a behaviour which might otherwise be heard as excessive or irresponsible among other things. She is, in a sense, presenting the behaviour being enquired about in the best possible light. Such a strategy eventually proves useful in eliciting stories of DTI, as demonstrated by Mary’s reply.

The interpretative repertoire of self-therapy was useful in eliciting focus group participants’ talk about DTI. This becomes clearer on comparison of Excerpt 6.1 with an instance where the repertoire was not employed to enquire about DTI. Literally minutes later in the same focus group, a different construction of the same pattern of consumption elicited the participants’ resistance rather than more stories about DTI. As the excerpt below shows, when intentional intoxication was constructed in a different manner, the focus group participants moved to counter such a construction of their behaviour as inaccurate.

Excerpt 6.2 (FG1 15:45 – 16:35)
1  Fac  what happens (0.2) uh:m ((water being poured))
2       (1.6) if- if you decide thachu’re going to get
3       pla:sted, what happens during that session,
4       what sort of (1.7) th:ings (0.3) go on? is it
5       [in a]=
6  Bob  [well]
7  Fac  =particular occasion or has someth-ing
8       triggered it off or is (0.5) or:
9       (1.4)
Luke well it’s more=it’s more that- you’re- you’re just out.
(0.4)
Mary >i don’t think=yeah<, you don’t usually ai:m to get(.)just (0.3)mff crapfaced=you jus (0.5)
drin an: (0.2) >take it as it comes< an:
eventually heh heh [☹you will.☺]
Fac [ it will ]happen.
[ hah hah hah ha ]
Mary [yeh, you know you are] but you don’t a::im to
(0.2) become that [way.]
Fac [so i]t’s not a deliberate thing=
Mary =yeh=
Fac =you’re saying this is it, i’m gonna get
plastered=
Mary =yep=
Fac =cause cause= [tonight’s]
Luke [ yeah ]
Fac friday.
Mary (SEE) I DO drink a fair bit but (0.4)uhm (0.6)
i don’t act stu:pid. (0.5) i can have ↑fun,
have a laugh, have a dance °(>blah blah
blah<)° but i’m not gonna be .hhh (0.3)
stag:erring around=and (0.1) bump into trees
and (0.1)vomit. everywhere and stuff li’ that.
Arguably, the facilitator’s questions in Excerpts 6.1 (lines 1-3) and 6.2 (lines 1-5) are enquiring about patterns of consumption with exactly the same outcome, that is, intoxication. However, whilst participants volunteered stories of intentional intoxication in response to the first inquiry, some of them took issue with the construction of intoxication as intentional in the second enquiry. In Excerpt 6.2, Mary and Luke refute the facilitator’s depiction of intoxication as intentional. Bob’s production of “well” (Excerpt 6.2 line 6), which Edwards (1997) argues is a quintessentialdispreference marker, suggests that he may also have begun to take issue with the facilitator’s construction. Certainly the specific production of Mary and Luke’s responses suggests dispreference, especially Luke’s repeated use of Bob’s “well” (Excerpt 6.2 lines 10 and 6 respectively), and Mary’s more explicit disagreement “i don’t think” (Excerpt 6.2 line 13).

The countering of the depiction of intoxication as intentional in Excerpt 6.2 contradicts Mary and Luke’s previous talk in Excerpt 6.1. Although the contradiction is moderated by the use of qualifiers: “it’s more that” (Excerpt 6.2 line 10) and “usually” (Excerpt 6.2 line 13), this still does not explain such a polarisation of constructed realities. In the first instance, when the facilitator employs the repertoire of self-therapy, Mary and Luke readily volunteer information about occasions of intentional intoxication. However, in the second instance, when the facilitator does not use the repertoire of self-therapy to enquire about DTI, both Luke and Mary refute the facilitator’s construction of DTI as intentional.

From a discursive perspective the focus group participants’ “inconsistency” can be understood as resulting from the management of two different discursive contexts constructed by the facilitator’s questions. On the first occasion, the
facilitator’s depiction of intoxication as self-therapy presented such consumption in a positive light. Intentional intoxication was depicted as purposeful and excusable on the grounds of significant mitigating circumstances subtly constructed as stressful. This depiction was successful in eliciting affiliative responses from both Mary and Luke. However, on the second occasion, the facilitator’s construction of intentional intoxication *sans* motivation (and therefore not framed within the self-therapy repertoire) positioned the same consumption in an arguably less positive or less excusable light. Understandably then, both Mary and Luke sought to distance themselves from the more negative depiction.

The comparison of these two excerpts demonstrates the usefulness of the repertoire of self-therapy in a focus group setting both from a facilitator’s and a participant’s perspective. From the facilitator’s perspective the repertoire of self-therapy enables the formulation of questions about intoxication in a manner designed to facilitate participant talk on the subject. It allows facilitators to elicit talk about a potentially reprehensible pattern of consumption whilst presenting participants’ behaviour in the best possible light, by a priori excusing DTI through a lessening of personal responsibility by appeal to mitigating circumstances. From a participant’s perspective, the repertoire of self-therapy provides a useful means to oblige facilitators’ requests for talk about intoxication whilst presenting personal DTI in a positive light, or at least excusing it.

One of the discursive benefits of the construction of intoxication as self-therapy is that it positions the act of drinking as only marginally relevant in terms of what it does for the drinker. Within the repertoire of self-therapy, the therapeutic end implicitly excuses or justifies the unstated means which is intoxication. This
particular manner of speaking in fact positions intoxication as the means to achieve a therapeutic end. That is, it is a consequence of alcohol consumption, namely intoxication, which is constructed as purposeful and motivated, rather than the consumption of alcohol itself. From this perspective, volume of consumption is indirectly relevant only in so far as it allows the achievement of a therapeutic purpose. In this way the repertoire of self-therapy can facilitate talk of instances which involve a level of alcohol consumption sufficient for intoxication by sidestepping issues of quantity.

This analysis helps to explain other researchers’ observations that young people tend to talk of drinking in terms of consequences rather than number of drinks (see for example Goodhart et al., 2003; Lederman et al., 2003; Sheehan & Ridge, Workman, 2001). In particular it shows how talking about drinking in terms of outcomes is useful for positive self-presentation purposes, at least in a research setting. Specifically, the construction of drinking episodes in terms of consequences allows for a sidestepping of issues of quantity which might pose problems for self-presentation, at least in some research settings, when high levels of consumption are at stake.

§6.1.1. Letting Off Steam: Drinking to Intoxication as Cathartic

In returning to the analysis of the first excerpt, it is interesting to note that whilst the facilitator never explicitly mentions DTI, her unfinished sentence is certainly suggestive of such a pattern of consumption. Apart from constructing the topic as delicate, the unfinished sentence allows participants to complete the sentence themselves in a manner they might find acceptable, and thereby accept the
invitation to talk about a topic that is being constructed as delicate. This is exactly what happens.

Following the facilitator’s trailing off, Jane pitches in with a metaphor that perpetuates the constructed “delicateness” of the topic of talk. This is achieved in two ways. First of all, by not finishing the facilitator’s sentence with a logically fitting completer, Jane, like the facilitator, treats the topic of talk as one that cannot or should not be explicitly named. However, the use of a metaphor also further indexes the topic of talk as delicate by treating it as one that should be discussed indirectly, namely through the use of metaphors.

In addition to perpetuating the status of the topic of talk as “delicate”, Jane’s particular production of the metaphor to “let off steam” achieves further important rhetorical work. This specific metaphor, whilst not constructing DTI in an explicit manner, nevertheless manages to allude to it. Thus, Jane’s production of “let off steam” demonstrates close attention to the facilitator’s question and the pattern of consumption being delicately constructed therein. It displays an orientation to the rhetorical work that the facilitator was trying to achieve with her question, that is, to enquire about a pattern of consumption by presenting it in the best possible light.

Although the gist of the question remains unchanged by Jane’s contribution, her utterance works up an arguably more positive construction of intentional intoxication than “getting drunk”. Whilst the facilitator had offered an excuse for intoxication by positioning it in response to unrelenting stress, Jane’s metaphor justifies DTI by positioning it as necessary. In this manner, Jane accomplishes the
presentation of respondents’ behaviour in the best possible light, a rhetorical move which was arguably initiated by the facilitator.

The depiction of DTI as letting off steam justifies this pattern of consumption by drawing on an implicit analogy between steam engines and life. Steam engines develop an inevitable, periodical build up of steam which must be released to avoid the boiler exploding. The analogy is that life events build up a kind of pressure or steam which inevitably, at some stage, requires some sort of release in order to avoid potential “explosion”. By positioning its periodical occurrence as necessary, the “let off steam” expression justifies occasional DTI, thus working up a more positive depiction of intoxication in comparison to the facilitator’s question which merely excuses such a pattern of consumption.

The metaphorical “let off steam” is an embodiment of the repertoire of intoxication as self-therapy. It can be considered a prototypical (Jacobs, 1986 cited in Wood & Kroger, 2000) construction of self-therapy in terms of appearance, though it is not necessarily typical in occurrence. The expression to “let off steam” constructs DTI as occasionally necessary, goal-driven consumption, where the goal is self-therapy. The assumptions underlying this construction are reminiscent of the psychological process underling catharsis, in the general sense of emotional release associated with talking about the underlying causes of a problem. Within the construction of “let off steam”, it is intoxication rather than talking, which provides emotional release, although talking and everything else that goes with DTI might also play a part (see Excerpt 6.1 line 24).

In previous social psychological writing, appeals to the notion of catharsis have been labelled as excuses (Semin & Manstead, 1983 cited in Potter & Wetherell,
In other words, it has been described as an account that constructs behaviour as reproachable whilst lessening personal responsibility (Scott & Lyman, 1968). However, it is clear from the way “let off steam” is used here, that the notion of catharsis can also be used as a justification. Tedeschi and Reiss (1981) attribute the use of catharsis as an acceptable account for behaviour to “the advent and incorporation in lay culture of Freudian and phenomenological psychologies” (p. 291). They argued that the proliferation of such perspectives introduced “new values into Western civilisation” that allowed accounts of behaviour based on catharsis to be accepted as legitimate explanations of a speaker’s actions (Tedeschi & Reiss, 1981 p. 291). In other words, over time, psychological theory becomes incorporated into common parlance. Indeed, the way the notion of catharsis is subtly used as a justification in the first excerpt is predicated on a valuing of freedom from stress which is currently highly valued in Western civilisations, as opposed to, for example, a premium on self sacrifice and endurance through trials which may have been more popular in previous eras.

Besides the rhetorical work that Jane’s utterance achieves, her turn on line 4 (Excerpt 6.1) is particularly interesting for the purpose of this analysis as it constitutes a clear demonstration of the way repertoires are jointly constructed by two or more speakers. Whilst Jane finishes the facilitator’s sentence, it would be misleading to say that the construction of DTI as therapy is only worked up by these two speakers. Luke and Mary also contribute. Essentially, in the first excerpt, the repertoire of self-therapy is constructed by four speakers.

The facilitator initiated recourse to the construction of DTI as self-therapy by producing a recognisable component of the self-therapy repertoire, that is, stress.
Although she also started to construct intoxication, it was Jane who eventually produced a complete construction of DTI as self-therapy in her turn on line 4 (Excerpt 6.1). Luke also contributes to a legitimisation of this joint construction, with what begins and is treated by the facilitator as an affirmative response. This construction however is taken up and reproduced by Mary in more detail.

§6.1.2. *Justifying Intoxication: A Multi-Level Process*

Mary readily agrees with the facilitator and Jane’s joint construction of DTI as self-therapy. She goes on to validate such a depiction of DTI by constructing her own experience using this interpretative repertoire. In line with what I argue constitutes an employment of the interpretative repertoire of self-therapy, Mary begins her construction of consumption with the depiction of a stressful situation. The extremity of the situation is emphasised with repetition (of “really” and “bad day”) as well as phonetic stress (see “really” and “baːd”) on the negative qualities of her experience (Excerpt 6.1 line 10). The implication is that Mary doesn’t just get drunk whenever a remotely stressful situation materialises, but only when the extremity of circumstances justifies it. She then constructs getting drunk as therapeutic by positioning it as a response to, or a decision based on the stressful circumstances. The elevated level of consumption implicit in the construction of drunkenness specifically depicts a relatively high volume of alcohol as therapeutic.

The depiction of getting drunk, with its construction of a pattern of consumption that goes beyond DTI, mirrors Mary’s construction of the extremity of the stressful situation. In this way, Mary’s talk positions intoxication as an adequate response proportionate to its cause. Her construction of getting drunk comes across
as situationally appropriate specifically because the excess which that implies is concordant with the constructed extremity of the situation. Essentially, the association of excess consumption with an extreme situation makes logical sense. The same logic has also been noted in another setting. Benford & Gough (2006) similarly found that the amount of chocolate that chocolate addicts reported eating during interviews was associated with the reported degree of stress experienced. The use of this logic helps to depict behaviour that might otherwise be considered extreme as justifiable.

Whilst the repertoire of self-therapy might serve as a useful discursive resource in the justification of personal episodes of DTI, Mary uses a number of other discursive devices to present her consumption in a positive manner and dismiss more negative alternatives. As mentioned in the previous chapter, interpretative repertoires are often employed as but one discursive device amid a range of others, such as switches between first and second person for example, which collectively work to justify DTI. In this instance, in addition to employing the repertoire of self-therapy, Mary positions intoxication as part of an occasion *as a whole*, which includes getting drunk (Excerpt 6. 1 line 12), relaxing (Excerpt 6. 1 line 12), and not having to think about work (Excerpt 6. 1 line 13). This is achieved by grouping these separate activities with the conjunction “and” within a three part list. In this case the list serves to typify an entire event or drinking occasion without the need for additional information (see Edwards & Potter, 1992 for other functions of three part lists). The grouping of drunkenness together with relaxation and the suspension of work related thoughts is particularly strategic here. By positioning such a pattern of consumption alongside understandable and irreproachable behaviour, Mary is not so
much neutralising drunkenness as treating it as a neutral and understandable behaviour.

Another way that Mary works up her DTI as justifiable is through an emphasis on agency and personal choice with the repeated use of first person and the positioning of DTI as a considered choice. As discussed in the previous chapter, focus group speakers generally strived to present their personal alcohol consumption as under control. This strategic rhetorical move counters the alternative possibility that intoxication might be accidental. In particular, Mary specifies her intention to “get drunk” rather than say for example, have a drink. The emphasis on agency contributes to a portrayal of control over consumption and a positioning of intoxication as a choice rather than an unforeseen outcome, which could otherwise suggest undesirable attributions of inexperience or a lack of self-control.

Moreover, Mary’s reference to Friday afternoon (Excerpt 6.1 line 11) performs important rhetorical work in demonstrating the controlled nature of intoxication. Mentions of Friday afternoon intoxication were also noted in another focus group study with 18 to 24 year olds conducted in Britain. Engineer et al., (2003) concluded that “Friday night is seen as the time to ‘let yourself go’ and forget the frustrations of the working week… the urge is to let off as much steam as possible between Friday and Monday” (p. 13). The alternative worked against in Mary’s case and possibly in Engineer et al.’s (2003) focus group is that whenever the drinker has a particularly bad day, they get drunk without any concern for the following day’s responsibilities. Instead, the reference to a specific weekday is arguably based on the common understanding that Friday afternoon is the end of the working week and the beginning of leisure time, a time which one can spend
however he or she chooses with little or no impact on productivity or work-related commitments.

Essentially, the construction of intoxication as occurring on a Friday afternoon contributes to its legitimisation by portraying it as controlled and not interfering with work related duties. It echoes Mark’s construction of moderation in view of next day work commitments in Excerpt 5.2. Additionally, in Mary’s case, the construction of the stated circumstances as “the only time i let off steam really”, positions therapeutic intoxication as legitimate by suggesting that it is not simply warranted for any small reason, but that it has a distinctive and controlled function in extreme circumstances, such as following an exceptionally bad day at work.

Whilst Mary’s use of first person is used to construct control and agency, an additional way in which she works up the legitimisation of her intoxication is with strategic switches between first and second person, in constructing the consequences of intoxication. Although Mary’s response clearly constructs personal experience, as indicated by the repeated use of “I”, it also involves a pronoun shift to “you” (Excerpt 6. 1 line 15).

Mary’s reference to “you” is produced in the following context: “cause i don’t. (0.2) think- >about work<=if there’s music playing and you’re dancing and stuff.” (Excerpt 6. 1 lines 14-16). Consider for a moment the following possible and plausible alternative: “cause I don’t- think about- work. With the music playing and I’m dancing and stuff”. The hypothetical constructs a fundamentally personal experience. However, if we now consider what Mary actually said, it becomes clearer that the use of “you”, or the
inclusion of others, broadens the applicability of constructed behaviour to position it as common or generalisable. Thus, it is not simply Mary who dances, and, later, lightens up and relaxes (see Excerpt 6.1 lines 24 and 25). The use of “you” positions these behaviours as widespread and even somewhat stereotypical within the constructed context. Guise and Gill (2007) also noted the same use of “you” and pronoun shift from “I” to “you” in their discussions on binge drinking with Scottish female undergraduates. They write that “the effect… is to suggest that this behaviour is generalized” (Guise & Gill, 2007 p. 901). In essence, Mary’s supplementation of personal experience with references to what “you” do, serves to position her experience as common rather than idiosyncratic, thus legitimising the therapeutic effects of intoxication on the basis of a constructed prevalence.

The analysis of the various discursive moves that Mary employs to present her DTI in a positive light suggests that the justification of DTI is a complex, multi-level process rather than a simple straight forward task singularly achieved by the employment of the interpretative repertoire of self-therapy. Whilst the repertoire of self-therapy might be useful in justifying DTI, that is not to say that it is sufficient. Speakers often used a number of rhetorical devices, of which the repertoire of self-therapy was only one, to present their DTI in a positive, irreproachable manner. There were a number of other strategies which participants used to present their DTI as irreproachable that were not explored in this thesis as they were considered beyond the scope of this research. Some of these have also been noted by previous researchers. Two examples include the positioning of intoxication as “Australian” and therefore, an almost indisputable part of national identity (see Lyons and Willott (2008) for instance, for an example of how New Zealanders positioned drinking as a
New Zealander thing to do), as well as the positioning of repeated intoxication as an inevitable part of adolescence (see also DeCrespigny et al., 1999 for example). The strategies contributing to positive self-presentation discussed in more detail in this thesis are included as they occurred in the context of the employment of any one of the repertoires examined here. The examples discussed illustrate how recourse to one interpretative repertoire over another could also be considered a part of a number of diverse discursive strategies contributing to positive self-presentation. In all likelihood the employment of multiple strategies of positive self-presentation was due to the fact that each of these was designed to counter particular alternatives. That is to say that individual repertoires were not infallibly positive depictions of DTI.

§6.1.3. Therapy and Escape: Good vs. Bad Motivations for Intoxication

In the previous chapter I commented on what Billig (1987) called the “argumentative” nature of talk as it applies to constructions of DTI. Essentially, constructions of DTI are designed to dismiss possible, usually more negative alternatives. This was also the case for the repertoire of self-therapy. Specifically, recourse to the repertoire of self-therapy made available two contrasting possibilities with variable implications for self-presentation. The first was the presentation of DTI as a positive and justifiable response to a stressful situation discussed thus far. The second was a more negative depiction of DTI as an unconstructive way to escape or forget about stressful circumstances.

In general, it appeared that the positioning of DTI as a justifiable response to a stressful situation appeared to be achieved through the depiction of DTI as positive reinforcement, or as leading to pleasurable outcomes such as relaxation. On the other
hand, some depictions of DTI appeared to involve negative reinforcement, or the presentation of DTI as allowing the removal or suspension of negative feelings or thoughts. The latter depictions were ones from which speakers often tried to distance their drinking, thus contributing to an overall depiction of such consumption as negative, or worth distancing the self from.

The noted observation of a possible relationship between the justification and criticism of DTI with positive and negative reinforcement is in no way meant to imply intentionality on a speaker’s part. After all, it would be farfetched to even remotely suggest that speakers consciously depict DTI as positively or negatively reinforcing in order to justify or criticise alcohol consumption respectively. Rather, the relationship noted between positive and negative reinforcement on the one hand, and justification and criticism on the other, is more likely a result of the effect of positively and negatively worded outcomes respectively. Specifically, it appeared that when the outcomes of DTI were worded positively as in “lighten up” and “relax” in Excerpt 6.1, these may have allowed a more positive picture of consumption. Conversely, it appeared that, in general, outcomes that were worded more negatively such as “to m-remove yourself away from what-what (on earth) is happening at wo:rk” may have contributed to a slightly more negative picture of consumption. Of course, the flexibility of talk guarantees that there are exceptions. Indeed, in the first excerpt, the construction of letting off steam could be considered a depiction of negative reinforcement for its emphasis on the release of a negative pressure. However, as previously argued, it was used to contribute to a positive portrayal of DTI, indeed a portrayal of DTI in the best possible light.
Despite the exception mentioned above, Excerpt 6.1 offers other indications suggesting that speakers may generally treat negatively worded outcomes of DTI as a problem. For example, in Excerpt 6.1, Mary works to portray her DTI in a positive manner by constructing mostly positive outcomes. These are: letting off steam (Excerpt 6.1 line 17), lightening up (Excerpt 6.1 line 24) and relaxing (Excerpt 6.1 line 25). These positive outcomes position DTI as positively reinforcing. However, Mary also mentions “>not have t’ think about<- (0.3) w↑ork.” (Excerpt 6.1 line 13) which is worded negatively and therefore could be considered a negative reinforcement. Note that this is immediately and explicitly attributed to the presence of music and dancing and stuff, rather than to getting drunk. In this way Mary specifically counters the assumption that it is intoxication which allows the suspension of work related worries. Such a construction would in fact position DTI as negatively reinforcing. Mary thus treats this construction as problematic by distancing herself from it.

Arguably, exactly what can be considered negative or “bad” motivations for DTI are likely to be constructed in variously different manners in different contexts. However, in line with the argument proposed here, previous research suggests that negative reinforcement or negatively worded outcomes are normally regarded in a negative manner. For example, a study of American college students found that participants were quite clear in specifying that they did not use alcohol as a coping strategy (Rabow & Duncan-Schill, 1995). The researchers reported that such a motivation was regarded somewhat negatively. Drinking among this sample was noted to function more as “time out” than tension relief. Similarly, although young English binge drinkers admitted to occasionally drinking to escape daily worries,
drinking specifically and solely to relieve stress or anger was often frowned upon among this sample as well and regarded as a “bad” motivation (Engineer et al., 2003 p. ix). In line with previous research, the end of Excerpt 6.1 suggests that different motivations for DTI can be treated as more or less acceptable.

Following Mary’s construction of “the only time” she “let(s) off steam” (Excerpt 6.1 lines 16-17), the facilitator produces a formulation of Mary’s talk. Formulations consist of constructions of the upshot or gist of a previous speaker’s talk (Heritage & Watson, 1979). Heritage and Watson (1979) note that as such, formulations can be considerably contentious. Speakers whose talk is being formulated can, and often do, counter and reformulate exactly what it was that they were trying to convey (Heritage & Watson, 1979). To some extent, this is what happens in this excerpt.

The facilitator’s formulation of Mary’s reply focuses on only one of the outcomes Mary constructed, that is, the suspension of work related thoughts. This restricted focus lends itself to a depiction of Mary’s consumption as escapism, by framing a positive outcome in negative terms or constructing consumption as solely motivated by negative reinforcement. Recall instead that Mary had previously attributed “>not have t’ think about<- (0.3) work.” (Excerpt 6.1 line 13) to “dancing and stuff” (Excerpt 6.1 lines 15-16). By reformulating only one outcome of Mary’s consumption, the facilitator reconstructs the therapeutic value of Mary’s consumption as the extent to which intoxication allowed Mary to “to m- remove” (Excerpt 6.1 lines 19-20) herself from the situation at work.

Whilst Mary does a display of agreement (“yeah” Excerpt 6.1 line 23) with the facilitator’s formulation, she then goes on to focus on the other previously
mentioned, more positively worded outcomes of intoxication such as lightening up and relaxing. This reproduction draws a link between Mary’s response to the facilitator’s formulation and her original answer to the facilitator’s question. It functions to portray Mary’s subsequently more positive construction of the outcomes of intoxication as what she had been saying all along and not as a revision of her earlier turn. Although the outcomes Mary now reproduces are not incompatible with the facilitator’s attribution of escapism, they allow her to depict her consumption in a more positive manner than that afforded by the facilitator’s negatively worded formulation. Mary’s construction of positive outcomes allow her to depict her DTI in terms of the positive things such as talking, lightening up, and relaxing, that DTI does for her- and others for that matter. The shift from negatively to positively reinforcing outcomes arguably repositions Mary’s intoxication in a more positive light.

In addition to constructing her consumption as positively reinforcing, Mary’s reply to the facilitator’s formulation constructs a social aspect of intoxication, with the explicit claim about “it” being “a good social (0.9) thing.” (Excerpt 6.1 line 23). The significance of this construction rests on its ability to present Mary’s consumption as normative and socially acceptable. Guise and Gill (2007) also noted that the Scottish female undergraduates in their focus groups often constructed the “sociality” of their consumption in a way that “emphasizes that such practices are normal in this particular group of people, which works to counter any negative implications for the individual who is speaking” (p. 902). Similarly, in Mary’s case, the construction of the sociality of consumption allowed her to move away from the facilitator’s more negative construction of escapism. Indeed
constructions of escapism work up idiosyncratic motives that can conjure negative images of “drowning sorrows”, as we will see in relation to Excerpt 6.3. Mary’s construction of the sociality of her consumption works specifically against the possibility of a more idiosyncratic motive, thus painting a much more positive and socially acceptable image both of this pattern of consumption and the drinker.

Another discursive move which contributes to an overall construction of the sociality of Mary’s consumption is the use of the second person pronoun. Through the use of “you” Mary subtly repositions the therapeutic value of intoxication as a prevalently social phenomenon, rather than an idiosyncratic, and therefore possibly more accountable one. The positioning of the positive value of intoxication as prevalent transforms Mary’s description into fact, as opposed to personal experience, by appealing to consensus as corroboration (Potter, 1992, 1996). It contributes to the legitimation of this pattern of consumption based on the notion that if everyone is doing something (i.e. getting drunk and dancing, lighting up and relaxing) it must be okay. This social repositioning of intoxication lends an undisputed acceptability to DTI, which allows Mary to position her own drinking as normatively unremarkable.

The exchange between the facilitator and Mary on lines 18 - 25 (Excerpt 6.1) demonstrates how the construction of different outcomes and motivations makes available different, more or less acceptable inferences about an actor. In line with Tedeschi and Reiss (1981) who noted that the blameworthiness of an action is strongly related to the actor’s intentions, this analysis shows that depictions of varying outcomes and motivations can be employed to present one’s consumption as more or less acceptable, thereby attending to issues of impression management.
This excerpt provides strong support for the claim that the repertoire of self-therapy is not an infallibly positive depiction of DTI. Essentially, the repertoire of self-therapy could be considered a double edged sword in that it can be used in two different and contrasting ways: to justify DTI or to present it as somewhat problematic. Indeed, the employment of the repertoire to achieve either of these ends makes relevant the alternative possibility which a speaker may nevertheless counter, as I have argued Mary does. This feature of the repertoire of self-therapy, one that is common to all repertoires addressed in this thesis, will be illustrated and discussed in more detail in relation to the next excerpt.

6.2. **Questioning Intoxication as Self-Therapy**

In the next excerpt, another focus group speaker’s link between a stressful event and a drinking occasion can be heard as a construction of self-therapy. The excerpt shows how the interpretative repertoire of self-therapy is a relevant participant concern, in as much as co-conversants orient to other speakers’ talk as possibly constructing intoxication in this manner. It shows that the employment of one interpretative repertoire over another has immediate discursive consequences in a focus group setting and that within the same repertoire, alternative constructions of the same event as more or less acceptable are equally possible.

*Excerpt 6.3 (FG6 05:53 – 08:28)*

1. Rose uh:m my lahs (.) drinking experience was 😊 last
2. ↑night. 😊 hhh heh heh [.hh]
3. Fac [okay]
4. Rose UHM a:y- broke up with my boyfriend (.) two
days ago. (0.3) and (.) one of my friends<
(0.5) said come out and we’ll have (.) a chick
flick night=>an i was like okay=so< .hh i uhm
(0.5) took- like a small like (.) i had er::
(0.9) ’bout a ↑fifth of a malibu bottle left
over (.) so:: i took that out .hh with some
juice (.) and we (.) made dinner. .hh got
some- chocolate ice cream. (0.5) >started
watching some chick flicks and then< (0.2) when
we had dinner we had (.) we shared the (.)
malibu¹⁵. .hh but then (.) after that was gone
(0.4) an: we were through the second movie
(0.4) we’d- (0.3) polished off half of the ice
cream an
Fac mh
Rose we uhm (0.4) >ended up< going ’round the house
looking for more alcohol. >we ended up< (0.6)
finding some (. ) premix (. ) bundy rums¹⁶ an .hh
>had about< (0.3) .hh oh (. )i think i had two:
(0.6) he >had about< (0.3) four, (0.5) and then
(0.3) we had (0.3) like two yager bombs¹⁷ each

¹⁵ Malibu is coconut flavoured white rum with an alcohol content by volume of 21%.
¹⁶ “Pre mix bundy rums” can refer to either cans or stubbies of ready to drink Bundaberg
Rum, a dark rum, mixed with Cola. The alcohol content by volume of such drinks can vary between
3.5% and 6.9% depending on the specific variation of the product consumed.
hhheh hhh uhm😊 (0.5) didn’t- end up sleeping,
(0.3) an’- i still haven’t slept yet
Fac o(h) g(h)osh
Rose °but yeah°=>i think i had twenty minute
sleep.< (. ) but that ws about it
Fac >you mus be tired<
Rose >little bit.< uhm (0.2) °but yeah.°
(0.5)
Fac but it was worth ↓it
Rose uhm (0.5) i dunno. i- (0.4) drinking’s always
kind of like ye↑ay (. ) you kind of- get happy-
when you drink. (. ) but .hh (0.4) >i made
myself go to the gym today<- (0.1) and i hated
it. (. ) because i knew that .hh >what i did at
the gym today still doesn’t make up for how
much i drank 1(h)ast n(h)ight<. .hhh
Fac are you talking calorie wise [ or ]
Rose [yeah]
Fac o:h ok↓ay
Rose °so.°
(.)
Fac alright=

17 The Jägerbomb is a cocktail that is mixed by dropping a shot of Jägermeister, a herbal
liqueur with an alcohol content by volume of 35%, into a glass of Red Bull- a non alcoholic energy
drink.
Bill = so are you saying you drank just because (.)

you broke up with your boyfriend?

Rose .hh uhm no i was saying (.) we were drinking

because (0.3) well yes (.) >wen over there

becoz i broke up with my boyfriend an we were<

(0.2) just having some friend time, (0.3) and

then (.) .hh we thought oh we’ll- we’ll have

some (0.5) drinks with dinner. (0.6) and then

(0.5) we had some more drinks (h)aft(h)er
d(h)inn(h)er heh heh heh heh

Fac mm hm.=

Bill = thought probably wanted sort of- (0.3) to

forget about you boyfriend=like- (.) to drown

the miser’ or something.

Rose uh::m (0.3) last time we broke up (0.2) i did

that. that was uhm (0.6) why i can’t drink

vodka anymore. .hh we uh:- i found (0.7)

Fac ((gets up))sorry- keep going >i just think i

jussaw [someone]<

Rose >[ FOUND ]some really horrible emails<

and i(.)>started crying< and then i ended

up-.hh walking to the kitchen(0.2) shotting

Will ((distant)) "hi"

Rose strait vodka (.) >just one after the other.<

had about- three of ‘em. >and then i had a

vodka lemonade chaser.<
Dan  
Rose  
Fac  
Dan  
Rose  
Fac  
Rose  
Fac  

This excerpt, also taken from early in the focus group much like Excerpt 6.1, begins with Rose's construction of her most recent drinking experience. Similar to Mary's talk in Excerpt 6.1, Rose constructs a stressful circumstance, in this case a recent boyfriend break-up, and subsequent escalating alcohol consumption. Such a depiction of events is congruent with the employment of what I have labelled the interpretative repertoire of self-therapy.
The prefacing mention of a recent break-up performs significant rhetorical work in this context. This seemingly small detail is motivationally implicative in that it contributes to a particular contextualisation of the drinking episode. It subtly suggests a possible motivation for the constructed consumption, without explicitly offering it as an excuse. The construction of the break-up implicitly justifies or at least excuses the subsequent alcohol consumption by working up mitigating circumstances.

If one imagines the same story without the mention of the break-up, the rhetorical work it achieves becomes clearer. Without the mention of the break-up, Rose’s story would have more simply depicted a “chick flick night” (Excerpt 6.3 lines 6-7). In this alternative context, the alcohol consumption recounted would have been harder to explain. For example, why did the friends search for more alcohol once the initial supply ran out? In the absence of a mention of the break-up, the same depiction of events would have been particularly suggestive of problematic motivations for the extent of the alcohol consumed.

Instead, Rose’s mention of the break-up excuses or at least explains the significant part that alcohol is depicted as playing in last night’s events. Drinking is positioned as a deliberately significant part of the occasion with the Malibu reference, the construction of the type and number of drinks consumed, as well as the depiction of a search for more alcohol. Thus it could be argued that in this context, recourse to the interpretative repertoire of self-therapy through the mention of a relationship break down helps Rose to depict an occasion of considerable alcohol consumption as excusable, or at least, understandable. In this way the speaker minimises any potential threat to face that could be incurred by introducing
talk about considerable alcohol consumption in a focus group setting amongst strangers.

Rose’s use of the repertoire of self-therapy here performs much the same function as its use by the facilitator and Mary in the first Excerpt. That is, it contributes to a construction of Rose’s behaviour in the best possible light. It introduces DTI into the focus group discussion for the first time, and it does so alongside a minimisation of agency. This particular strategy is arguably designed to deflect possible claims of accountability in a context where it is as yet unclear whether DTI will be treated as problematic or otherwise. Note the timestamp showing the extract as being taken from approximately just six minutes into the focus group. Prior to Rose’s talk above, there were the usual facilitator introduction, participants’ introductions and two participants recounting their most recent drinking experience in response to a facilitator question. Although the data is not shown in the interests of parsimony, the other two participants previously answering the facilitator’s question about their last drinking occasion constructed episodes involving low levels of consumption, that is, not DTI. Thus it could be argued that in this case, similar to the case in Excerpt 6.1, the repertoire of self-therapy is being employed in a context where the focus group’s treatment of DTI as problematic or otherwise has not yet been established. The main difference between Mary and Rose’s talk is that whilst Mary (and the facilitator) constructed a very explicit link between stress and DTI, the link constructed by Rose is implicit.

Whilst the mention of the break-up could serve to excuse Rose’s consumption that is not to say that such an excuse was unquestioningly accepted by co-conversants. As argued thus far, there was always the possibility that the same
event may be constructed in alternative ways. For example, that drinking or getting drunk in response to a stressful situation could be regarded negatively as “bad” motivation, as has been noted in previous research (Engineer et al., 2001; Rabow & Duncan-Schill, 1995). As this analysis will go on to illustrate, such an alternative was arguably constructed by Bill.

Bill’s first response to Rose’s story makes explicit the implicit link between the break-up and alcohol consumption. Congruent with the analytically demonstrated function of the mention of the break-up, Bill proposes a formulation of Rose’s reported drinking as motivated by her break-up. Thus what was previously only alluded to now takes centre stage. The break-up’s explicit topicalisation immediately suggests that there might be something wrong with such a motivation, something that a speaker can be held accountable for. In this way, through explicit questioning, Bill arguably problematises Rose’s consumption by questioning the link between the break-up and drinking, a link that was previously constructed much more implicitly.

On the surface, Bill’s reply to Rose’s account may be interpreted as an empathic statement; similar to the sort of statement a client centred therapist might make in reflecting back to the client what they have said, allowing them to clarify their thoughts. Indeed, Bill’s formulation of Rose’s account is presented as a check for understanding. However, its particular production allows it to be heard and subsequently responded to as an accusation. Specifically, Bill’s use of the simple present tense “drin” (Excerpt 6.3 line 48) constructs an action that is repeated or usual. This retrospectively casts Rose’s account as representative of her drinking in general. Given that there is nothing in Rose’s account that could suggest such an
interpretation, this formulation could be heard as provocative. Moreover, the combined restrictive and depreciatory use of “just” (Lee, 1987) retrospectively frames Rose’s drinking as solely and questionably motivated by the recent break-up. Note that what Bill constructs as accountable is Rose’s motivation, not her level of consumption\textsuperscript{18}.

The subtle intertwining of meaning positioning Rose’s drinking as solely and questionably motivated by the recent break-up allows Bill’s question to be heard as an accusation. It does this by depicting the break-up as both the only reason for Rose’s drinking and simultaneously downplaying its acceptability. Thus, by singling out and questioning Rose’s intentions Bill portrays her motivation as blameworthy in some way (cf Tedeschi & Reiss, 1981). This is all achieved in a very subtle or implicit manner, by packaging a soft accusation within what could otherwise be heard as a simple check for understanding or an empathic statement.

\textsuperscript{18} This particular point is worth noting, especially in relation to the concluding comments section of Chapter 5. There I noted that the repertoire of recreation is only used in contexts where DTI has been previously mentioned and has not been treated as problematic. I also noted in relation to Excerpt 5.3, that the first time DTI was mentioned in that particular focus group (Focus Group 6) was illustrated in the current chapter in Excerpt 6.3. Although it may appear that Bill’s criticism of Rose’s account problematises her DTI (thus invalidating my claims in the concluding comments of Chapter 5), this is not the case. As the analysis presented unfolds it becomes evident that what Bill problematises is Rose’s motivation. Thus my claim that the repertoire of recreation is used by Kim in Excerpt 5.3 only after DTI is introduced in that particular focus group by Rose in Excerpt 6.3 and not problematised still stands.
By countering the possibility that drinking “because (.) you broke up with your boyfriend?” might be an acceptable motivation, Bill’s formulation effectively accomplishes two separate but related things. It discounts the possibility that alcohol consumption can be simply therapeutic, and it constructs a motivation based on this tenet as incomprehensible, and thus, reproachable or problematic. Specifically, the combination of the words “drink” and “just” position all of Rose’s drinking as solely, and incomprehensibly, motivated by stress. By countering the possibility of other, including more positive motivations for drinking, such as enjoyment and recreation for example, Bill subtly positions Rose’s intentions, and therefore her behaviour as problematic.

Bill’s subtle criticism shows that accounts can be controversial, as noted by Billig (1987). Where Rose initially drew on the repertoire of self-therapy to excuse considerable consumption, the depiction of events that this discursive move facilitated was then questioned by Bill. In his check for understanding, Bill effectively countered Rose’s nonproblematic construction of events with an alternative version of her account, which positioned Rose’s consumption as problematic. At this juncture, Rose responded with a classic “restatement of intentions” possibly “in hopes the listener will accept it as a justification of the behaviour” (Tedeschi & Reiss, 1981 p. 293).

§6.2.1. **Responding to Subtle Criticism: A Reformulation of Intentions**

Rose responds to Bill’s turn as an accusation by countering his formulation of her behaviour, and working up another alternative positioned as more accurate. She depicts the alternative construction as what she had been saying all along
through the use of the past progressive tense “I was saying”. This marks her forthcoming talk not as an *ad hoc* reworking of her story in light of Bill’s accusation, but a restatement of what she had been “saying” all along (for a more in-depth exploration of the discursive device “I’m just saying” see Craig & Sanusi, 2000). In this way Rose moves to disassociate her account, and herself, with Bill’s negative formulation of her behaviour. Through this strategic rhetorical move she protects herself “from the loss of face that results from being criticized” (Craig & Sanusi, 2000 p.443).

In her reply, Rose addresses both of Bill’s criticisms that a) the account was representative of her drinking in general and b) that her drinking is solely motivated by the recent break-up. She addresses the first criticism by constructing what she “was saying” with the past progressive tense “were drinking”, which depicts a past and no longer occurring action rather than one that is representative of a more general trend. She then goes on to start to address the second, motivational, issue with a production of the conjunction “because” which signals an impending construction of motivation. Significantly, Rose’s use of “we” instead of “I” in the production of “we were drinking because” is particularly helpful in countering the interpretation of drinking as solely motivated by the break-up. As Guise and Gill (2007) have noted, the use of we constructs a shared and social rather than an idiosyncratic activity. In this case, it serves to construct a shared motivation. The construction of a shared motivation is in turn incompatible with the idiosyncratic reason for consumption attributed to Rose by Bill, that is, a break-up with her boyfriend.
Interestingly, there is a clear cut off after Rose’s production of “because” (Excerpt 6.3 line 51) as she refrains from producing an alternative motivation for her drinking. Arguably, at this point in the conversation, the proposal of another, previously unstated motivation could have been problematic in that it could be countered as an obvious attempt to “change the story”. After all, the only potential motivational aspect of her original story was the recent break-up. Consequently, in order to more directly deal with and counter the criticism constructing the break-up as a reproachable motivation, Rose accounts for her mention of the break-up by explicitly reformulating the implications that can be drawn from it and reformulating her intentions for the event.

Rose discounts Bill’s criticism by recasting the break-up as the reason for her visit to her friend, rather than the reason for her subsequent drinking. In this version of events, Rose simply went to visit her friend because she broke up with her boyfriend. This reformulation of intent effectively denies that the break-up was an excuse for the level of consumption. Effectively, the repositioning of the break-up as the reason for visiting a friend thus reduces this detail’s potential explanatory power in relation to the level of alcohol consumed. In this context then, there is no longer an excuse, implicit or otherwise, for the level of drinking that ensued. Whilst the mention of dinner provides a context for alcohol consumption, it is hardly an adequate excuse for the level of consumption reported previously. That is arguably why the alcohol consumption is constructed in an entirely different manner in the second version of events. After all, in the absence of mitigating circumstances, the level of alcohol recounted in the first account of events could be heard as unnecessarily elevated or problematic, among other things.
In the second version of events, the friends’ subsequent drinking is positioned as an afterthought, or an addition not included in the original plan, through the use of reported thought. As Myers (1999) has noted, the use of reported thought is particularly useful as it economically conveys, through voice quality, the nonchalance with which drinking was introduced as part of the occasion. Note this second version of events conveniently omits the reference, present in the first account, to Rose’s taking Malibu to her friend’s house. This “detail” indicates forethought in terms of whether drinking would ensue or not, and would thus have undermined the revised version of the events. The Malibu, pre-mix Bundy rums and Jägerbombs are more simply reconstructed as “some (0.5) drinks with dinner.” and “some more drinks (h) aft(h)er d(h)inn(h)er”. This is an arguably less morally implicative construction, not least of all because it obscures volume of consumption. Rose’s laughter following this revised construction might be heard as an attempt to manage the tension between the two different, but not incompatible, constructions of drinking. It also serves to position her drinking as a light hearted matter with no serious consequences.

Rose’s reply to Bill’s criticism essentially counters her previous construction of therapeutic intoxication by positioning such a formulation of her talk as mistaken. The delicately managed (re)construction of events demonstrates the flexibility with which constructions of alcohol consumption are employed. In this excerpt, the interpretive repertoire of self-therapy initially functioned as a useful discursive device employed to present alcohol consumption in a nonproblematic manner. However, when such a construction was criticised, Rose easily reformulated the conclusions that could be drawn from her mention of a break-up, as well as her
intentions, in order to dismiss the “therapeutic” construction of alcohol consumption now called into question.

Rose’s response to Bill, the way she reconstructs her consumption, demonstrates that particular constructions of intoxication are not fixed on deployment once and for all, but rather are managed and refined or revised in talk. Different aspects of intoxication can be constructed to lead to different implications for the acceptability of recounted behaviour as well as the accountability of the drinker. Moreover, Rose’s explicit reconstruction of the import of the mention of the break-up demonstrates the usefulness of implicit constructions of self-therapy. Had Rose constructed a more explicit link between her break-up and drinking, as Mary does of bad days at work and Friday afternoon drinking, it would have been much harder for her to then dismiss Bill’s criticism. Instead, the subtlety with which she constructs her drinking as self-therapy in the first account subsequently allowed her to counter Bill’s criticism without any obvious contradictions.

§6.2.2. Drowning Sorrows: The Problematisation of DTI as Self-Therapy

Following Rose’s reply to Bill’s formulation it would have been possible for the conversation to move forward and away from Rose’s experience. This is not what occurs. Rose’s revised account of last night’s events effectively positioned Bill’s interpretation as incorrect. Possibly as a result of this, Bill then moves to account for his apparently mistaken interpretation. He quickly takes the floor again by latching an utterance to my production, as facilitator, of a minimal acknowledgement token.
On lines 59-61 of Excerpt 6.3, Bill accounts for his previous question by employing the past tense to construct a past impression or “thought”, as one that is no longer current. By positioning his thoughts in the past, he is able to suggest that what he thinks now might be different. In the context of the exchange, this can be heard as a display of acceptance of Rose’s explanation. In this way, Bill’s talk simultaneously explains why he earlier questioned Rose, whilst doing a display of accepting her explanation and thus, his mistake. The tentative and moderate construction of Bill’s utterance, worked up with qualifiers like “probably”, “sort of” and “or something”, also contribute to the impression that it is being offered as an account of his mistaken interpretation, in light of Rose’s rebuttal. However, the exact wording effectively upgrades his previous criticism.

Bill’s first criticism, being presented as a check for understanding, was subtle. He had problematised Rose’s motivation simply by calling it into question, thus subtly suggesting that it may have been problematic. However, Bill’s reply to Rose’s second account arguably constructs an explicit and much more negative picture of Rose’s consumption. Bill upgrades his criticism from drinking “just” because of a break-up to wanting to “drown the miser’”. Through the latter colloquialism Bill retrospectively and more explicitly constructs Rose’s drinking as an attempt to forget her problems (drown, n.d.). This expression efficiently depicts Rose’s DTI as negative reinforcement. As noted in relation to Excerpt 6.1, such depictions of DTI are normally treated as negative or problematic in as much as they are normally countered by speakers. Similarly in this excerpt, Bill’s particular formulation of Roses’ behaviour can be heard as negative in as much as it is one that she had just tried to counter.
The juxtaposition of the expression to “drown the misery” alongside the expression to “let off steam” from the first excerpt illustrate the constructive nature of talk as well as what I have called the “double edged” nature of the interpretative repertoires of recreation and self-therapy. In line with the analysis developed thus far, it illustrates that whilst speakers use a repertoire to construct their consumption in a particular manner, there is always the possibility of alternative, more or less acceptable constructions of their behaviour, even within the same repertoire. Note that whilst Bill’s upgraded criticism constructs DTI as self-therapy in a problematic manner, it does not completely undermine the legitimacy of this repertoire. Actually, the use of the colloquialism to “drown the misery”, like the colloquialism “to let off steam”, arguably situates such a pattern of consumption within popular Western culture. Specifically, the use of the colloquialism “to drown the misery” constructs DTI as self-therapy as a pattern of consumption that is “out there” or one that is practiced in society at large (why else would there be a common term for it?), whilst nevertheless condemning it.

Rose addresses Bill’s second criticism by constructing an occasion in which she did what he claims she had done on the occasion she had just recounted, that is, drowned her misery. Through the construction of another break-up and subsequent escalating alcohol consumption, Rose displays a recognition of Bill’s criticism as based on a problematisation of the repertoire of self-therapy. By constructing another occasion as congruent with Bill’s mistaken interpretation, Rose accomplishes at least two things. First she demonstrates what she had been saying all along, that the previously depicted drinking occasion did not fit with such an interpretation. Second, she is able to demonstrate an understanding of Bill’s
criticism and affiliate with it, thus countering the possibility that she may have not understood Bill’s criticism or that she may not agree with it.

The construction of a time when she “drowned the misery” allows Rose to affiliate with Bill’s criticism of therapeutic drinking by presenting the episode in a negative light. This is achieved though the construction of negative consequences (Excerpt 6.3 lines 80-82). The production of this story also allows Rose to further rebut one of Bill’s initial accusations- that all her drinking is motivated by the break-up or other stressful circumstances. This particular possibility is countered by portraying a particular occasion as “the only time” she drank because she was “upset”. This latter claim also serves to manage the issues of self-presentation associated with depictions of personal engagement in reproachable behaviour. Arguably, constructing one’s behaviour as therapeutic after Bill’s depiction of such consumption as criticisable could have led to negative implications for the drinker. Rose manages this possibility by stating that she only engaged in such consumption on one past occasion, and constructing more positive and less reproachable motivations for the rest of her drinking. Other participants similarly managed constructions of possibly reproachable patterns of consumption by positioning these in the past, and therefore, as no longer occurring. Specifically, the next chapter argues that constructions of repeated intoxication and addiction were always placed in the past during the focus groups, thereby avoiding any negative implications for the current self.

The entirety of the exchange in Excerpt 6.3 demonstrates that the discourse of self-therapy is a valid, utilised means of talking about drinking and intoxication. The point is that participants, and not just the researcher or facilitator, orient to each
other’s talk as possibly constructing alcohol consumption as self-therapy. Congruent with this analysis, they too take the constructed combination of stressful circumstances with subsequent alcohol consumption as indicative of a therapeutic pattern of consumption. Whether this pattern of consumption is constructed as more or less acceptable is then negotiated turn by turn in the local conversational context.

6.3. Stress and Drinking: Explicitly Excusing DTI

Thus far in this chapter, Excerpt 6.1 has illustrated how the repertoire of self-therapy could be strategically used both by the facilitator and focus group participants to construct DTI. The analysis outlined how the repertoire was used by the facilitator to delicately enquire and facilitate talk about DTI. It also showed how the repertoire of self-therapy was used by one participant in particular to explicitly justify occasional episodes of DTI. The second illustration of the use of the self-therapy repertoire, Excerpt 6.3, demonstrated how the repertoire of self-therapy could also be variably employed to subtly excuse a considerable level of consumption, as well as to criticise it. The latter analysis also demonstrated that when the use of self-therapy as an excuse was explicitly called into question, the speaker was able to reformulate intent and the import of the mention of a stressful event to counter the implicit criticism in the questioner’s query. The next excerpt illustrates a slightly different deployment of the repertoire of self-therapy. In Excerpt 6.4, this repertoire is deployed by yet another focus group participant, Alex, in a much more explicit manner to overtly excuse occasional DTI.
Excerpt 6.4 (FG2 07:11 - 07:52)

1  Fac  uhm (0.2) okay. (0.5) so (1.3) do you find that
2      there’s (0.2) differences in (0.1) how much you
3      drink=like depending= in different
4      situations=like do you find that (0.1)
5      sometimes you might drink more or: sometimes
6      you might drink less?
7  Alex  >i tend to find that if i’m a bit more
8      stressed out about something i drink more.<
9  Fac  ↑mh↓m
10 Alex  i don’t know why ‘s just (0.3) habit. (1.1)
11        [yep.]        
12 Fac  [and-] like - do you get stressed th-you mean
13      from work?
14        (0.7)
15 Alex  just anything=like (.) relationships, work,
16        (0.5) uh:mm (0.3) i got two jobs so it’s
17      stressful working (0.2) seven days a week
18  Fac  mm.
19 Alex  and not getting much sleep. (0.7) and then so
20        (0.8) yeah sometimes you jus (0.4) give up and
21        just (0.5)>take a couple o’ drinks and drink a
22      bit too much, and then you wake up the next
23      morning and realise you shouldn’t ↑have<
24  Fac  mmm.
25 Alex  so
The talk represented above is taken from the seventh minute of the second focus group. It commences with an enquiry about differences in levels of consumption in accordance with the sequence of questions outlined in the Facilitator Guide (see Appendix E, Facilitator Guide, Line 26). The question constructed a possible relationship between different levels of consumption and different situations.

The exact question wording is particularly interesting because it constructs differences in levels of consumption as variations one might observe, rather than intentionally bring about. The question could arguably have been framed more directly as something along the lines of: “are there differences in how much you drink, like depending on different situations, do you sometimes drink more or less?” Instead, the indirect approach effectively distances drinkers from their level of consumption by downplaying agency. The minimisation of agency achieved by the question constructs levels of drinking as a delicate topic. The distance created by the depiction of a pattern of consumption as something one might observe rather than engage in, suggests that there might be something problematic about appropriating this pattern of consumption. Essentially, the minimisation of agency could be understood as an orientation to differences in levels of drinking as potentially problematic.

Consistent with this orientation, and similar to the discursive work achieved by the facilitator’s question in Excerpt 6.1 and Rose’s talk in Excerpt 6.3, the question offers participants a means of talking about levels of consumption, whilst attending to impression management. It does this by minimising the agency potentially associated with variations in levels of consumption. The same agency
downplaying strategy has been found to be used by radio show hosts, during programs about eating disorders, when posing questions to callers, introducing the show or new guests (Brooks, 2009). It is perhaps a way of dealing with potentially delicate topics. In fact, earlier in the focus group being discussed here, participants had constructed elevated levels of consumption as potentially problematic or at least sensitive through disavowals of such behaviour. Prior to the question beginning Excerpt 6.4, all participant talk about drinking depicted low levels of consumption. What is more, all participants in this focus group had gone to some lengths to portray their drinking as relatively moderate with explicit disavowals of higher levels of consumption, as the following excerpts suggest.

Excerpt 6.5 (FG2 04:14 – 04:23)

1 Sam just had wine. (0.3) little beer. at
2 first, then a bit of wine .hh and uh:m (0.5)
3 yea. (1.1) it wasn’t like=>you know< ovr the
4 top or anything,

Excerpt 6.6 (FG2 05:02 – 05:04)

1 Alex didn’t get- completely: (0.1)wasted or any’ing
2 like that=just had a couple of quiet beers

Excerpt 6.7 (FG2 05:51 – 05:57; 06:30 – 06:38)

1 John uh:m (0.7) ee was a pretty- quiet one (0.4)
2 fo::r (0.9) mm uh twentyfirst standards
3 ...
4 John and uh:m (0.2) BUT (0.4) yeah. (1.0) most i
5 would’ve (0.2) had was about (0.7) ten drinks.
These disavowals of higher levels of drinking explicitly counter ascriptions of such consumption. Thus, the sequentially later facilitator question in Excerpt 6.4 (lines 1-6) could be understood to orient to the face saving discursive work achieved by these disavowals, by minimising agency in the construction of higher levels of drinking. Given all the previous talk about relatively low levels of consumption, the facilitator question at the beginning of Excerpt 6.4, although framed in terms of drinking more or less, could be heard as a subtly managed invitation to talk about the potentially problematic topic of higher levels of consumption. Alex indeed responds to the question in this manner, by constructing occasions in which he drinks more.

Alex’s acceptance of the invitation to move to talk about drinking more leads him into unexplored conversational territory. Indeed his talk in Excerpt 6.4 is the first time that a participant in this focus group constructs his own consumption as heavier (or more) than an unspecified norm, even in a relative sense. Apart from previous disavowals, other participants’ views on consumption above what were treated as normal occasions were not yet clear, marking the new discursive territory introduced by the facilitator’s question as uncertain.

In this uncertain discursive context, Alex’s reply to the facilitator’s question is understandably short and unelaborated. Nevertheless, recourse to the repertoire of self-therapy allows Alex to present occasions of elevated consumption as understandable. Specifically, the construction of drinking more when more stressed positions elevated consumption as logical through a logical rhetorical formulation. Drinking more when more stressed is presented as a simple, understandable fact, without a need for further elaboration or explanation. The association of greater
stress with greater consumption is a logical rhetorical device which Benford and Gough (2006) also noted in chocolate “addicts” accounts of their behaviour.

Although Alex’s reply is produced as a complete turn with falling intonation, I, as facilitator, do not treat it in this way. Instead, I produce a “minimal continuer” on line 9 (Excerpt 6.4) which indicates that I am anticipating more information to come (Schegloff, 1982). This functions as an implicit request for additional information which Alex responds to by addressing the issue of motivation.

Effectively, the implicit request for more information treats Alex’s response as in need of an account or further detail, rather than, for example, as constructing something that is taken for granted, which there would be no need to question or seek further elaboration about. It appears that Alex may have interpreted the minimal continuer as problematising his constructed relationship between stress and drinking, because he then goes on to distance himself from it by claiming “i don’t know why” (Excerpt 6.4 line 10). This functions to anticipate and proscribe any potential questions regarding motivation. As Wooffit (2005) among others has noted, the use of “I don’t know” can be a display of distance from descriptions which are in some way sensitive, or which may be taken as the basis for sceptical or negative inferences about them.

§6.3.1. Managing the Problematisation of Heavy Drinking

The sensitive nature of Alex’s constructed link between greater stress and greater consumption might stem from, as previously noted, a construction of elevated consumption in an uncertain discursive context. Alternatively, however, in line with the criticism of DTI as self-therapy illustrated in Excerpt 6.3, the sensitive
nature of Alex’s talk could theoretically be due to the posited relationship between heavier drinking and stress. Nevertheless, it appears that what Alex treats as potentially sensitive is heavier drinking itself, and not its association with stress.

Alex displayed no difficulty in constructing the relationship between more stress and more drinking in the first place. This is evidenced by the swiftness with which he took the floor after my question about drinking more. Note the lack of a pause or hesitation in his turn (Excerpt 6.4 line 7). Moreover, this is the second time that Alex employs the repertoire of self-therapy in the focus group to construct his consumption. On the first occasion, the following exchange took place:

*Excerpt 6.8 (FG2 02:24 – 02:34)*

1  Fac  any other times (0.2) during the week or
2  anything lie’ that? (0.4) times other than
3  (0.3) what you’ve just said?=  
4  Alex  =uhm (0.6) depends >if i’m a little bit
5  stressful at wo:rk or some’ing like that, i
6  might’ve one when I get home.< (.) >other than
7  that< (0.2) not really.

Again, note the ease of construction. On both occasions the association between stress and drinking was constructed with ease, suggesting that it was not being treated as sensitive or controversial. It is only when the relationship between high(er) levels of drinking and stress is apparently called into account in Excerpt 6.4 that Alex distances himself from this construction. This suggests that what Alex is treating as sensitive is the construction of heavier consumption. Such an
interpretation is consistent with the observation that all the participants’ disavowals of heavier consumption prior to Alex’s talk in Excerpt 6.4, may have contributed to the impression that high levels of consumption were collectively treated as problematic, or at least sensitive, among participants in this focus group.

Thus, in a context where high levels of consumption are being treated as problematic, or at least as a sensitive topic, it is arguably Alex’s recourse to repertoire of self-therapy that allows him to construct occasionally elevated consumption with little or no threat to face. In particular, the logical rhetorical formulation that Alex uses to deploy the repertoire of self-therapy in Excerpt 6.4 works up an excuse for a pattern of consumption that might otherwise be heard as problematic. Alex’s talk excuses elevated consumption, by presenting it as regrettable (see in particular Excerpt 6.4 line 23) in line with its potential problematisation in that particular focus group, whilst denying full responsibility. Effectively, the construction of greater stress is positioned as a mitigating circumstance for a pattern of consumption that might be heard as controversial.

Alex’s excuse of DTI is achieved through a number of discursive moves, similar to Mary’s justification of DTI in Excerpt 6.1. Whilst the particular construction of self-therapy employed by Alex presents greater consumption in the face of greater stress as logical, the question that remains is why Alex drinks more when more stressed. In this context, the kind of motivated or intentional intoxication constructed by Mary in Excerpt 6.1 could be heard as problematic, given that thus far in the focus group, elevated consumption had been treated in this manner.

Recall that Mary had no compunction about constructing intoxication as deliberately sought after and purposefully therapeutic. This is probably largely due
to the fact that, within the context of the discussion, intoxication as therapeutic was collectively constructed as acceptable and arguably necessary. When behaviour is collectively worked up as acceptable, descriptions of wilful engagement carry little, if any, threats to face or self-presentation. On the other hand, where, as in Alex’s case, behaviour is open to potential criticism, a construction of wilful engagement might understandably suggest recklessness. Where such an impression is undesirable, as appears to be the case in Focus Group 2, speakers can manage their self-presentation, as Alex does, by downplaying personal responsibility.

Alex averts the possibility of being heard as intentionally engaging in a potentially problematic pattern of consumption, by denying intentional consumption of elevated levels of alcohol. He does this with the disavowal of conscious motivation: “i don’t know why”. This is a move which, as previously argued, creates some distance between the speaker and the constructed pattern of consumption.

Following the denial of conscious motivation, it is unsurprising that Alex goes on to construct his behaviour as a “habit”. After all, people are generally expected to have insight into personal motivations, such that any denial of knowledge could quickly and easily be called into question (Scott & Lyman, 1968). The construction of consumption as a habit dismisses any potential further questions by offering a possibly conclusive reason as to why motivation is apparently unknown. A habit, as used in this context, carries connotations of automaticity. Deployment of this category effectively accounts for the denial of motivation whilst somewhat downplaying conscious intent and therefore, agency.
In managing talk about the association between higher levels of consumption and stress in a potentially critical environment, Alex thus effectively works up two excuses for his consumption: an appeal to mitigating circumstances (i.e. stress) and a denial of volition (Potter & Wetherell, 1987; Scott & Lyman, 1968). The effect of these excuses is, in opposition to Mary’s justification, a not so subtle diminishing of agency or personal responsibility for heavier drinking. Abrahamson (2004) calls such rhetorical devices “neutralising accounts” which help listeners understand and excuse excessive consumption. In her study, “all tellers provide similar extenuating personal circumstances as to why they drank so much” (Abrahamson, 2004 p. 70).

§6.3.2. Excusing DTI: Minimising Agency and Constructing Regret

Alex’s denial of conscious motivation is delivered as final, as if it were the last he would say on the topic. This finality is achieved by the falling intonation of his turn, followed by a pause and then the tag comment “yep.” with which Alex concludes his turn. The vocal delivery is suggestive of a relinquishing of the floor for other participants to address the question. Nevertheless I, as facilitator, press on for more information, albeit with a new line of questioning. It is arguably the role as facilitator that allows me to sidestep what sounded like a request to move on to the next speaker, by drawing on my rights as questioner and leader of the discussion.

My question on line 12 (Excerpt 6.4) is linked with the immediately preceding talk by the conjunction “and”, positioning it as following on from what has been said. It directs attention to Alex’s previous mention of stress. It shifts the focus away from level of consumption and constructs the “research worthy” issue of Alex’s talk as the affecting stress, rather than level of consumption. The by-product of this move is a retrospective portrayal of Alex’s level of consumption as un-
newsworthy and inconsequential, at least for focus group research purposes. Moreover, given Alex’s previous portrayal of finality, it allows the elicitation of further information on the constructed pattern of drinking, by focussing on a relatively uncontentious aspect of his prior talk, that is, stress.

The shift in focus is successful in eliciting further talk on the link between drinking more and being more stressed. In his subsequent turns, Alex goes on to account for his greater consumption of alcohol when more greatly stressed, in more detail. Once again Alex explicitly draws on the repertoire of self-therapy by depicting considerable stress leading to considerable consumption. His employment of the repertoire is similar to Mary’s in its explicitness, but different from Rose’s first use in Excerpt 6.3 where the stressful event and subsequent consumption were never so directly linked.

In addition to the explicit construction of DTI as self-therapy, Alex also uses a number of other discursive devices similar to those employed by Mary in Excerpt 6.1 to position his DTI as excusable. Alex, like Mary, begins with a construction of stressful, personal circumstances. The stress that Alex constructs is a constant, as indicated by the construction of working seven days a week. However it is only “sometimes” that “you” give up, not every day. So, whilst the stress is constant, the precipitating factor leading to excess consumption is the occasional “giving up”. This echoes Alex’s previous depiction of the association of more stress (i.e. not just any small amount) with more drinking. In this respect, Alex’s deployment of the self-therapy repertoire is similar to Mary’s. Both versions construct intoxication as a response to considerable, rather than ordinary, everyday stress. Moreover, both speakers position intoxication as somewhat controlled by
depicting it as sporadic rather than periodic or at regular intervals. As previously argued, this discursive move contributes to a depiction of intoxication as controlled, in contrast to a possible, apparently undesirable, alternative depiction of intoxication as compulsive.

Following the construction of stressful personal circumstances, Alex, like Mary, then goes on to depict subsequent actions as generalised through the use of the pronoun you. His construction of the widespread reaction to stress is delivered in two hearably distinct parts. The first part constructs an initial, albeit occasional, reaction: “yeah sometimes you jus (0.4) give up and just (0.5)”. The expression to “give up” frames the reaction to stressful situations in a negative manner as desisting or not doing something. However, personal responsibility for such negatively framed behaviour is assuaged through the use of second person, whilst the repetitive use of “just” minimises the significance of the reported behaviour (Lee, 1987).

The second part of Alex’s turn is separated from the first by faster delivery which allows the four actions depicted to be heard almost as one. This part constructs a behavioural response to the first reaction which achieves significant rhetorical work. First of all, the speedy delivery allows the depicted actions to be heard as a pattern of predictable behaviour both in sequence and organisation. “>take a couple o’ drinks and drink a bit too much, and then you wake up the next morning and realise you shouldn’t ↑have<” is thus portrayed as a chain reaction through the speedy linking of three clauses with the conjunction “and”. Most importantly however, the use of second person portrays this escalating consumption followed by subsequent
regret as a widespread pattern, thus again assuaging personal responsibility. In contrast to Mary, Alex’s talk positions excess as a regrettable outcome, rather than a deliberately sought after goal.

Alex’s talk attributed giving up to a build up of stress which is depicted as impairing coping abilities, including the self restraint apparently required to drink in moderation. The combination of Alex’s negative framing of the catalytic event, with the positioning of intoxication as part of a chain reaction of escalating consumption, works to present intoxication as cathartic and, thus, therapeutic. Moreover, Alex’s positioning of intoxication as part of escalating consumption appears to suggest that intoxication is inevitable when drinking, and that moderation requires conscious monitoring and restraint. This suggestion allows for the excuse of intoxication on the grounds of extenuating circumstances (e.g. stress) incapacitating the drinker’s ability to control him or herself.

To “>take a couple o’ drinks” is another crucial part of Alex’s talk contributing to the excuse of DTI. Although it might seem semantically redundant, its production performs a specific action. Consistent with Alex’s previous talk, it denies the intention to get drunk, instead presenting intoxication as part of a process or sequence of events. Consider the sentence without this “detail”. “Sometimes you just give up and just (.) drink a bit too much…” This hypothetical implies that “giving up” automatically leads to excess consumption. Instead, Alex’s actual wording works against this possibility by constructing to “>take a couple o’ drinks” as resulting from “giving up”. Ultimately, the outcome, “drink a bit too much”, is the same. However, Alex’s mention of taking a
couple of drinks implies that he does not intentionally get drunk once he gives up. He rather takes a couple of drinks, which, in turn, leads to drinking too much.

In Alex’s talk, drinking or taking a couple of drinks is positioned as the chronologically first consumptive action to follow “giving up”. This link between giving up and drinking is suggestive of drinking’s positioning as a response to or a consequence of giving up. Arguably, any number of other actions could have been constructed in its place (e.g. taking time out or time off work, going mad, consuming any number of other drugs etc…). However, the specific construction of drinking is indicative of a special link with “giving up”, a link which can be understood as recourse to the repertoire of self-therapy. Intoxication is then positioned as the result of the protraction of drinking. The escalation of consumption can be heard as possibly due to an inability (or unwillingness) to stop drinking once started, which is in turn subtly ascribed to giving up.

The formulation of the repertoire of self-therapy, alongside other discursive moves such as the minimisation of agency, the construction of regret, the construction of a pattern of consumption as widespread, the disavowal of conscious motivation and the deployment of the “habit” category collectively allow Alex to respond to a facilitator’s invitation to talk about drinking more, in a context where such consumption could be heard as problematic. Through the combination of discursive moves discussed here, Alex thus downplays personal responsibility and constructs regret for DTI. These are rhetorical moves which function to dismiss the alternatives that: a) Alex deliberately and intentionally drinks more when more stressed, and b) that such as practice is acceptable. The production of utterances which dismiss these particular alternatives, as opposed to an infinite number of
possible others, allows Alex to avoid their implications, and the negative inferences they carry for self-presentation in that conversational context.

6.4. Concluding Comments

This chapter outlines how focus group speakers can construct DTI as self-therapy by constructing a stressful event as preceding intoxication. Generally, this repertoire was used early in the focus group and was usually the first mention of DTI. I have argued that both the facilitator and focus group participants used the self-therapy repertoire as a means of introducing the topic of DTI to the group whilst minimising agency, in a context where other focus group participants’ views on DTI were not yet known. Overall the repertoire of self-therapy proved an effective strategy for introducing talk about and excusing DTI, although its use was not failsafe. That is, the use of this repertoire did not prevent other participants from questioning a speaker’s account of an instance of DTI.

Essentially, the repertoire of self-therapy, much like the repertoire of recreation, can be considered a double edged sword. That is, whilst the construction of DTI as self-therapy was often used to excuse getting drunk and thus present one’s drinking in a favourable light, it could also be used to problematise DTI. The construction of DTI in response to a stressful event was problematised normally by positioning drinker’s motivation or the outcomes of consumption as negative reinforcement. In this case, the overall depiction of DTI was more negative.

The double edged nature of the repertoire of self-therapy is a testament to the flexibility with which this construction of DTI was used. It was precisely this flexibility in employment which allowed this repertoire to be used for a number of
different, even contrasting, purposes. In the data reproduced in this chapter, the repertoire of self-therapy was used to enquire about intoxication (by the facilitator in Excerpt 6.1), but also to position personal or others’ drinking as acceptable (by Jane and Mary Excerpt 6.1), and excusable (like Alex in Excerpt 6.4), as well as reprehensible (by Bill in Excerpt 6.3), and unpleasant (by Rose in Excerpt 6.3). Overall, constructions of DTI as self-therapy were functional in that they allowed speakers to perform a wide variety of actions in different rhetorical contexts.

The flexible deployment of the repertoire of self-therapy has been analysed in great detail in this chapter, with reference to the talk produced for the purposes of this study. However, that is not to suggest that the construction of intoxication as self-therapy is idiosyncratic to this group of speakers. Whilst I would hesitate to generalise the use of the self-therapy repertoire to other populations, the same manner of speaking has been previously reported by other researchers.

Harnett and colleagues (2000), for example, describe how their interviews with 40 young (16-24) white male participants revealed a number of different drinking styles, including one they called “therapeutic” for being motivated by the relief of a physical or social disorder. Moreover, the following quote from van Wersch and Walker’s (2009) interview research is particularly astounding in its similarity to Mary’s talk Excerpt 6.1: “when for example… I’ve had a really crap day, …I’ve just thought ‘sod it! I am gonna go out and drink absolutely shed loads tonight’” (p. 128). Additionally, Engineer et al. (2001) report that among their sample of binge drinkers, DTI appeared to be a way of “letting off steam” (pg. 13); similarly, Rolfe et al. (2009) discuss the construction of “drink” as “self-medication” (p. 329). Yet another example comes from Martinic and Measham (2008) who report
that “participants in all focus groups also mentioned heavy drinking as a means of self-medication during high-stress situations and under negative circumstances” (p.3). The focus groups being referred to were run in seven different countries (Brazil, China, Italy, Nigeria, Russia, South Africa and Scotland). Similarities across various studies as well as different countries suggest that, as Guise and Gill (2007) have noted in relation to their own research, “the discursive resources found in these data are not specific to this community of speakers” (p. 897). Lastly, it would appear that the repertoire of self-therapy may not be restricted to talk about drinking. Fry, Grogan, Gough and Conner (2008) for example report that smoking cigarettes can also be constructed as a way of “letting off steam” (p. 773).

Recent discursive research has also noted that the ascription of therapeutic properties to chocolate can be employed to legitimise consumption in a similar way to that described in this chapter. Benford and Gough (2006) write that “chocolate is constructed by participants as a comfort food which is eaten in response to very diverse negative feelings, ranging from hunger, boredom, upset, stress, agitation, depression and headaches” (p. 434). This quote is particularly interesting as it suggests that unlike DTI in this study, chocolate consumption was often positioned as negatively reinforcing. Unfortunately, whether this particular construction was treated as problematic or not for self-presentation purposes was not explored in Benford and Gough’s (2006) study. The possible difference between self-therapy constructions of DTI and chocolate consumption would make an interesting avenue for future research.

On the whole, previous research tends to focus on the construction of self-therapy as a means to present consumption in a positive light. In contrast, this
chapter has also examined how the construction of self-therapy could otherwise be used to portray a pattern of consumption as problematic. There is not much discussion of this possibility in previous literature, apart from passing mentions in Engineer et al.’s (2001) as well as Rabow and Duncan-Schill’s (1995) studies. Future discursive research would do well to consider contradictory constructions of the “discourse” or interpretative repertoires identified in each study, or what has been termed here the double edged nature of interpretative repertoires. Only then will it be possible to paint a more holistic picture of the uses of each repertoire and the counter possibilities available.

Despite some differences between this research and previous studies, the identification of similar manners of speaking about consumption in the aforementioned studies (Fry et al., 2008; Benford & Gough, 2006), suggests that the construction of DTI as self-therapy illustrated in this chapter is unlikely to be a substance-specific, idiosyncratic means to legitimise intoxication. Whilst the similarities between the findings of these studies could be attributed to the research context within which they were deployed, it seems unlikely that the identified construction of consumption as self-therapy would only be used in focus group or interview settings. The repertoire of self-therapy is more likely part of a much broader discourse that can be employed to legitimise, excuse or justify a wide range of practices. It will be the task of future research to determine if and how similar constructions of intoxication, as well as other drug or chocolate consumption for that matter, are used in more mundane interactions.

To some extent, the justification of intoxication as self-therapy appears to be part of a greater cultural trend to use various quick fixes for often minor ailments. It
is reminiscent of the widespread Western concept of “retail therapy” as well as a number of advertisements for pharmaceutical products. The latter usually present a specific ailment, like a headache or back pain for example, and its subsequent speedy resolution through the consumption of a particular medication. Indeed, the construction of intoxication as self-therapy is in all likelihood an extension of a medical discourse which constructs pharmaceutical products as therapeutic for a number of ailments.

The construction of intoxication as therapeutic is hardly surprising in an age of medicalisation characterised by “the idea that the trials of life represent noxious influences easily able to penetrate the average citizen, not just to hurt but to disable” (Summerfield, 2004 p. 234). The medicalisation of life, combined with a previously noted Western enthusiasm for “pill popping” (Wallace, 1972), optimally combine to position the discourse of self-therapy as a legitimate means to construct intoxication. Arguably, once pill popping for any minor ailment became a justifiable and unquestioned course of action, it was only a matter of time until alcohol, and indeed other drugs, could be acceptably justified or excused in the same manner.

Beyond the justification of DTI on the grounds of self-therapy, this chapter has additionally examined how DTI can also be criticised on the same grounds. Just as social commentators have long criticised the “medicalisation” of life (Summerfield, 2004) and the Western enthusiasm for “pill popping” (Wallace, 1972), so too focus group participants occasionally presented “therapeutic intoxication” as reproachable. Ultimately, competing constructions of the same phenomena will always be available. The challenge for future research will be to examine the deployment of contradicting constructions of the same phenomena,
including opposing deployments of the repertoire of self-therapy to construct a number of different behaviours, perhaps including shopping, chocolate consumption and the consumption of other drugs, in a number of different contexts.
7. Drinking to Intoxication as Addiction
The previous two chapters dealt with the constructions of drinking to intoxication (DTI) as recreation and self-therapy, as employed during the focus group discussions. The current chapter examines a third and final major interpretative repertoire that some focus group speakers used to construct their DTI. This repertoire was one that positioned repeated DTI as symptomatic of addiction or alcoholism. As noted in the previous two chapters, speakers generally worked to counter possible inferences of compulsion or addiction. However, as this chapter will demonstrate, other participants at times specifically engaged the repertoire of addiction to construct a personal, albeit past, pattern of alcohol consumption and thereby excuse it. Whilst other people’s consumption was also occasionally constructed as alcoholism, the focus of this chapter is squarely on constructions of personal consumption. This chapter will show how a particular construction of DTI that is normally countered can also be useful, in different settings, to achieve specific goals.

The construction of personal DTI as addiction was achieved through the explicit use of the terms “addiction”, “alcoholism” or their derivatives, to talk about a personal pattern of alcohol consumption. Within the focus groups this pattern of consumption was invariably depicted as involving repeated intoxication in the past and as no longer occurring. Another aspect of constructions of DTI as addiction was the depiction of one or more negative consequences of consumption. These often bore striking resemblance to DSM IV TR (American Psychiatric Association, 2000) criteria for alcohol dependence, such as tolerance (Excerpt 7.1), and a persistent desire to cut down or control alcohol use (Excerpt 7.3). Nevertheless, as it will become clear later in the chapter, the construction of negative alcohol-related
consequences alone, regardless of level of severity, was insufficient to depict a particular pattern of consumption as addiction. Thus, the critical aspect of the construction of addiction was the use of explicit terms such as alcoholism, addict and the like.

7.1. Addiction as Stigma

It is not controversial to suggest that the labels addiction and alcoholism often carry a social stigma. The stigma is such that the ascription of these labels to one’s behaviour might be, at least in some circumstances, undesirable. In relation to the focus groups conducted for the purpose of this research for example, it has been noted recurringly in the previous two chapters that participants appeared to be constructing their DTI against the possibility that their consumption might be out of control, as the labels addiction and alcoholism suggest (see in particular the analysis of Excerpt 5.2). It was noted that the construction of control over consumption was particularly effective in dismissing potential inferences of compulsion (see the analysis of Excerpt 6.1).

Previous discursive research on drinking with female undergraduates and female heavy drinkers similarly reports that participants constructed their current consumption against a possible alternative portrayal of the self as addicted (Guise & Gill, 2007; Rolfe et al. 2009). Essentially, at least in those research contexts, a speaker’s orientation to issues of control, and in particular the countering of potential accusations of addiction, protected an image of themselves as a moral drinker. That is not to say, however, that the focus group speakers in the current
study who employed the repertoire of addiction to construct their DTI necessarily fell into the position of “amoral”.

7.2. Addiction as an Excuse

Broadly discursive studies have noted that women can construct smoking (Gilles & Willig, 1997; Gillies, 1999) and even chocolate consumption (Benford & Gough, 2006), using what has been called a discourse of addiction. Similarly, a number of participants in this study also employed what is here referred to as the interpretative repertoire of addiction. To understand exactly how this was achieved, and what functions it served, it is perhaps best to delve straight into an excerpt illustrating the prototypical way in which this interpretative repertoire was employed.

§7.2.1. DTI as Symptomatic of Alcoholism

The following excerpt comes from near the beginning of the eighth focus group. After a round of introductions where the participants mainly describe their occupations, I invited participants to talk about drinking by asking them what situations they drink in. Jim is the first to reply (see Excerpt 7.4), after which Tom takes the floor.

Excerpt 7.1 (FG8 08:44 – 10:48)

1 Tom well=i use t’ be in the a:rm, (0.8) as much
2 as they’re pushing towards an army (0.4)
3 culture of non drinking
4 Fac >fmmm mh heh<
5 Tom that is (0.5) probably thee. (1.1)>single most
difficult transit< that the army will face,
in it's history.=because(0.6)°the relationship
between drinking an (0.2) armsmen spans
throughout the ages.° that being said (0.3)
.hh uh: when i was- at officer training(0.8)
tch i was (0.5) >part of the ol’ guards so to
speak<=of .hh people that would go out an-
when they hit the t'own, .hh er- would
practically level it(0.2)and(1.0)at that
stage, (0.6) tryn’ to get the prestige or:
(0.3)tryn’to(1.6)°uhm°(0.4)boast- bolster(.)my
popularity >so to speak< .hh because it really
is a (0.3) fame game (0.6) when it comes to
being an officer=when you have tuh- (0.6) when
you’re- in training with- peers (0.4)and hh to
be able to lead some of your equal, (0.3).hh
they mus like you. it’s as simple as that.
(0.5) an i thought that that might be ay- .hh
ay quick way (0.2) considering i was from the
territory i’d- already been a ( )=

(Ian) ((cough))

Tom =seasoned drinker in the first place(1.1) when
you (.) >get down there and you’re doing
physical training< (.).of- of anyone in the- f-
forces especially- during ye- (.). ‘initial
training, ((swallows))when you come out you’re
(0.5) you’re fighting fit and your body can just ↓take (0.8) a lot. .hh and uhm i (.) >suppose i fell in to the culture of drinking down ↓there< (0.8) uh:m (0.4) a:nd (0.3) >it was some’hing that< (.) tripped me up later on when (. ) thee (0.4) >so to speak thee< (0.2) guard changed and i found myself .hhh >part of this old school they were getting rid of.< (0.6) uhm (. ) didn’t help (0.2)me at all- when i was then having troubles later on (0.5) and eventually i p- i probably (0.7)pin some of my [failure if not]=
(Ian)[ ( ( cough ) ) ] Tom =the majority of it on- .hh on alcoho↑lism.=because (. ) at- s- at- one stage late (0.3) in the game- i was- pretty much- prescribed that. .hh talked to a psych=an he said well=that amount of drinking is(0.8) it’s (para)amount to be;ing (0.2) ay uhm (. ) more than just a social drinker and (0.7)°into- the realm of- being an alcoholic.°

In this relatively long turn, Tom constructs an explanatory narrative that positions his past drinking behaviour as symptomatic of alcoholism. This positioning is achieved quite explicitly with the use of the terms “alcoholism.” and
“alcoholic” (Excerpt 7.1 lines 51 and 57 respectively), in combination with the construction of past DTI as occurring repeatedly over a period of time (i.e. whilst he was in the army), as well as the construction of negative alcohol-related consequences labelled “troubles” (Excerpt 7.1 line 42) and “failure” (Excerpt 7.1 line 48). Additionally, Tom’s talk depicts an element of increased alcohol tolerance congruent with a DSM IV TR (American Psychiatric Association, 2000) criterion for alcohol dependence, with references to drinking experience (“seasoned drinker” Excerpt 7.1 line 27) and increased bodily ability to tolerate “a lot” (Excerpt 7.1 line 33).

As the length of the excerpt suggests, the self ascription of alcoholism in a focus group setting is not a straightforward task. Specifically, the stigma normally attached to the label of alcoholic in current Western culture could be predicted to give rise to problems for self-presentation. As May (2001) observes, “to be constituted as an ‘addict’ both confers upon the patient a problematic identity and raises questions about personal motivation and personal efficacy” (p. 395). Congruently, this excerpt shows that Tom performs a great deal of rhetorical work to counter a “problematic identity” and address questions raised by the self ascription of the addict or alcoholic category. As I will demonstrate, his talk is structured in such a way as to allow the presentation of the self as moral, and personal identity as nonproblematic. During the whole “monologue”, alcohol consumption is only mentioned six times (see Excerpt 7.1 lines 3, 8, 27, 35, 54 and 56), quite briefly. The great bulk of Tom’s talk is directed towards the creation of a context, as well as mitigating factors affecting past consumption. These rhetorical moves are crucial to counter the stigma otherwise possibly associated with self ascriptions of alcoholism.
Tom begins his narrative with a statement about having been in the army. This particular starting point is crucial in creating a context for Tom’s alcohol consumption. Note that this is not necessarily the “natural” starting point for a story about alcohol consumption, since as Tom says on lines 25 and 27 (Excerpt 7.1) “i’d- already been a ( )- seasoned drinker in the first place”. Tom’s reference to the army is crucially important here as it works up a context which, as Tom states explicitly on lines 7-9 of Excerpt 7.1, has traditionally and historically been linked with alcohol consumption. This association is not just something that Tom constructs explicitly. There is evidence of it in my light laughter on line 4 (Excerpt 7.1). By constructing the possibility of “an army (0.4) culture of non drinking” (Excerpt 7.1 lines 2-3) as a laughable concept with my laughter, I display an orientation to this concept as ironic. Thus, even before he mentions alcohol consumption, Tom constructs a conducive context for its occurrence in a similar manner to that employed by John with his construction of his own consumption as occurring “at college” in Excerpt 5.1, and Kim’s reference to her sister’s birthday in Excerpt 5.3. This context is not just conducive to alcohol consumption, but is explicitly presented as linked to alcohol consumption “throughout the ↑ages” (Excerpt 7.1 line 9).

After an ample preamble, Tom begins to construct a particular pattern of alcohol consumption with the metaphor “tch i was (0.5) >part of the ol’ guards so to speak<= of .hh people that would go out an- when they hit the t↑own, .hh er- would practically level it (0.2)” (Excerpt 7.1 lines 10-14). In light of the discussion of the repertoire of recreation in Chapter 5, this metaphor can be heard as constructing
DTI, or at least considerable alcohol consumption, as recreation simply by the pairing of alcohol consumption with a recreational activity like going out. DTI is implied by the reference to going out with an extreme result (i.e. levelling the town), which, in the context of Tom’s talk about drinking and armsmen, can be heard as a metaphor denoting alcohol consumption where destruction or annihilation stand for excessive consumption or inebriation. This construction of DTI as recreation accounts for Tom’s engagement in this behaviour at the time\textsuperscript{19} by portraying it as part of trivial, leisure time activity. DTI is constructed as a pattern, or repeated over time, with “scripting devices” (Edwards, 1995), such as the use of the modals “would” (Excerpt 7.1 lines 12 and 13) and “when” (Excerpt 7.1 line 12) for iteration and an if/then formulation (when they hit the town, they would practically level it) of events.

In addition to the construction of repeated intoxication as recreation (at the time), Tom further accounts for his past consumption by positioning it as group behaviour: “tch i was (0.5) >part of the ol’ guards so to speak<” (Excerpt 7.1 lines 10-11). Specifically, the expression “the ol’ guards” simultaneously positions repeated intoxication as group behaviour, and constructs it as entrenched with its hard core loyalist connotations. The Compact Oxford English Dictionary defines an “old guard” as: “the original or long-standing members of a group, regarded as being unwilling to accept change” (old guard, n.d.).

\textsuperscript{19} It is crucial to specify that this pattern of DTI is constructed as recreation at the time, since the subsequent employment of the label of “alcoholic” retrospectively re-frames this pattern of consumption as one leading to alcoholism.
It appears to have been used in this way by Tom to construct going out and levelling the town as entrenched, normative group behaviour. This consensus effect reduces individual responsibility helping to account for Tom’s engagement in such behaviour (Edwards & Potter, 1992). It also subtly begins to account for subsequently reported difficulties with change (see in Excerpt 7.1 on line 41 the reference to not being helped), by positioning repeated DTI as a firmly entrenched pattern of consumption.

Overall, Tom downplays personal responsibility for the elevated consumption synonymous with “hitting” and “levelling” the town by constructing it as historical and normative within his social group. Excuses such as these help to account for Tom’s past behaviour and thus portray it as understandable, if not excusable in those circumstances. Further, the embedding of past drinking habits within a storied construction of multiple mitigating factors is designed to elicit empathy and understanding rather than condemnation. Interestingly, this storied construction may also simultaneously function to suggest considerable insight, honesty and self-awareness, to counter the widespread association between alcoholics and denial. Similar discursive moves have been identified by Benford and Gough (2006) who conclude that “by showing awareness of their ‘problem’… participants positioned themselves as moral characters who do not simply yield to unhealthy or immoral practices” (p. 435).

In addition to the construction of his consumption as normative group behaviour, Tom goes further to construct a more personal, conscious motivation for his drinking pattern. The mention of the necessary (“they mus like you. it’s as simple as that.”) search for prestige and popularity constitutes a
demonstration that the repeated, elevated consumption was a conscious, functional attempt to negotiate complex work related issues, rather than just a case of mindless participation in group behaviour. Out of context, references to gaining acceptance (for example see Excerpt 7.1 lines 15-17) might be taken as evidence of compliance with peer pressure. However Tom’s construction of a thought on line 23-24 (Excerpt 7.1): “an i thought that that might be ay- .hh ay quick way”, specifically counters this possibility by positioning his consumption as a considered and strategic, career oriented decision. In this way, Tom was able to present himself as a reasonable, thoughtful character who did not simply yield to group pressure but instead harnessed it to achieve career oriented goals. Moreover, this report of a thought, by positioning Tom’s consumption as considered, works up a certain degree of control over consumption. This is an interesting observation since, as I discuss later, the subsequent self ascription of alcoholism is suggestive of loss of control.

To summarise my analysis up to now, in the first part of his turn in Excerpt 7.1, up to line 33, Tom essentially constructed a past pattern of DTI, and accounted for it in various ways such as by placing it in an historical context, positioning it as part of entrenched group behaviour, presenting it as recreation, and constructing a conscious, strategic motivation for it. In the second part of his turn, Tom goes on to position this consumption as eventually leading to a diagnosis of alcoholism.

After constructing, and at least partially excusing, a pattern of alcohol consumption involving repeated, excessive consumption, Tom goes on to account for, or explain, the high level of alcohol consumption that such a pattern of drinking can be assumed to involve. This is achieved with references to “the territory”
and physical training increasing the body’s ability to tolerate “a lot”. As indicated in Chapter 1, the Territory, or the Northern Territory of Australia, is widely known across the country as the nation’s binge drinking “capital”- with good reason. In the same chapter I also noted how “Territorians” have been portrayed by the local newspaper as “the world’s undisputed booze swilling kings” (Calacouras, 2009 p.2). In light of these observations, it is clear that Tom’s reference locates his extensive early drinking experience within a normative cultural milieu, thus contributing to its normalisation.

Another factor which contributes to the explanation of Tom’s high level of alcohol consumption is the construction of the medical concept of tolerance. Tom’s combined depiction of experience in drinking (“seasoned drinker”) and increased physical tolerance (“when you come out ... your body can just take (0.8) a lot.”) are implicitly suggestive of increased tolerance to alcohol, one of the DSM IV TR (American Psychiatric Association, 2000) criteria for alcohol dependence. This particular construction of tolerance subtly suggests the lack of any, at least immediate, negative physical repercussions, thus helping to account for the frequency of heavy consumption. When unspecified “troubles” (Excerpt 7.1 line 42) are subsequently mentioned, these are positioned as occurring “later on” (Excerpt 7.1 line 37). Together, these discursive moves help to account for the implied excess of consumption and its duration over a period of time.

Interestingly, Tom attributes his fall “in to the culture of drinking” (Excerpt 7.1 line 35) to his army experience “down there”, rather than his previous drinking experience in the Northern Territory. This attribution is functional in that it contributes to an excuse of behaviour on the basis of numerous,
complex work related, mitigating factors, rather than more simply, membership in a heavy drinking society, that is, the Territory. The word “fell” (Excerpt 7.1 line 35) is particularly useful here because, combined with all the discursive work done up until then to excuse a gradual increase in consumption, it suggests that Tom’s membership into a culture of drinking was accidental, and therefore something that he was not personally responsible for.

The subsequently constructed “troubles” (Excerpt 7.1 line 24) are attributed to this fall, with a careful management of agency that works to minimise responsibility. Expressions such as “fell” (Excerpt 7.1 line 35), “tripped me up” (Excerpt 7.1 line 37), “found myself” (Excerpt 7.1 line 42) and “having troubles” (Excerpt 7.1 line 42) all minimise responsibility for the subsequently experienced problems, by constructing negative consequences as things that happened to, rather than were brought about by, the speaker. This discursive move is a resort to what Attribution Theory (Kelley & Michela, 1980) calls an “external locus of control”, or the attribution of behaviour to external and unstable factors (as opposed to internal and stable factors). Since assessments of responsibility are based on intentions and reasons for acting, the construction of external events rather than internal factors can effectively reduce the level of blameworthiness assigned to an actor (Tedeschi & Reiss, 1981). An external locus of control is usually invoked when speakers explain “wrong doings” or seek to avoid blame for “‘bad’ behaviour” (Seneviratne & Saunders, 2000 p. 440). Tom’s minimisation of responsibility, along with the previously discussed discursive moves that also minimise responsibility in order to deflect potential criticism, together contribute to an extremely passive
account of consumption. By passive, I mean that the self is presented as acted upon, rather than acting.

Extremely passive accounts of behaviour can be interactionally disadvantageous for self-presentation purposes, as they can be heard as over reliant on excuses. Essentially what Tom faces here is a dilemma of stake (Potter, 1996b). Edwards and Potter (1992) argue that people are often caught in a dilemma of stake or interest where anything they say or do may be potentially discounted as a product of their interest in its outcome. In this case, Tom’s passive account could have been dismissed as self serving rather than objective. The introduction of the category “alcoholism” resolves this dilemma by providing a meta-account of behaviour which in turn warrants the extremely passive portrayal of events. Interestingly Tom’s explicit attribution of “failure” (Excerpt 7.1 line 48) to “alcoholism” (Excerpt 7.1 51) mirrors one of the DMS IV TR (2000) criteria for alcohol abuse, that is: “recurrent substance use resulting in a failure to fulfil major role obligations at work”.

Beyond this similarity with professional constructions, in the context of Tom’s talk, his attribution of “failure” to alcoholism effectively accounts for and legitimises his construction of the self thus far as a patient, rather than an agent. A patient is someone depicted at the mercy of external forces or internal compulsions (Wood & Kroger, 2000). “If the person is constructed as a patient, responsibility can be deflected” (Wood & Kroger, 2000 p. 101). Congruently, the construction of alcoholism deflects responsibility by cementing Tom’s positions as a patient. Addiction and alcoholism are after all commonly understood as involving an inability to control consumption (see for example Abrahamson, 2003; Luke, Ribisl,
Walton & Davidson, 2002) or an undermining of “individual volition” (May, 2001 p. 385). As Benford and Gough (2006) write, “within the discourse of chocolate addiction, the self is construed as a victim of forces beyond individual control- and responsibility” (p.436). The same could be said for alcoholism. May (2001) observes that “addiction is founded upon the subordination of personal agency (and thus the possibility of individual control) to some hypothesised pathological mechanism” (p. 385). Thus, having so far constructed the self as victim and patient, the mobilisation of the categories of “alcoholism” (Excerpt 7.1 line 51) and “alcoholic” (Excerpt 7.1 line 57) works to substantiate and justify such passive constructions by positioning personal agency as subordinate to a pathological condition.

Tom’s constructions of addiction, and the self as a patient, are at odds with his earlier portrayal of going out and levelling the town as a considered and strategic career-oriented move. A similar contradiction has been previously noted in an interview study examining social (i.e. not in alcohol treatment) and treatment (i.e. in alcohol treatment) drinkers’ impaired control over drinking (Marsh & Saunders, 2000). Marsh and Saunders (2000) concluded that

almost everybody who attempted to justify their excessive drinking on the grounds that they could not control it, simultaneously admitted that they had good reasons for drinking and either chose to drink to excess, or did not choose to do otherwise (p. 261).

Whilst it is impossible to comment on Marsh and Saunders (2000) data without listening to it, in relation to the current study Tom’s contradiction may be explained as a result of the negotiation of the delicate business of positioning the self as addicted whilst countering a problematic identity.
Recall that, as previously argued, Tom’s positioning of going out and levelling the town as a career oriented strategy allows him to portray an understandable, personal motivation for his consumption, and thus present the self as a reasonable, thoughtful character that did not simply yield to group pressure. Thus, at the exact conversational point it was deployed, this rhetorical move helped to counter the ascription of a problematic identity. Similarly, also as previously noted, the category “alcoholism” served to solve a dilemma of stake at the point in which it was employed. The contradiction thus arguably stems from the performance of these different but related tasks at different points in Tom’s talk.

Whilst Tom’s attribution of failure to alcoholism counters the possibility that his passive construction of events may constitute a mere excuse for recurrent heavy consumption, he goes further to counter the possibility that he may be employing the concept of alcoholism as an excuse, by depicting this ascription as having been “prescribed” by a “psych” (Excerpt 7.1 line 53). The attribution of this “diagnosis” to a psychologist, a relevantly knowledgeable source, imbues the construction of alcoholism with authority to cement it as credible, and importantly, independently produced. Moreover, the use of reported speech contributes to the construction of that account as factual (Potter, 1996b).

Tom’s self ascription of past alcoholism at the beginning of the focus groups helped to frame his subsequent talk, such that it could be heard in light of this first construction. There are many examples of subsequent references to addiction following the self ascription of alcoholism detailed in Excerpt 7.1. In the interests of brevity I will examine only one, reproduced in the excerpt below. Immediately prior
to the beginning of the following excerpt, Jake was talking about having a glass of wine or a beer on a Friday night, and realising that it could become dangerous.

Excerpt 7.2 (FG8 01:17:05 – 01:17:30)

1 Tom i worry about (0.2) when i (.) do
2 th↑at=because- °the folks go out, (0.4) and I
3 buy=like- when they→ leave the house for a
4 couple o’ days=i’m looking after it<° .hh i
5 buy(0.6)er→a slab<20 and i’ll sit there an (.)
6 every time[(i wanna a drink)i’ll go grab one.]
7 Jake [Yeah. .hh eh eh eh eh .hhh]
8 Jake hh hh .hh [heh] heh heh.]
9 Fac [mm]
10 Tom [i do]n’t get] drunk,
11 Jake ghuh hh hh
12 Tom but I a m drinking technically
13 Jake [yeah]
14 Tom [all day] on a week↑end
15 Fac m↓m
16 Tom so i w↓orry about that=will that lead me back
17 into ->a different kind of alcoholism which i<
18 i- i think well my (0.2) .hh mother is- mrr
19 sort of- going down that ↑path

20 A slab is an Australian slang term denoting a carton of 24 beers.
In this excerpt Tom depicts having a drink every time he wants one as potentially leading him back to “a different kind of alcoholism” (line 17). In light of his previous construction of alcoholism (in Excerpt 7.1), Tom’s talk can be heard as “a different kind of alcoholism” to the one described as involving repeated instances of DTI whilst in the army. The construction of a different kind of alcoholism effectively reiterates the construction of DTI as one kind of alcoholism. This is achieved by positioning a pattern of drinking and not getting drunk (Excerpt 7.2 line 7) as a different kind. The fact that Tom specifies that he doesn’t “get drunk” (Excerpt 7.2 line 10) in this situation works this up as a point of difference between two kinds of alcoholism.

Following this distinction, Tom goes on to depict a different, problematic aspect central to this new, different kind of alcoholism. The problematic aspect of this different kind of alcoholism is the day-long consumption of alcohol, albeit on a weekend. In this way, accumulating consumption over a longer period of time is contrasted against elevated consumption leading to intoxication in a shorter time frame (i.e. when “going out”). Interestingly such a distinction is similar to the one made in the National Health and Medical Research Council’s (2009) “Australian Guidelines to Reduce Health Risks from Drinking Alcohol”. This publication distinguishes between the risk of alcohol-related harm over a lifetime and the risk from a single occasion of drinking. Despite the similarities, the functions performed by this distinction are likely very different in these different contexts. In Tom’s case, the distinction between accumulating consumption over a longer period of time, and DTI over a shorter time, ratifies the construction of repeated DTI as a diagnostic criterion of at least one type of alcoholism, the one constructed in Excerpt 7.1.
To conclude the analysis conducted thus far, it is fair to note that Tom’s self ascription of alcoholism came after a long narrative excusing a pattern of consumption that could be glossed as recurrent intoxication. This narrative was produced in answer to the facilitator’s question about how participants drink. After significant rhetorical work towards excusing and minimising personal responsibility for a past pattern of DTI, Tom’s employment of the concept of alcoholism functioned to validate his considerably passive construction of past behaviour. That is, the addiction repertoire facilitated Tom’s contribution to a facilitator instigated discussion, by allowing him to present a personal pattern of consumption in a manner that preserved his status as a moral person. In this way Tom oriented to the purpose of the focus group discussion as providing information about personal patterns of consumption, whilst attending to issues of positive self-presentation.

§7.2.2. *DTI as Symptomatic of Addiction*

The next excerpt shows the way in which another participant, Lily, constructed her past DTI as problematic by employing concepts of control and addiction. It is presented to show that there are different ways in which speakers can use the interpretative repertoire of addiction. Moreover, it illustrates an alternative to the repertoire of addiction for the construction of repeated DTI.

Prior to the beginning of the following excerpt, Ruby and Hope had just finished answering one of my questions regarding possible concerns about personal alcohol consumption. Both talked about the possibility of alcohol consumption becoming a habit, which was positioned as a potential worry. I invited Lily to contribute to the discussion by simply calling her name, to which she responded with
a distracted “sorry?”, which was immediately followed by gales of laughter from everyone. The excerpt begins following the end of the laughter.

Excerpt 7.3 (FG7 01:01:36 – 01:01:59; 01:02:22 - 01:03:49)

1  Fac the question was. (0.1) >have you ever felt
2    lie’ you should do something about your
3  drinking=or gotten worried that your drinking
4  might be gettin out o’ ha:nd?<=
5  Lily =yeah. (0.3) definitely. (0.3) uhm (1.6) uh::
6    tch (.) probably: (0.8) >°there was a point
7  last ye:ar when°< uh:m (. ) i wenout. (0.2) and
8  (1.0).hh h::ad a bad experience, this is- this
9  is in melbourne and uhm (0.6) and
10  ...21
11  Fac alright.
12  ( ) ((clears throat))
13  Lily uh::m ((sliding door closes))and yeah and then
14  the next uh: (0.8) the next day i had like
15  (0.3) ¤c(h)onvivenz22 or s(h)ome(h)ing hhhand©
16  (0.2) and i jus thought (. ) i really thought
17  you know why am i (0.5) uhm (0.3) still doing
18  this=you know it’s it’s not- it’s it’s out of
19  my control now. (0.5) uhm (0.2)i tchr- because

21 The omitted talk regards a person walking past deemed irrelevant for this analysis.

22 “Convivenz” is a term that describes a religious retreat.
i whanned to stop and (0.8) and uhm (1.1) and 
yeah then i- i i thought you know it’s it’s 
time to stop. going out and (1.8) hh and 
stuff=because if i go out=>i noo that if i 
went out,< i would- i’d drink=so.(0.5) °that’s 
when i- made a conscious decision to stop.°=

Hope =but you know i’d rather get the habit out now 
while you’re- like really young=because when 
you get older ’n like (.) twenytfive it’s 
note- you know you jst don’t go: 
nightclubbing an [things like that]
Lily [no no no that’s ] not true, 
Hope (oh) but for me it’s like i don’t- i don’t 
woanna be: (.) twennyfive and st(h)ill 
[( )]  
Fac [ TWENNY ] FIVE isn’t that old 
[(hope) heh heh heh, eh: eh:: heh:::]  
Hope ☺[or you know thirty or s(h)oming like that]☺ 
but still being like you know <acting like a:n 
eighteen year old> type o’ thing=[an i] 
Fac [ mm ] 
Hope >don’t wanna be like that=so i’d=< 
Fac yeah 
Hope i’d rather get sick of- ☺getting drunk n(h)☺:w 

hhh☺
Fac  oh yeah.
Hope  then later?
(Fac)  >get it out o' your system.<
Hope  ye:h.
(1.0)
Fac  wha’-=what were you saying Lily=it’s not like
that.
(0.7)
Lily  yeah it’s not- >that it’s not like you
get< sick of (1.2) <sick of it>=it’s- it’s
more- it’s more like it~(1.6) it’s it’s always
a crap time >but you’re addicted to it,< an
th-the longer that you drink for the harder it
is to ↓stop.
Fac  mm.
Hope  mm
Lily  and it’s like you can’t stop.
Hope  yeah

In this excerpt Lily employs the concept of addiction to frame a past pattern of alcohol consumption. I will examine in detail how this is worked up, the context in which this repertoire is deployed, the actions being achieved as the conversation unfolds, and what the repertoire of addiction allows Lily to achieve in this specific instance.
At the beginning of this excerpt, I asked Lily a question regarding concern about personal consumption. My construction of “your drinking” (Excerpt 7.3 lines 2-3) as something “you ever felt lie’ you should do something about” (Excerpt 7.3 lines 1-2) is essentially a nominalisation of the verb “to drink”, which helps to obscure agency. It conveniently avoids the attribution of responsibility for a pattern of consumption that might be considered worrying and thus could be understood as a means to display neutrality (Potter, 1996b).

My neutral question formulation is successful in eliciting an affirmative answer from Lily, who constructs an event as precipitating her concern. The catalytic event is simply and briefly portrayed as a “bad experience” (Excerpt 7.3 line 8) or something that happened to her. This formulation neatly avoids any attribution of responsibility, mirroring the facilitator’s display of neutrality and obfuscation of agency. What Lily spends a greater deal of time on, is the construction of her cognitive appraisal of the situation (Excerpt 7.3 lines 9-14). Lily uses “active voicing” (Wooffitt, 1992) in the above excerpt or the communication of a “private thought” (Barnes & Moss, 2007) on lines 9-11 to build a factual account of her at the time cognitive appraisal of her experience (see the reference to “the next day” line 14).

Lily’s account of her cognitive appraisal at the time of her experience echoes Tom’s reference to his drinking motivation “at that stage,” (Excerpt 7.1, line 14). As I have shown in Tom’s case, reports of at-the-time cognitive phenomena such as motivations or thoughts, help to present the speaker as a rational and moral drinker. With the production of her “private thought”, Lily does a demonstration of
(at the time) questioning her continued engagement in a particular though unspecified behaviour: “why am i (0.5) uhm (0.3) still doing this” (Excerpt 7.3 lines 16-18). The mere act of questioning positions the relevant behaviour as one that can be called into account and is therefore blameworthy. Moreover, the use of the emphasised adverb “still” denotes the behaviour in question as having occurred for some time. Interestingly, the use of the present participle “doing” now self ascribes at least some personal responsibility for what had just previously been described as a “bad experience” (Excerpt 7.3 line 8). Nevertheless this responsibility is somewhat mitigated by its delivery within the question “why”. This display of confusion regarding motivation positions Lily’s own behaviour as personally incomprehensible, and thus, less accountable. The same effect of the construction of a lack of awareness was noted by Griffin and her colleagues (2009) in regards to their own focus groups with young English drinkers.

The construction of personal motivation as incomprehensible allows Lily to attend to important self-presentation concerns. After all, taking full responsibility for drinking behaviour that might be getting out of hand could lead to questions regarding motivation. Why consciously and purposefully engage in behaviour that is spiralling out of control? By depicting a private thought, Lily is able to demonstrate that whilst she might have engaged in alcohol consumption that could have been described as worrying or as getting out of hand, she did not really condone it.

Lily’s private thought, “and i jus thought (. ) i really thought you know why am i (0.5) uhm (0.3) still doing this=you know” (Excerpt 7.3 lines 16-18), is formulated as a self-directed question, as if one part of her were asking another part about its motivation. This
“splitting the self” (Hodges, 2007) has been identified as a discursive resource that allows speakers to “manage moral accountability by constructing a decent, appropriate, ‘right-thinking’ person” (p.91). In this instance, splitting the self allows Lily to demonstrate a critical, “right-thinking” appraisal of her behaviour by doing a display of disapproving with her continued pattern of consumption.

By depicting herself as behaving in a way she did not condone, Lily is able to manage issues of moral accountability and portray herself as a decent, “right thinking” person. However, this portrayal of events can be called into question on the basis of a belief/behaviour incongruence. That is, why would Lily engage in behaviour that she did not condone? The use of the concept of control dismisses this exact possibility. With the depiction of her drinking as “it’s out of my control now.” (Excerpt 7.3 lines 18-19), Lily draws on the facilitator introduced concept of control as something that may escape us. The use of the word “now.” is particularly effective in achieving this by portraying control as something that Lily may have once had, but no longer currently has. This subtly references the facilitator’s formulation of consumption as “gettin out o’ ha:nd?” (Excerpt 7.3 line 4) , by depicting alcohol consumption as no longer under control. By claiming a lack of control Lily is able to dismiss inferences of personal accountability for a behaviour she recognised as criticisable. After all, “free choice is presumed to be a necessary condition for responsibility, so if a person can convincingly avow that he/she did not act freely then the burden of responsibility cannot hold” (Buttny, 1993, p. 2). In this way Lily is able to self ascribe engagement in a “worrying” pattern of consumption whilst maintaining moral integrity.
To substantiate her claim of a lack of control, Lily presents a presumably unfulfilled desire as supportive evidence “it’s out of my control now. (0.5) uhm (0.2) i tchr- because i whannned to stop” (Excerpt 7.3 lines 18-20). By dividing action from cognition Lily cements her presentation as a decent, moral person, who, against her desire, could not help but keep engaging in a behaviour she knew to be out of control and did not want to continue. This functional construction of an unfulfilled desire to stop echoes the DSM IV TR (American Psychiatric Association, 2000) criterion for alcohol dependence regarding a persistent desire to cut down or control alcohol use.

At this point, it is fair to say that Lily’s talk is suggestive of addiction. So far she has constructed a prolonged pattern of consumption that has become out of her control; a pattern of consumption that she continued to engage in despite a “bad experience” and a presumably unfulfilled desire to stop. The construction of lack of control in particular is strongly reminiscent of compulsion and addiction.

Lily’s account continues with the construction of a subsequent “private thought”:

> then i- i i thought you know it’s it’s time to stop. going out and (1.8) hh and stuff=because if i go out=>i noo that if i went out,< i would= i’d drink=so. (0.5) °that’s when i- made a conscious decision to stop\(^\text{23}\)” (Excerpt 7.3 line 21-25).

In this manner Lily constructs personal efficacy in relation to one behaviour, that is, going out, whilst not contradicting her claim of a loss of control over

\(^{23}\text{Presumably to stop “going out”, as she had just been talking about.}\)
consumption. The emphasis on agency for positive change constructs a considerable amount of personal efficacy. It portrays Lily in a positive manner, as a strong willed and determined individual.

Following the statement “it’s out of my control now.”, a claim to have simply stopped drinking might’ve been heard as contradictory. Previous researchers have argued that a discourse of addiction leaves little room for the construction of agency for change (see Levy, 2003; Gillies, 1999 for example). This argument is consistent with the way Tom constructed requiring help in Excerpt 7.1 (lines 41-42). However, it is not consistent with the talk presented above. Whilst Lily’s talk also constructed some difficulties with change (see in particular the implications of: “because i whanned to stop”) she was eventually able to construct personal efficacy by claiming to have made a decision to stop going out instead of drinking.

The construction of stopping going out, in order to stop drinking, works up a depiction of alcohol consumption as compulsive. This depiction is more explicitly worked up with the claim “i noo that if went out,< i would- i’d drink=so.”. This construction is strongly reminiscent of Mark’s talk in Excerpt 5.2, where he agrees with my proposition that going out “usually” ends in a “big night”. As previously argued, this link between going out and getting drunk is strongly suggestive of a compulsion or addiction. However, where in Mark’s case this possibility was dismissed by the construction of control over consumption, in Lily’s case the possibility of compulsion is in fact exploited as evidence of a lack of control over consumption. Thus, in Lily’s case, the undissmissed suggestion of compulsion can be heard as suggestive of addiction.
In fact, subsequently, Lily’s use of the interpretative repertoire of addiction is confirmed by her use of the term “addicted” on line 56 (Excerpt 7.3). The use of this label supports the analysis I have presented thus far of this excerpt as implicitly constructing addiction. Nevertheless it is interesting to note that the label “addiction” is only employed in reply to another participants’ deployment of a counter-repertoire. Before I consider Lily’s use of the category of “addicted” in more detail, I will examine Hope’s deployment of a counter-repertoire in response to Lily’s account.

Hope begins her turn with a “but” which marks what is to follow as an opposing view to Lily’s. This particular construction of disagreement is immediately suggestive of the presence of two interpretative repertoires (Edwards, 1997). Note that it is Hope who marks her talk as an alternative construction with her use of “but”. The use of this word indicates that Hope oriented to the presence of more than one interpretative repertoire, or construction of DTI. Her subsequent claims in fact work up a different construction of DTI to the one put forward by Lily. This demonstrates that Hope actually treated at least two repertoires of DTI as distinct. Her construction of an alternative to Lily’s repertoire shows that repertoires were not necessarily treated as definitive constructions of truth during the focus groups, but that they were occasionally disputed and argued against.

In Hope’s version, the compulsion that Lily had previously depicted as “if i went out, < i would- i’d drink” (Excerpt 7.3 lines 23-24) is countered with the claim “i’d rather get the habit out now” (Excerpt 7.3 line 26). This statement reframes the strong association between going out and drinking as a simply repetitive behaviour (i.e. a habit) that must be performed
repetitively for a time, in order to be in a position to eventually cease engagement in said behaviour. Thus the suggestion of compulsion is replaced by the less morally implicative category of “habit”, which was also employed by Alex in Excerpt 6.4, albeit in a different manner. The implication of Hope’s claim is that repetitive going out and drinking is inevitable, at least for a time, and therefore, that Lily’s construction of compulsion is misguided or at least, irrelevant. Hope’s talk also positions going out and drinking as more appropriate “now”, when it can be presumably considered an acceptable age-related way to behave, as opposed to later in life. Such a construction of going out and drinking directly counters Lily’s constructions of concern and loss of control by reframing the concerning practice as normative and indeed, necessary, if only in order to “get it out o’ your system” (Excerpt 7.3 line 47).

Overall, Hope’s alternative construction of DTI could be understood as a variation on the recreation repertoire examined in Chapter 5. It presents repeatedly getting drunk (“the habit”) as time limited, youthful recreation. Such a construction of DTI was popular amongst focus group speakers, although it was seldom used to construct current personal consumption. One other instance where it was used is illustrated in Chapter 5. Greg noted he was “a bit over” just going to town and DTI in Excerpt 5.2. Such an expression is suggestive of a very similar use of the recreation repertoire to that employed here by Hope. The use of the recreation repertoire is indicated by Hope’s treatment of a recreational activity such as “nightclubbing an things like that” as implying alcohol consumption. For although when she talks about nightclubbing and acting like an eighteen year old she never mentions alcohol consumption, these activities are
retrospectively cast as involving DTI when Hope sums up her argument with the claim: “I’d rather get sick of- 😊 getting drunk now hhh😊”. In light of this claim, it is clear that Hope was talking about intoxication all along. Indeed her argument could be understood just as well if it were phrased along the following lines:

But you know I’d rather get getting drunk out of the way now while you’re like really young because when you get older and like twenty five, you just don’t go nightclubbing and getting drunk and things like that. For me it’s like I don’t want to be twenty five still being like, you know, getting drunk and acting like an eighteen year old type of thing.

Essentially Lily and Hope appear to be using two different interpretative repertoires to construct repeated DTI. If this is really the case then one would expect the juxtaposition of contrasting repertoires to create some interactional problems that need to be resolved. This is exactly what happens.

In Excerpt 7.3, on line 31 Lily comes in at a “recognition point” (Jefferson, 1979) in Hope’s talk, that is, a point at which the rest of her turn can be projected by what has already been said, with a strong display of disagreement. This reiterates the possibility of two conflicting views, as suggested by Hope’s beginning of her turn with “but” (Excerpt 7.3 line 26). Lily’s argument is then thwarted by Hope who ignores her protest on line 31 to reclaim the floor on line 32 (in Excerpt 7.3). Interestingly, once Hope has finished constructing her account Lily does not take her argument up again as might be expected to (see the pause on line 49, Excerpt 7.3). However, I, as facilitator, orient to the unresolvedness of this dispute on lines 50-51 (Excerpt 7.3) by opening a space for Lily to defend her construction.
It is in response to my invitation to defend her position that Lily explicitly invokes the concept of addiction (Excerpt 7.3 line 56). At this opportunity, Lily unambiguously rejects Hope’s construction of getting drunk as something you “get sick of” (Excerpt 7.3 line 43) to recast it as “always a crap time >but you’re addicted to ↑it,” (Excerpt 7.3 lines 55-56). Note in particular the use of, and emphasis on, the Extreme Case Formulation (Pomerantz, 1986) “always a crap time”, which strengthens Lily’s claim against Hope’s disagreement. This claim specifically counters the crux of Hope’s argument which intertwines “getting drunk” with recreational activities such as “nightclubbing an things like that” (Excerpt 7.3 lines 29-30). For the implicit assumption inherent in Hope’s claim, and indeed most constructions of DTI as recreation (cf Chapter 5), is that getting drunk is both enjoyable and under control. The categorical countering of this possibility constitutes an upgrade of Lily’s previous position, from one “bad experience” to “always a crap time” (Excerpt 7.3 lines 55-56). This upgrade, in turn, helps to strengthen and legitimise Lily’s rebuttal of Hope’s version.

In addition to countering the construction of DTI as recreation, Lily reiterates her own construction of DTI as addiction. Lily upgrades her position from implying that her consumption might have constituted addiction with the suggestion of compulsion, to actually using the term “addicted”. This category furnishes a medical, diagnostic label for what was previously more vaguely constructed as something “out of my control.”, thus adding further weight to Lily’s argument. Essentially, through the use of the label “addicted”, Lily likens her
previously unspecific experience to a verifiable medical entity, thus adding weight to her argument.

Lily also addresses the implication of Hope’s argument that one can simply get repeated intoxication “> out o’ your system.<” by repositioning extended duration as part of the problem: “the longer that you drink for the harder it is to ↓stop.”. In this way, Lily addresses and counters all of the implications made relevant by Hope’s construction of DTI. Lily’s definitive rebuttal is treated as convincing by Hope who does a display of agreement with a “yeah” (Excerpt 7.3 line 62). Whilst I do not mean to imply that Hope “really” changed her mind, Hope’s “yeah” on line 62 does a display of agreement, and so the dispute, for all intents and purposes, is treated as resolved. In the end, Lily’s construction of DTI as addiction prevailed and is agreed with by her original conversational opponent.

In summary, this excerpt shows how the concept of addiction could be employed implicitly to frame a response to a facilitator’s question regarding drinking that might be “gettin out o’ ha:nd?”. Specifically, in constructing a pattern of consumption that could be heard as morally sanctionable, Lily employed the facilitator suggested concept of (lack of) control to present herself as a moral, right thinking person. Once the construction of repetitive DTI as morally sanctionable was questioned by another participant, who instead constructed a more positive picture of repeated DTI, Lily explicitly mobilised the concept of addiction to successfully legitimise and ratify her more problematic construction. In this way Lily used the repertoire that participants normally constructed their consumption against (cf Chapter 5), to account for a previous suggestion of compulsion.
This section of the current chapter illustrated a further use of the addiction repertoire to the one detailed in Section 7.2.1. It demonstrated how the construction of DTI as addiction is treated by participants as different from an alternative construction of DTI as recreation. I argued that only one repertoire was treated as accurate or “right” in terms of representing one pattern of consumption at any one time. This in turn provides support for the claim that the identified interpretative repertoires are treated as distinct by the focus group speakers themselves, and that the distinction between one repertoire and another is not purely analytical. The next part of this chapter is dedicated to the examination of a possible exception to the repertoire of addiction.

7.3. An Exception?

As indicated at the beginning of this chapter, a clear employment of the repertoire of addiction was indicated by the explicit use of the terms alcoholism, addiction, or at least one of their derivatives. Although the beginning of Excerpt 7.3 shows that it is possible to imply addiction through a construction of lack of control, analysis of the entire excerpt reiterated the importance of the use of explicit addiction-related terms in defending personal accounts of alcohol consumption from alternative constructions. Clearly, constructions of addiction were often accompanied by constructions of negative consequences, as well as constructions of the repetitiveness of DTI over a period of time. However, the main criterion for the categorisation of talk as employing the repertoire of addiction was the use of one or more explicit addiction-related terms.
The analysis presented thus far proposes that the use of terms such as addiction and alcoholism lends substantial credibility and legitimacy to participant constructions of DTI. The validation achieved by such terms is part of the reason for the description of the repertoire of addiction as identifiable by their use. The functionality of concepts of addiction appeared to stem precisely from the rhetorical force of terms such as addicted, alcoholic and the like, which construct seemingly medically approved entities. Nevertheless, during a search for contradictory cases (See the section on “Exceptions and Negative Case Analysis” in Chapter 4) I came across what appeared to be a possible exception.

Specifically, Jim, one participant from the eighth focus group, the same focus group attended by Tom, seemed to be clearly constructing his past DTI as addiction albeit without the use of any specific addiction-related terms. That is, whilst Jim constructed considerable negative consequences resulting from his past consumption, he never once used the label addiction or alcoholism to refer to his consumption throughout the duration of the focus group. As such, Jim’s talk could be considered an exception, or a “negative case” (Franklin & Ballan, 2001; Gilgun, 2001), in that it did not seem to fit with the analytical observation, supported by the other excerpts, that talk constructing addiction normally involved the use of explicit addiction-related terms.

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24 It must be stressed that Jim constructed considerable alcohol–related negative consequences, as the nature of the consequences he described was part of the reason for the impression that he might have been constructing addiction. That is, Jim did not portray the alcohol–related consequences he constructed as minor, in the way that it was argued John and Kim do in Excerpts 5.1 and 5.3 respectively. As the following analysis argues, Jim constructed his experience of alcohol-related consequences as unequivocally severe.
The excerpt is taken from near the beginning of Focus Group 8, just before Excerpt 7.1, after some preliminary introductions. In it, Jim seems to be constructing a pattern of repeated intoxication that could sound like addiction. Note how the pattern of consumption leading to intoxication is depicted as a prolonged affair, with severe negative consequences.

*Excerpt 7.4 (FG8 06:14 – 08:44)*

1  Fac  okay. so.
2  Ian  ((clears throat))
3  Fac  >let’s talk a bit about< drinking.=like wha’
4  situation do you guys drink in:: (. ) uh::m how
5  often do you drink? that kind of thing. (. ) how
6  you like drinking.
7  (Fac)  .hhh
8  (    ) □(        )□
9  Jim  well before (. ) tch .hhh uh:: ’bout (0.4)
10  fifteen years old. started drinking (0.4) .hh
11  probably about four days a week.
12  Fac  □(okay)□
13  Ian  ((clears throat))
14  Jim  uh::m (1.3) get (0.4) smashed. (0.6) before
15  (. ) >i go to school the next morning.< .hh uh::
16  (1.2) it jus:::- .hh it’s just an experience
17  where (0.8) you (0.3) you got no one there you
18  know ( fun you wanna ) >get
19  smashed cause everyone else’s getting’
smashed.<.hnhh and and in the morning you
don’t feel anything you still feel
Fac °>i’ll get you more.<° ((leaves the table))
Tom °sorry°
Fac sorry. keep going.=
Jim =you still feel uhm (2.0) i dunno.=confused,
distressed i guess’d (0.8) .hh you get- still
get frustrated. (0.7).hhh (0.5) uh:m (0.3) get
sick. (1.7) .hh uh:m (0.5) vomit oh-all over
the floor, hh which i didn’t do yet. .hhh uhm
(. ) but- i recently’ve stopped drinking about
eight months ↑ago (0.7)
Ian ((clears throat))
Jim .hh but (0.8) during that period it was jus:-
just put me down big time=i didn’t- (0.3) go
anywhere with my life. .hh you know and now i
got=starting to get myself back on track. Hh
.hh i got my job. (. ) hh it’s all permanent
now,=i got my car. which i wanned .hh and uhm
(. ) i’m slowly moving ↑up so (0.5) and i’m
going for certificate four in security
(systems)so (. ) .hh a::nd= go from there.
Fac so was there anything that sort of (. ) may-
made you::=
Ian ((clears throat))
Fac =any particular episode that m- (0.5) prompted
you to make the decision to stop drinking? or:

Jim OH it’s jus uhm hh (0.6) cause of my work.
>it’s not just my work cause< (.) i **want** to
stop drinking.

Fac **mm**

Jim which i did. .hh a::nd (0.6) cause i w- really
stuffed up my life between then. (0.4) .hh
a::nd
uhm

Ian ((clears throat))

Jim basically it’s=job. (0.8) (that’s) put me into
work habits now. .hhh Uhm (gym) habits now (i
go four) five times a week. (0.5) .hh and
working **constantly** and not thinking about a
drink, (0.3) which hasn’t happened in the last
eight months. .hh even though i=people (.) **ask**
me well= one drink or=i won’t- use my own
money to buy a drink. °.hh i never have in the
last eight months so it’s: (.) its’ a good
thing in a way. .hhh°
Consider the way Jim constructs his drinking in this excerpt from about “fifteen years old” (line 10) to “eight months ago” (line 31). At least two features of this account appear to suggest that what Jim might be constructing could be alcoholism. First, “that period” (line 33) is depicted as one involving frequent (“four days a week” line 11) DTI (i.e. getting “smashed” line 14). A construction of repetitiveness is evident in all constructions of addiction discussed thus far (see my analysis of Excerpts 7.1, 7.2 and 7.3). Second, Jim constructs considerable negative consequences as resulting from his pattern of consumption (see in particular lines 20-21 and 25-29). These consequences can be understood as severe since they are portrayed as widespread effects on Jim’s functioning, or his entire “life” (Excerpt 7.4 line 35 and again on line 53). The severity of such consequences is arguably also highlighted by similarity with the DSM IV TR (American Psychiatric Association, 2000) criterion for alcohol abuse: “Recurrent alcohol use resulting in failure to fulfil major role obligations at work, school, or home”. Considered together, the construction of repetitiveness, alongside the construction of severe alcohol-related consequences, could be taken to suggest that the pattern of alcohol consumption that Jim is constructing might be addiction. Nevertheless, the absence of terms such as “addiction” or “alcoholism” in Jim’s talk in this excerpt, as well as for the remainder of the focus group (data not shown), mark out this excerpt as a possible exception to the repertoire of addiction that I have discussed so far.

Discourse and conversation analysts suggest that exceptions or negative cases can be dealt with in one of three ways (See the section “Exceptions and Negative Case Analysis” in Chapter 4). Firstly, exceptions could be used to reinforce
analysis by showing the participants’ orientation to both the standard basic pattern of speech, and the excusability or local rationality of deviance from it (ten Have, 1999). This treatment was not adequate in this case since there is no evidence that Jim appears to orient to his account as deviating from a standard or basic pattern of speech. The second option is to make revisions to the proposed analysis until it could account for the deviant case also (Potter & Wetherell, 1987). Based on this suggestion, I contemplated broadening the definition of the interpretative repertoire of addiction to include cases that appeared to construct addiction solely with the working up of consequences of consumption similar to DSM IV TR (American Psychiatric Association, 2000) criteria for alcohol abuse or dependence, that is, without the use of specific terms such as addiction and alcoholism. However, this option was also deemed inadequate for two reasons.

First, the broadening of the description of the repertoire of addiction to include talk that did not use specific terms such as addiction was considered to contradict the importance of the use of those terms in working up and legitimising a particular construction of DTI. Such a revision was considered to depreciate, in a sense, the rhetorical force, argued so far, that such terms can bring to bear on an interaction. Second, the definition of the repertoire of addiction was not broadened because it was observed, following further analysis of the rest of Jim’s talk during the focus group, that Jim goes on to describe himself as a heavy drinker later in the interaction (See Excerpt 7.5). Although the self-ascription of the label “heavy drinker” might appear contradictory to the talk just presented, it also presents the possibility that Jim may not have been constructing his past DTI as addiction at all, but as simply a period of heavy consumption. Another possibility is that Jim might
have been constructing addiction in Excerpt 7.4 and heavy drinking in Excerpt 7.5. However, given the preference for consistency in conversation, the latter possibility is less probable. Given the very different implications of constructions of heavy consumption as opposed to addiction, I decided to produce a separate analysis of Jim’s talk. This is the third way of dealing with exceptions or negative cases advocated by conversation and discourse analysts (ten Have, 1999; Potter & Wetherell, 1987).

The next Excerpt illustrates the way in which Jim ascribes himself the label of heavy drinker. Prior to the beginning of this excerpt, Jim had been talking about how he had seen alcohol affecting other people’s relationships. He depicted his uncle as hiding alcohol everywhere in his house. That was until his wife found the bottles of alcohol and gave him an ultimatum: the alcohol or the family.

Excerpt 7.5 (FG8 46:54 - 47:24)

1 Jim then- that’s when he (0.6) trashed everythink
2 out and .hh he got- o he got himself back
3 together=it just takes time=like for me to be
4 o-off the drink for eight months .hh hh o’you
5 know.” (.) i don’t feel the need to have
6 another drink. .hh it’s not worth it. j-t-
7 cause it put my life down, (.) it- didn’t put
8 me anywhere. o’had to (get) myself back on
9 track.” (.)hh you know (.) for
10 him. i know how it is cause i ‘n used to
11 be a heavy drinker as well. .hhh i was
12 terrible.(0.9)me and him would be- good team.
Despite the use of the label “heavy drinker” on line 11, the above excerpt appears to contain further indications of a possible construction of addiction. Similar to the rhetorical work achieved in Excerpt 7.4, in the excerpt above Jim once again constructs consequences of consumption that resemble the aforementioned DSM IV TR (American Psychiatric Association, 2000) criterion for alcohol abuse, that is, recurrent alcohol use resulting in failure to fulfil major role obligations at work, school, or home (see lines 6-9). Moreover, the specific construction of abstinence in the description of the current self as “off the drink for eight months” (Excerpt 7.5 line 4) is reminiscent of the construction of alcoholism promulgated by the teachings of Alcoholics Anonymous (AA). In particular, it is evocative of the AA maxim “one drink, one drunk”. It is also reminiscent of the practice of going “cold turkey”, or suddenly ceasing engagement in an activity that one was previously addicted to. After all, one could argue that if Jim was simply a heavy drinker all he needed to do was to lower his consumption to more moderate levels; there would be no need for him to cease drinking entirely. Lastly, part of Jim’s talk that could suggest that he is constructing his past DTI as addiction is his identification with Tom (Excerpt 7.5, line 12), a participant who had previously labelled himself as an alcoholic (Excerpt 7.1, line 57). In fact, the “him” on line 12 (Excerpt 7.5) does not refer to Jim’s uncle but to Tom. This was made clear with eye gaze during the focus groups. Subsequent talk also shows that participants oriented to Jim’s comment as referring to Tom (data not shown in the interests of conciseness).

Despite the fact that these elements of Jim’s talk could be understood as constructing alcoholism, they do not necessarily exclude the alternative possibility
that Jim might in fact be constructing his past consumption as heavy drinking. For example, the negative consequences of consumption that Jim repeatedly constructed throughout the focus group (see Excerpts 7.4 and 7.5) could be simply understood as the consequences of a sustained period of heavy consumption rather than alcoholism. Moreover, Jim’s construction of the current self as abstinent could also be viewed as a display of considerable control over consumption. It could, in fact, be a deliberate countering of possible inferences of compulsion or loss of control usually associated with constructions of addiction. This would be consistent with the observation that whilst the participants that clearly constructed addiction (i.e. Tom and Lily) also constructed difficulties with altering alcohol consumption behaviour (see the analysis of Excerpts 1 and 3), Jim actually attributes all change to himself (see Excerpt 7.4 lines 35-41 and 48-52; Excerpt 7.5 lines 8-9). Additionally, in identifying with Tom it is possible that Jim was simply drawing a comparison between Tom and himself on the basis of the similar reportedly elevated levels of consumption.

Essentially, from an analytical perspective, Jim’s construction of his past DTI appeared at first to be ambiguous and possibly contradictory. Similarly, previous research has also noted that individuals often hold what appear to be contradictory beliefs about addiction (Luke et al., 2002). However, it is interesting to note that in the context of the eighth focus group conducted as part of this research, Jim’s talk was not treated by any other participant (including myself in the position of facilitator) as ambiguous or possibly contradictory at all. Other participants treated Jim’s talk as clear and unambiguous by not calling it into account, not
requesting clarification, and generally preceding as though what Jim had said made perfect sense.25

The analytically alleged ambiguity of Jim’s talk arguably stems from its consideration as a possible example of the repertoire of addiction. Once this possibility is discarded, Jim’s talk no longer appears ambiguous. Thus, producing a separate analysis of Jim’s talk, as bringing about an alternate reality to that of addiction, was considered the analytical move that made best sense of the data.

Having abandoned the possibility that Jim’s talk may be a variation on the repertoire of addiction, it is possible to consider Excerpts 7.4 and 7.5 without preconceived ideas as to what Jim might be constructing within them. From such a perspective, the most salient feature to emerge from these accounts is arguably Jim’s use of the label “heavy drinker”. This self-ascription could be argued to work specifically against the categorisation of addict or alcoholic. As such, it raises the possibility that what Jim is constructing in his talk is a pattern of consumption distinct from that of an alcoholic. The point is that, whilst Jim’s talk might initially sound similar to a possible construction of addiction, what he actually constructs is fundamentally different. After all, the implications suggested by the category of “heavy drinker” are fundamentally different from those suggested by the category of alcoholic or addict. The most obvious difference relates to the level of control that can be constructed over consumption. Thus it could be argued that Jim’s use of the

25 I don’t mean to suggest that Jim’s talk did not make sense, but simply that from an analytical perspective it proved to be a puzzle.
label “heavy drinker” is an attempt to distance himself from a possible ascription of addict or alcoholic.

The self ascription of heavy drinker positions the self as an agent, as one who drinks. It also implicitly suggests a motivation for consumption based on choice, rather than compulsion. This is essentially the major difference between self ascriptions of heavy drinker and alcoholic. Alcoholics are generally thought to have little control over consumption. Research shows that respondents often describe heavy drinkers as people that drink heavily; and alcoholics as people that have no control over their consumption (Abrahamson, 2003).

Jim’s talk arguably brings about an alternate reality to that constructed by the repertoire of addiction in three ways. First, as I have just argued, through the use of the label heavy drinker. Second, Jim’s talk brings about an alternate reality through the construction of considerable agency relating to changes in alcohol consumption. Lastly, an alternate reality is portrayed through the construction of alcohol-related consequences different to those normally constructed within the repertoire of addiction. Since the first discursive move has already been discussed, I will now move on the consideration of the additional two ways that Jim’s talk brings about an alternative reality to that constructed by the repertoire of addiction.

Congruent with the subtle implications of control over consumption suggested by the self-ascription of heavy drinking, as opposed to alcoholism, Jim constructs considerable control over changes in his consumption. In fact he repeatedly attributes his change from frequent DTI to abstinence wholly to himself with internal, dispositional attributions (see Excerpt 7.4 lines 35-41 and 48-52; Excerpt 7.5 lines 8-9). An example is the quote: “>it’s not just my work
cause< (. ) i want to stop drinking... which i did” (Excerpt 7.4 lines 49-50 and 52, emphasis in original). Emphasis on agency for positive change constructs a considerable amount of personal efficacy, similar to the way Lily’s claim to stop going out constructed personal efficacy in Excerpt 7.3. However, in this case Jim is able to portray personal efficacy in relation to drinking, rather than a drinking related activity like Lily. This construction of agency in relation to changes in consumption would arguably have been more difficult from within the repertoire of addiction26. Nevertheless, such constructions of having to get oneself back on track are consistent with the label of “heavy drinker” (Excerpt 7.5, line 11).

To note that Jim constructed considerable self-responsibility for changes in alcohol consumption is not to imply that he constructed total responsibility for his experience in the first place. In fact, Jim often attributed failures to other factors. Consider Excerpt 7.5, in this excerpt Jim constructs “the drink” as putting his life “down”, in a similar way to that evident in Excerpt 7.4. Such an attribution of agency to alcohol minimises personal responsibility for negative consequences, as occurs in the addiction repertoire (See my discussion of Excerpts 7.1 and 7.3). At the same time, however, by attributing his negative experience to “the drink” rather than anything else, Jim might be implicitly countering the possibility that his negative experiences may have been caused by anything else, such as addiction for example. Regardless of the similarity with the addiction repertoire, the attribution of a

26 That is not to say, as previous researchers have suggested (see for example Levy, 2003; Gillies, 1999), that the self ascription of addiction leaves little room for agency or responsibility for behaviour change. As I have already demonstrated in this chapter, Lily was able to portray personal efficacy by constructing a self-directed change in a drinking related behaviour.
negative life experience to “the drink” allows Jim to avoid blame for a “bad” behaviour or repeatedly DTI. “The drink” was constructed as putting his life down, rather than anything that he may have done to contribute to that, like drinking.

Whilst the attribution of a negative experience to “the drink” allows Jim to avoid blame for “bad” behaviour, his self ascription of responsibility for turning the situation around: “ºhad to (get) myself back on track.º” (Excerpt 7.5, lines 8-9) allows him to take credit for changes in consumption and “good” behaviour. The switch between agent (in relation to changes in consumption) and patient (in relation to failures) in Jim's talk can be understood as a classic case of what has previously been called defensive attributions, self-serving biases and attributional egotism among other things (see Tedeschi & Reiss, 1981 for more on this). Defensive attributions involve a tendency toward the construction of external environmental attributions for failures (see Excerpt 7.4, lines 33-34: “during that period it was jus::: just put me down big time”) and internal, dispositional attributions for successes (see Excerpt 7.4, lines 49-50 and 52: “i want to stop drinking... which i did.”). Thus, through a combination of the deployment of the categories such as “the drink”, which minimise responsibility, and “heavy drinker”, which emphasise control, Jim is able to simultaneously minimise agency for a negative experience and to emphasise agency in relation to a positive outcome, that is, getting back on track. These discursive moves allowed Jim to present a favourable self image consistent with the self-ascription of the label heavy drinker.

Another difference between Jim’s talk and the talk of Tom and Lily, which constructs addiction, relates to the kind of alcohol-related consequences constructed.
As previously noted, both Tom and Lily construct alcohol-related consequences similar to DSM IV TR (American Psychiatric Association, 2000) criteria for alcohol dependence. These included tolerance and a persistent desire to cut down or control alcohol use. In contrast, Jim instead constructs alcohol-related consequences more similar to DSM IV TR (American Psychiatric Association, 2000) criteria for alcohol abuse. Whilst this might seems to be a pedantic theoretical distinction, it is nevertheless instructive. Combined with the aforementioned differences between Jim’s talk and the repertoire of addiction, it provides further support for the claim that what Jim constructed during the eighth focus group was a reality different to that of addiction.

The analysis of Jim’s talk as bringing about an alternative reality strengthens the original analysis presented in this chapter on the repertoire of addiction. Specifically, it underscores the importance of the use of the labels “addiction” and the like, as the defining criterion of the addiction repertoire. It would appear that when constructing addiction, the use of explicit labels is unlikely to be optional. That is because, within the repertoire of addiction, such labels perform the very important function of ratifying one’s talk as truth and protecting it from criticisms or challenges. Moreover, the construction of what could on first appearance seem to be addiction, in the absence of the use of specific labels, could, as in Jim’s case, actually be constructing a reality with different implications for behaviour. For, as Jim’s case illustrates, it is possible to construct past repeated DTI resulting in considerable alcohol-related problems, without necessarily constructing addiction. Thus, for further research, it is suggested that, in the absence of addiction-related
labels, it is probably best to assume that what is being constructed is not addiction, but an alternate reality.

Thus far I have avoided labelling the alternate reality that I argue Jim appears to be constructing. That is because, in the absence of additional data, it is difficult to clearly delineate an alternative reality based on only one instance of talk, and thus to label it. This is also the reason why this alternate reality was not analysed in more detail. In essence, Jim’s talk was the only instance, out of the entire corpus of data generated by eight focus groups, that seemed to be constructing DTI in this particular manner.

Nevertheless, Jim’s talk indicates the existence of a possible fourth repertoire or way of constructing DTI. This repertoire could be loosely termed, pending further analysis, “DTI as problematic consumption”. Whilst this heading is suggested very tentatively in the absence of a more detailed analysis, it is considered useful because it can be taken as the starting point for a discussion on an as-yet undescribed repertoire. The label itself immediately raises a number of questions that could be addressed by further research. For example, is it possible that this fourth discourse might include instances of talk such as those described in this thesis, where another person’s alcohol consumption is called into question or problematised (see for example the instance where Bill questions and thus problematises Rose’s consumption in Excerpt 6.3)? This question was not addressed by the current research as the focus of this study was squarely on constructions of personal instances of DTI. Another question raised by the label of problematic consumption is whether similar ways of speaking can also be found in talk about chocolate for example. Whilst there is some discursive research on the addiction repertoire, there
is no discursive research, to my knowledge, that examines the type of repertoire possibly identified here. More research in diverse contexts is needed.

7.4. Concluding Comments

The analysis of the excerpts presented in this chapter shows that in addition to recreation and self-therapy, DTI, more specifically repeated DTI, can also be constructed as symptomatic of alcoholism or addiction. The repertoire of addiction blends together public health concerns regarding alcohol consumption with a medical concept of pathology. Indeed, the way speakers constructed negative alcohol-related outcomes resulting from addiction was similar to DSM IV TR (American Psychiatric Association, 2000) criteria for alcohol dependence. Whilst this is indicative of an overlap between professional and lay constructions of problematic patterns of alcohol consumption, such similar constructions are likely to be used differently by professional and lay speakers in different contexts.

Focus group participants employed the interpretive repertoire of addiction in response to facilitator questions about personal concern over level of consumption (see Excerpt 7.3), as well as in response to more general questions about participants’ current drinking patterns (see Excerpts 7.1). During the focus groups, this interpretative repertoire was used to achieve different ends, through the employment of medically derived terms such as alcoholism and addiction. These terms were in turn used by speakers to impart a sense of authority and legitimacy to personal accounts of consumption.

The use of explicit, medically derived labels such as “alcoholism” (Excerpt 7.1) and “addicted” (Excerpt 7.3) was in fact the defining aspect of constructions of
addiction. In Excerpt 7.1 the label “alcoholism” was used to legitimise a positioning of the self as a patient. In Excerpt 7.3, the label “addicted” served to strengthen Lily’s rebuttal of Hope’s employment of a counter repertoire. The importance of the use of explicit labels became clear upon the examination of talk which appeared to construct addiction without explicit labels, but was instead eventually deemed to be constructing an alternate reality (Excerpts 7.4 and 7.5).

The repertoire of addiction, as it was used within the analysed focus group talk, proved functional for positive self-presentation purposes. Whilst there is some irony in this claim, given the social stigma normally attached to addiction, my research shows that participants were aware of this stigma inasmuch as they oriented to and actively worked to counter it. The participants in my focus groups balanced their use of the addiction repertoire with discursive strategies, such as reporting “private thoughts”, designed to present the self in a positive and nonproblematic manner. These strategies allowed speakers to present the self as “addicted” as well as moral and “right thinking” at the same time.

The possibility of constructing the self as simultaneously addicted and moral makes salient what has been previously termed the “double edged” nature of interpretative repertoires (See Chapters 5 and 6). That is, the flexible characteristic of repertoires which allows them to be used to portray a particular action or event variously as more or less acceptable in different contexts. Indeed, at the beginning of this chapter, it was noted that concepts of compulsion, loss of control and therefore addiction, are normally treated as problematic insomuch as speakers generally constructed their consumption against such possibilities. However, the bulk of this chapter examined how the repertoire of addiction, as well as concepts of loss of
control, could conversely be used to present the self as moral. These almost contradictory uses of the repertoire of addiction indicate that, much like the repertoires of recreation and self-therapy, this repertoire too can be considered a double edged sword. Similar observations have been made in relation to eating disorders. In particular, Brooks (2009) notes that whilst previous research showed that one way to manage accountability for eating disorders was to avoid a pathological label, she found that elements of pathology can in fact be drawn upon to make sense of problematic eating behaviours.

The repertoire of addiction identified both in this and Brooks’ (2009) study contributed to constructions of the self as moral, by countering the possibility that one wilfully and knowingly engaged in a pattern of consumption that could be considered negative or irresponsible for a prolonged period of time. Constructions of the self as an “alcoholic” or as “addicted” in this study legitimised considerably passive constructions of events, as well as claims of loss of control, by invoking a widely accepted “hypothesised pathological mechanism” (May, 2001 p. 385) to which personal agency and control are subordinate. Thus, from a discursive perspective, it could be argued that in this focus group context the repertoire of addiction can be understood to function as an excuse\textsuperscript{27} for a morally questionable}

\textsuperscript{27} As indicated in Chapter 2, debates regarding “reality” and what is “real” are explicitly set aside for the purposes of this research. Thus, the observation that “the repertoire of addiction can be understood to function as an excuse” is not intended to imply in any way that “addiction” is simply an excuse, but rather that the repertoire of addiction was simply used in this manner by participants in this focus group study.
behaviour which exculpates the actor from responsibility and blame on the basis of a lack of volition. This lack of volition is in turn circularly, though nonproblematically, legitimised through attribution to what is treated as a medically validated condition.

The focus group participants’ employment of the “addiction” interpretative repertoire to construct personal (albeit past) consumption echoes the findings of previous discursive research. Earlier studies illustrate how both dieting and eating can be constructed as addiction (Brooks, 2009), as well as how women can construct smoking (Gillies, 1999; Gilles & Willig, 1997) and even chocolate consumption (Benford & Gough, 2006) using what was called a “discourse” of addiction. The interpretative repertoire of addiction also resembles what Davies (1997b) describes as Type 3 discourse, a manner of speaking about drug use said to most often be employed following contact with drug counselling agencies or professionals. Type 3 discourse is defined as the construction of personal consumption as the result of addiction and loss of control (Davies, 1997b).

Other researchers have also similarly noted the functionality of the concept of addiction. In line with the analysis presented in this chapter, Davies (1997a) for example argues that

the functional ‘addiction’ explanation works so well at the individual level; it removes responsibility, it allows others to forgive, and because of Western systems of ethics and morality it gives permission for us to take courses of action that we may not take with respect to bad things which are done on purpose (p. 183 emphasis in original).

Similarly, Reinarman (2005) proposes that the concept of addiction is functional in that it allows speakers “to simultaneously ‘own’ and yet disown
deviant acts committed while addicted” inasmuch as speakers are able to “admit the sins of the old addicted self while laying claim to a new self-in-the-making” (Reinarman, 2005 p. 315). I would go further to argue that the flexibility with which this concept is deployed means that speakers are able to choose which acts to attribute fully to themselves (e.g. stopping going out) and which “to simultaneously ‘own’ and yet disown” (e.g. repeated DTI), though a strategic rhetorical organisation of their talk.

Whilst my study is consistent with previous literature on the functionality of the concept of addiction (see for example Brendan & Gough, 2006; Brooks, 2009; Davies, 1992, 1996, 1997b; Gillies & Willig, 1997; Gillies, 1999; Heim, Davies, Cheyne & Smallwood, 2001; May, 2001), a point of difference from previous research was the speakers’ tendency, in the current study, to only ascribe the label of “addiction” to past behaviour. This served to imply that the current self was no longer “addicted” and by inference, that current consumption was under control. Unlike other studies, in particular those conducted with cigarette smokers (Gough, Fry, Grogan & Conner, 2008; Fry et al., 2008; Gillies & Willig, 1997; Gillies, 1999), chocolate addicts (Benford & Gough, 2006), radio phone in callers concerned about eating disorders (Brooks, 2009) and drug users (Davies, 1992), none of the participants in the current study constructed present behaviour as addicted.

The fact that none of the participants of the current study located their addiction in the present may be due to restricted sampling. Indeed, unlike previous research, I did not specifically set out to recruit people constructing themselves as current alcoholics or addicts. Thus, further research could endeavour to specifically examine the talk of people who classify themselves as currently addicted to alcohol
or as alcoholics. Nevertheless, the fact that no participant in the present study constructed the current self as addicted suggests interesting possibilities. One of these possibilities is that it might not be possible to construct the current self as both moral and addicted alcohol. However, as previously noted, it was possible for speakers constructing addiction to present themselves as addicts and as moral persons at the same time. That is, although addiction was always located in the past, speakers were nevertheless able to present their past self as moral, even when in the grips of addiction. Thus it is unlikely that a construction of the present self as currently addicted to alcohol would prevent the simultaneous presentation of the present self as moral. Indeed other research confirms that the present self can be constructed as addicted and as moral at the same time. Whilst it could be argued that addiction to alcohol might be a different case, my analysis suggests that it is unlikely since it shows that a past addicted self can nevertheless be portrayed as moral.

If the present self could be constructed, at least theoretically, as both addicted to alcohol and moral, the question that remains is, why is it often not? There is no discursive research to the author’s knowledge that examines the construction of addiction in the context of alcohol consumption. This could be due to the fact that the application of discursive principles to alcohol research is a relatively new endeavour. However, the lack of discursive examples of talk about the current self as addicted to alcohol could also suggest that, perhaps, whilst it is permissible to talk about the present self as addicted to such practices as chocolate consumption and even smoking for example, the construction of the present self as addicted to alcohol might carry a greater social stigma. This possibility has a certain heuristic value.
Certainly, one of the contexts in which it might be possible to hear talk about the self as currently addicted is within Alcoholics Anonymous (AA) meetings. In fact, part of the AA philosophy involves the recognition, at least in the beginning of “treatment” or “recovery”, of the current self as alcoholic, immortalised in the famous line “Hi, my name is … and I’m an alcoholic”. It remains to be investigated whether such a construction might also be found outside of these meetings or outside the talk of AA members.

Another point of difference of this study from previous research is that the analysis expounded in this chapter suggests that the repertoire of addiction is not as limiting or disempowering as has been previously argued (see for example Levy, 2003 and Giles, 1998). Davies (1998) for example argues that the self profession of addiction appears “to have a self-fulfilling function… addiction by definition implies that the person’s behaviour is not theirs to control, and this belief appears to have an incapacititative effect” (Davies, 1998 p. 273). Similarly, Levy (2003) has argued that the features ascribed to “addiction” deny the value of any attempts to exercise self-control, encouraging the destructive view that addicts do not have a choice, or control over their behaviour. Whilst it is true that certain interpretative repertoires offer certain subject positions, that is not to say that speakers actually “see” themselves as patients, or that they cannot then construct themselves as agents. The analysis presented in this chapter suggests that the repertoire of addiction is not so much disempowering as it is functional.

As demonstrated in Lily’s case (Excerpt 7.3), her employment of the category of “addict” did not counter the possibility of her constructing self-control. In particular, the analysis of Lily’s talk showed how she was able to construct
personal efficacy and agency for change even within the repertoire of addiction. This observation indicates that speakers may not be as constrained by the discourses they use to construct their behaviour as previously thought. Instead, I would argue that speakers are extremely resourceful in constructing their behaviour.

A last point of difference between this and previous research is the identification, in the current study, of a possible alternate repertoire to that of addiction, one here tentatively labelled “problematic consumption”. This alternative repertoire, whilst potentially similar to the repertoire of addiction, was said to construct a fundamentally different reality. To my knowledge, such an interpretative repertoire has never before been examined from a discursive perspective, at least in a manner that relates to the construction of alcohol consumption. It will be the task of future research to examine the possibility of an alternate repertoire and to delineate exactly how it differs from the repertoire of addiction.
8. Conclusion
Taking part in research encounters enquiring about personal experiences, such as the focus groups conducted for the purposes of this research, is a complex conversational task, as Mazeland and ten Have’s (1996) paper suggests. Essentially, the focus group setting imposes some necessary constraints on the flow of conversation. The main tenet of Mazeland and ten Have’s (1996) paper is that participants’ talk has three functions: as descriptive of personal “life worlds”, as responses to interview questions, and as input into a research project. This tri-fold orientation gives rise to “essential tensions” as participants and interviewers negotiate an appropriate balance between these sometimes conflicting concerns. Although Mazeland and ten Have (1996) write about interviews, their assertions are arguably equally applicable to focus group research.

In addition to these three functions, focus group talk is also oriented to the presence of peers who may or may not share one’s reported perspective. As Puchta and Potter (2004) have noted, the set up of the social science focus group is such that it tends to promote talk that is recipient designed, considering other participants as recipients. Focus group participants can support, question or criticise others’ talk and speakers orient to this possibility. This was clearly illustrated in this study by participants’ questioning of others, as evident in a number of the analysed excerpts. Thus, recipient design can be considered the fourth function of focus group talk.

The negotiation of the interactional complexities of the focus group exchange was carried out in this study, at least in part, by the employment of three rhetorical devices or interpretative repertoires used to frame talk about personal instances of drinking to intoxication (DTI). In particular, these repertoires were used to frame questions directed at participants, answer facilitator or other participants’ questions,
criticise other participants’ replies as well as to refute criticism. The three main repertoires that allowed the performance of this interactional work were labelled recreation, self-therapy and addiction.

The repertoire of recreation allowed the construction of DTI as a pleasurable pastime. The repertoire of self-therapy facilitated the construction of DTI as a response to a stressful event. Lastly, the repertoire of addiction positioned repeated DTI as symptomatic of what May (2001) has called a “hypothesised pathological mechanism” (p. 385). In the previous three chapters I have separately identified and discussed these repertoires, including their respective functions. In this final chapter, I draw together the observations gleaned from the separate analysis of the three repertoires.

In Chapter 2, the current study was located geographically within the context of the Northern Territory of Australia. The level of alcohol consumption in this location was discussed as evidence of a culture of heavy or binge drinking, particularly amongst young people. The assumption was that this geographical context, with its unique culture, might make available or facilitate discourses that differed from those available in other drinking cultures. However, the comparison of this research with other studies, discussed later in this chapter, arguably indicates that the discourses or interpretative repertoires available among youth in the Northern Territory are not very different from those available amongst other adult age groups in other countries.
8.1. **Repertoires are a Joint Effort**

As the conduct of a focus group is a joint enterprise between a facilitator and two or more participants, so the construction of DTI using any of the three identified repertoires was normally a joint effort requiring the discursive moves of more than one speaker. Thus, whilst recourse to one repertoire over another may have been initiated by a particular speaker, its acceptance by the rest of the group was generally predicated on the discursive support or validation lent by others to such a construction. Discursive support or validation can be understood as rhetorical moves that demonstrate either affiliation with or an uptake of the introduced repertoire by one or more co-conversants. In the excerpts presented in the previous three chapters these rhetorical moves included shared laughter, or the acceptance of invitations to laugh (Excerpts 5.1, line 29, and Excerpt 5.3, line 21), displays of agreement such as “yes” affirmations (Excerpt 6.1, lines 5 and 8; Excerpt 7.3, line 62), as well as demonstrations of affiliation through finishing off another speaker’s sentences (Excerpt 6.1, line 4).

Occasionally however, aside from a facilitator’s normative minimal continuers, participants’ recourse to a particular interpretative repertoire was not acknowledged or responded to by other participants. This occurred during what Jefferson (1988) would call “troubles talk” such as Tom and Jim’s narratives of alcohol-related problems (Excerpts 7.1 and 7.4). However, it also occurred in instances when other participants went on to question the particular repertoire employed by the initial speaker (Excerpt 5.2; Excerpt 6.3). This would seem to suggest that, apart from instances of “troubles talk”, co-conversants’ failures to
validate a speaker’s employment of a particular repertoire might indicate forthcoming disagreement.

Indeed, a speaker’s employment of a particular repertoire to construct their personal consumption did not guarantee its acceptance by other focus group participants. Co-conversants were free to disagree with particular uses of certain interpretative repertoires and they did so on numerous occasions. Three disagreements were analysed in this work, one in Chapter 5 (Excerpt 5.2), one in Chapter 6 (Excerpt 6.3) and one in Chapter 7 (Excerpt 7.3). These highlighted the independence as well as the flexible nature of interpretative repertoires. Both attributes will be discussed in more detail.

8.2. Independence of Repertoires

The interpretative repertoires identified in this study can be considered independent since speakers tended to treat each one as separate and distinct from the next. In other words, the repertoires were treated as constructing different types of behaviour although, on a superficial level, it could be argued that they were all constructing similar behaviour, that is, DTI. Evidence from two sources supports this conclusion. First, repertoires were treated as separate in that they were mainly used separately in different contexts. For example, the repertoire of recreation was used in contexts where DTI had been previously discussed and had not been framed as problematic (see Chapter 5). The self-therapy repertoire on the other hand was mainly used the first time DTI was introduced into a focus group discussion, in a context where other participants’ views of DTI were as yet unknown (see Chapter 6). In contrast, the addiction repertoire was only ever used when talking about a
series of repeated episodes of DTI (see Chapter 7), whereas the other two repertoires
where mainly used to construct individual episodes of DTI. The only exception to
this trend was the construction of a series of episodes of DTI as youthful time
limited recreation discussed in relation to Excerpt 7.3. Thus, repertoires were mainly
used in different contexts.

To note that repertoires are mainly used in different contexts is not to deny
that elements of more than one repertoire could be used together. Occasionally,
elements from different repertoires were used together, however, in the end, one
overarching construction of each recounted episode of DTI remained paramount. An
example of this is evident from Tom’s talk in Excerpt 7.1. Although he initially used
the repertoire of recreation to suggest a normal motivation for a past pattern of
consumption, he later reframed such a pattern under the rubric of addiction. Thus,
although used in the same rhetorical context, the repertoires could be said to have
been treated as separate in that only one final overarching construction of the DTI
was allowed to stand (that is, addiction). Moreover, to note that repertoires are
mainly used in different contexts is not to deny that different repertoires can, on
occasion, be used in close proximity. On one occasion for example, Rose, a
participant from Focus Group 6, initially employed the repertoire of self-therapy to
recount an episode of DTI, only to change construction once the first account was
criticised (Excerpt 6.3).

The second source of evidence to suggest that speakers tended to treat each
interpretative repertoire as separate and distinct from the next comes from the fact
that interpretative repertoires were normally treated as mutually exclusive when two
repertoires were juxtaposed. This occurred on occasions when one speaker would pit
a particular repertoire against another’s. There were not many instances of this since, as previously noted, the repertoires tended to be used in separate contexts. However, the analysis of one instance of juxtaposition was reproduced in the previous chapter. Specifically, in Excerpt 7.3, Hope pitted the repertoire of (time limited youthful) recreation against Lily’s subtle construction of addiction, by portraying repeated intoxication as something to “get out of your system”. As would be expected, where incompatible repertoires are used together they present problems or contradictions that speakers must deal with (Potter & Wetherell, 1987). This was indeed the case. In the aforementioned example, in the end only Lily’s construction was allowed to stand as valid. The juxtaposition of repertoires as mutually exclusive indicates that speakers treated these discursive devices as separate and distinct constructions of DTI.

8.3. Flexibility and Variation

In addition to being treated as distinct, the interpretative repertories identified by this study were both flexible and employed in a flexible manner. They were flexible insomuch as they could be understood as “double edged swords”, that is, they could be either used as a negative or positive evaluation. Moreover, they were employed flexibly in that they were not fixed on deployment once and for all. That is, repertoires could be abandoned, contradicted, or reworked following their use in conversation. These two types of flexibility necessitate separate consideration. I will discuss each in turn.

In relation to what is here termed the “double edged” nature of the identified repertoires, it is worth pointing out that although the repertoires were usefully
employed during the focus groups for different ends, their use also created “problems”. Specifically, whilst the employment of a particular repertoire facilitated the construction of DTI in a particular manner, the argumentative nature of talk guaranteed the possibility of opposing constructions of the same pattern of consumption. Thus for example, where the repertoire of recreation could be used to justify DTI on the basis that it was enjoyable, this discursive move also presented a potential problem. That is, that DTI could be heard as being necessary for enjoyment and thereby suggest contextually unfavourable attributions of compulsion, addiction or a lack of self-control. Alternatively, employment of the repertoire of self-therapy to excuse DTI could be questioned by topicalising the link between stress and DTI, treating it as accountable and thus implicitly positioning it as somehow problematic. Lastly, where the majority of speakers generally constructed their DTI against the possibility that such consumption might be heard as out of control or addicted, some speakers occasionally constructed their past DTI explicitly as addicted as part of discursive moves designed to present the self as moral. The double edged nature of the identified repertories indicates that, at least within the focus groups conducted, no interpretative repertoire constructed a specific drinking occasion consistently as either good or bad.

What here is called the double edged nature of repertoires is perhaps what Goodman (2008) is referring to when he writes that “we may begin to see opposition to successful and generally used strategies” (p. 272). Indeed at first glance, the repertoires of recreation, self-therapy and addiction appeared to be unipolar constructions. Specifically, it appeared that the repertoire of recreation was a straightforward justification of DTI, whilst the repertoires of self-therapy and addiction
appeared to be straightforward excuses. On closer analysis, however, it became clear that whilst the three repertoires appeared to be mostly used to perform the said functions (i.e. justification and excuse), they were also often used in seemingly “contradictory” manners. For example, the repertoire of recreation could create interactional and self-presentation problems when intoxication could be heard as necessary for enjoyment. The repertoire of self-therapy could be used to criticise DTI by topicalising motivation for consumption. Lastly, in relation to the repertoire of addiction, it became clear that whilst some participants used it as an excuse, many other participants constructed their consumption specifically against the possibility that their drinking might be heard as addicted.

Essentially the constructed acceptability (or problematisation) of a particular episode of consumption was not inherent in the repertoire used to construct it. Instead, the construction of acceptability or the problematisation of DTI appeared to be achieved by separate but parallel discursive strategies such as the construction of consensus and the use of second person. Such complex accounting meant that constructions of DTI could be challenged by undermining the discursive resources used to work them up. What I am proposing is not so much that there are opposing repertoires, clearly there are. This is illustrated in Chapter 2 as well as through the demonstration of the independence of the three identified repertoires outlined earlier in this chapter. The point is that even within each repertoire, or at least the ones identified here, there is the possibility of different uses and deployments, and therefore, different functions. This possibility is attributable to the argumentative nature of talk.
The double edged nature of the recreation repertoire identified in this study is consistent with the noted presence of contradictory societal messages (Measham & Brain, 2005; O’Malley & Valverde, 2004; Szmigin et al., 2008) of hedonism and personal control over alcohol consumption discussed in Chapter 2. Recall that on the one hand, the repertoire of recreation could be used to justify DTI according to the now valued principle of hedonism. However, on the other hand, the repertoire of recreation could also cause interactional problems when intoxication was positioned as necessary to enjoyment, thus suggesting inferences of compulsion or lack of control. Additionally, the current research also uncovered other contradictory messages regarding both DTI as self-therapy and addiction. Both constructions could be used as excuses, yet they were also treated as accusations or constructions worth distancing personal consumption from.

To return to the discussion of the interpretative repertoires’ properties, it was previously noted that in addition to a double edged nature, the interpretative repertoires identified by this study also displayed another noteworthy feature: the possibility of flexible employment. The use of interpretative repertoires was in fact accomplished, negotiated, and revised in talk. That is, once a speaker employed a particular repertoire they were not automatically “trapped” within such a construction. Instead, even when constructing one particular episode of consumption, speakers showed remarkable ease in switching from one account of events to another, sometimes from one turn to the next. This was perhaps best illustrated by the excerpt outlining the exchange between Rose and Bill (Excerpt 6.3) mentioned earlier in this chapter. In this case, Rose initially employed the repertoire of self-therapy to excuse a particular instance of DTI, but later
reconstructed a very different version of the same occasion when questioned by Bill. Evidently, interpretative repertoires were not treated as definitive accounts during the focus groups, but were rather used as flexible discursive resources according to the function that a speaker wished to achieve in each context.

The interpretative repertoires’ flexible employment would suggest that these rhetorical devices can be very useful discursive resources. Possibly due to their double edged nature and the fact that repertoires are not treated as definitive, different constructions of the same behaviour can be worked up in different contexts to achieve a number of different functions. Interestingly, other researchers have argued that “discourses”, a similar concept to repertoires, can be disempowering, deterministic and restrictive (see for example Eiser, Sutton & Wober, 1978; Gilles & Willig, 1997; Gillies, 1999). This argument was not supported by my analysis. For example, whilst Gillies and Willig (1997) comment on the “deterministic and disempowering” (p. 285) implications of the discourse of addiction, Chapter 7 of this thesis detailed how the repertoire of addiction proved to be useful for a number of participants in my focus groups. The utility of this repertoire was illustrated by examining how variations in construction allowed speakers to achieve different functions during the focus groups. Unfortunately, Gillies and Willig (1997) did not examine changes in the construction of smoking in any depth, which could explain their characterisation of the discourse of addiction as “deterministic and disempowering”. Thus, whilst it has been previously argued that certain constructions can constrain people and limit their behavioural options, this study suggests that it may be more fruitful to view repertoires as discursive resources that
speakers can use to position themselves in various ways, though not necessarily indefinitely.

The most basic and recurring motive behind variations in construction observed as part of this study was impression management, “to create a favorable impression of oneself” (Billig, 1987 p. 230). By and large this is not a novel finding. Long ago Baruch (1981) for example argued that interviews can be viewed as “a vehicle for making the [respondents] appear rational and sensible… respondents attend to the issue of their appearance as moral persons” (p. 275-276). The same could be said for focus groups. More recently, Rapley (2001a) writes that “one of those ‘social functions of talk’ is that research interviewees can be concerned to produce themselves, in and through talk, in a ‘favourable light’, a *morally adequate* light” (p. 308 emphasis in original). In the same vein, Benford and Gough (2006) note regarding the participants in their study that there was “a concerted effort by the women to establish themselves *as good people*” (p. 434, my emphasis). Similarly Rolfe et al. (2009) noted that the women “move(d) between these different constructions of drink, in order to protect their moral status, and to present themselves as ‘good women’ as well as women who drink” (p. 329).

The issue of impression management in this and similar studies arguably stems from the intertwining of concepts of health and morality. The current climate in the West is such that, as Benford and Gough (2006) point out, good health is associated with a good moral character. Thus, “to reject or transgress advice on healthy living, for example to smoke or drink alcohol to excess, is to risk a stigmatized identity” (Benford & Gough, 2006 p. 428). The “challenge”, if one could call it that, for participants was to present themselves as drinkers as well as
moral persons, in the face of questions about personal levels of consumption, including excess.

Having noted the prevalence of and stake associated with impression management, it is important to acknowledge that Billig (1987) argues that it may be “too simple” to ascribe a sole motive, to “promote favourable impressions”, to participants’ talk. He proposes that “there is always, to use an old-fashioned phrase, a ‘spirit of contradiction’. These two spirits, that of accord and that of contradiction, can pull in opposing directions” (Billig, 1987, p. 233). Although this is a good point, there appeared to be no readily identifiable evidence of the spirit of contradiction in the focus groups I conducted. This may have been due to any number of debatable reasons. Without getting bogged down in possible hypothetical explanations, the point is that the main motive behind variations in constructions of DTI appeared to be impression management.

Whilst the identification of impression management as the motive behind variations in construction may not be newsworthy, the way morally favourable accounting was accomplished arguably is. This was explicated in detail in Chapters 5 to 7. In those chapters it was argued that the three interpretative repertoires identified in this study proved to be only a small part of a larger number of strategies employed by speakers to present themselves in a favourable light. Speakers generally employed a number of other recurring rhetorical devices across these repertoires. The most common included: the positioning of DTI as normative through footing shifts and in particular the use of second person (“you”), the construction of control (whether over alcohol consumption or some other aspect of behaviour), and the portrayal of DTI as infrequent or occasional.
The use of these general rhetorical devices simultaneously and in conjunction with the interpretative repertoires contributed to the working up of favourable impressions of the speakers. However, over and above impression management, the use of the interpretative repertoires allowed speakers to achieve broader goals. In particular, the repertories functioned as resources that facilitated speakers’ management of the “essential tensions” (Mazeland & ten Have, 1996 p. 87) in focus group interviews. That is, the repertoires allowed participants to construct personal experiences within a focus group setting both in response to facilitator questions and other participants’ queries. These facilitated the speakers’ management of the interaction at hand (i.e. answering questions, questioning others, rebutting criticism etc…) whilst simultaneously contributing to a positive self-presentation- even when consumption was constructed as addiction.

8.4. The Acceptability of DTI

One common underlying assumption was consistently found across the three separate repertoires. As previously noted, much of the focus group talk was based on the implicit and unquestioned assumption of the acceptability of occasional DTI, in particular contexts. That is, the level of consumption per se implicit in DTI did not appear to pose any problems for speakers. When episodes of DTI were questioned, problematised or called into account, it was usually on grounds of motivation or repeated occurrence, not volume of consumption. A similar pattern of accounting (or rather, lack of) was also noted by Abrahamson (2006) who conducted focus groups with 18 year olds living in Stockholm. In relation to the accounts proffered by the women in her study, she noted that with one exception, “intoxication (did) not call
for a special explanation” (p. 11). That is, the women in her study did not account for their intoxication by providing reasons or excuses for such behaviour. In fact, women were often more likely to explain why they did not drink in certain situations.

Despite this similarity in the treatment of intoxication as acceptable, or not in need of explanation, that is not to say that all young people are likely to talk about intoxication in this manner in different situations. Indeed, in an earlier Swedish study, this time with drinkers aged between 18 and 25 years, Abrahamson (2004) had previously noted that most speakers were careful to excuse personal high levels of consumption by providing extenuating personal circumstances. She concluded that “the moral conveyed by the stories is that those who drink too much risk being regarded as morally questionable in our culture” (p.63). This observation of course contrasts with her later (2006) findings, which are more in tune with the analysis reported in this current study. Given that both of Abrahamson’s studies were conducted in Sweden it is unlikely that the difference in the treatment of intoxication between this current study and her (2004) study is due to cultural differences.

Indeed one could speculate that it is more likely that the different treatment of intoxication in this current and Abrahamson’s (2006) study, when compared to Abrahamson’s (2004) study, might be due to something relating to each research encounter itself. This includes differences in facilitator questions or differences in what Potter and Hepburn (2005 p. 281) call the “set up” of the research, such as how and for what purposes participants were recruited. Unfortunately this speculation cannot be further investigated since, unlike the current study, Abrahamson does not analyse facilitator questions nor provide the detailed overview of the research set up
that Potter and Hepburn (2005) recommend. Nevertheless, regardless of the reason for the difference, it is safe to say that young people, or even people in general, are likely to talk about intoxication in different manners in different contexts. Thus it would be useful to investigate more varied contexts of talk, including natural occurring conversations for example, to determine what conditions facilitate acceptance of intoxication on the one hand, and its problematisation on the other.

8.5. Generalisability

Despite the longstanding association of generalisations with quantitative research, Goodman (2008) notes that “interpretative repertoires are viewed as generalizable “linguistic resources” that are shared within a society to be used to accomplish social actions… it is in the very nature of such patterns that they are generalizable” (p. 267). Indeed, the similarities between the three repertoires identified in this study, and the previously identified discourses reviewed in the preceding three chapters, would suggest that the repertoires of recreation, self-therapy and addiction are not limited to the particular group of participants involved in this study.

Certainly, other researchers’ independent identification of societal messages that are consistent with the interpretative repertoires identified in this study could be interpreted as lending support to the validity of this study. After all, previous researchers like Widdicombe (1993) for example, have argued that the discursive resources identified in a research study may be regarded as “culturally available resources” (pg. 96) which speakers draw on in a research setting. As Rapley (2001b) eloquently notes in relation to interviews:
Interviewees’ drugs-talk speaks to and emerges from the wider strategies and repertoires available to, and used by, all people. A focus on drugs-interview-talk as locally accomplished does not deny that interviewees drugs-talk is reflexively situated in the wider cultural arena” (p. 279 emphasis in original).

Guise and Gill (2007) have argued that discursive resources identified in research contexts can be assumed to have a currency beyond that setting. This suggests that, the repertoires identified in this study may be understood as three possible constructions of DTI which are contingent on the local interactional context. Clearly, there may be other constructions that might be used in different contexts or even in similar focus group contexts by different speakers. A fourth repertoire was indeed tentatively identified in Chapter 7. Nevertheless, without entering into the yet unresolved “research contexts are inherently different from real life situations” debate, it is worth noting that there is evidence to support the view of the repertoires as widely available discursive resources. In particular, the fact that similar interpretative repertoires were used by different people in other studies, from female Scottish undergraduates (Guise & Gill, 2007), to self-professed chocoholics (Benford & Gough, 2006), strongly suggests that the repertoires I have examined are not restricted to the speakers producing them.

In addition to the identification of similar manners of speaking in other interview and focus group research, similar discourses or repertoires have also been identified in a number of different settings. For example, similar constructions have been identified in a study of discourses and messages about substance use emerging from Australian media, mentioned in Chapter 2 (Bright et al., 2008). In particular, the recreation repertoire identified here bears some resemblance to what Bright and colleagues (2008) label the economic discourse. The latter frames alcohol as a
commodity and drinkers as active consumers who make consumption decisions. In the same manner, focus group speakers employing the recreation repertoire often framed alcohol as a commodity that they consumed to specific ends, namely recreation. Recall for example Mark from Excerpt 5.2, who talks about planning to get smashed when planning to go out in order to avoid boredom. Alcohol was positioned as a commodity also within the repertoire of self-therapy. This is perhaps best exemplified in the first excerpt of Chapter 6, where DTI is collectively positioned as a consumption decision in order to relieve work related stress. Elements of the economic discourse are available within both the recreation and self-therapy repertoires. Moreover, the repertoire of addiction is similar to what Bright and colleagues (2008) label the medical discourse, which was said to encapsulate the disease theory of addiction.

The identification of similar repertories or discourses outside of the focus group setting, in more “natural” conditions (cf Chapter 3, Section 1.1), bears testament to a wider availability of the repertoires illustrated in this study. Indeed Bright and colleagues’ (2008) study is founded on “the assumption that the media’s presentation of information will necessarily be integrated with those discursive frameworks that are dominant within society” (p. 146). Likewise it could be argued that the focus group speakers’ construction of DTI will necessarily be integrated with those discursive frameworks that are dominant within society.

According to Goodman (2008), in order to claim generalisability an analyst must show a strategy working in a range of different contexts. Although such an exercise did not fall within the scope of this research, it is clear, through comparisons with other research, that similar discourses or constructions to the
interpretative repertoires identified here have been reported in other studies. What is perhaps most striking is the identification of similar discourses used to talk about practices other than drinking, such as smoking (Fry et al., 2008; Gillies, 1999; Gilles & Willig, 1997), other drug use (Brain et al., 2000; Davies, 1997a, 1997b), chocolate consumption (Benford & Gough, 2006), as well as dieting and eating (Brooks, 2009).

The similarity of constructions of DTI, with constructions of other types of behaviour noted by previous research, would indicate that the repertoires identified here may be part of much more widely applicable cultural resources for the construction of a number of “risky” practices. Note the similarities between the repertoire of recreation and the Western moral philosophy of hedonism which could arguably be used to justify just about any type of behaviour under the banner “if it feels good do it”. Note furthermore the similarities between the self-therapy repertoire and the concept of retail therapy. Similarly, the concept of addiction is nowadays often called on to explain a wide range of non drug-related behaviours ranging from sex, to gambling and chocolate consumption. This is a move that Peele (1995) called “the diseasing of America”, a charge that arguably also applies to other Western countries, including Australia. Evidently there may be links between similar constructions of very different behaviour. That is, it appears that similar constructions may be used to talk about very different behaviour that may be somehow perceived as risky. This observation is particularly significant since, to my knowledge, there has been as yet no attempt to delve into a comprehensive discursive study of the construction of risky practices. As such, it opens the way to a new avenue of research.
Investigation of the similarities and differences of discursive construction between different “risky” behaviours would provide a useful avenue for further research. It would constitute a novel contribution to the field of health risk behaviour research, providing a different perspective on what are traditionally regarded as “self-serving cognitive strategies” (Gerrard, Gibbons, Reis-Bergan & Russell, 2000) used to cope with what is usually defined as an inconsistency between risky behaviour and positive self-perceptions. Such a novel approach could encompass the investigation of the construction of health risk behaviours across different contexts in order to more firmly establish the cross currency of the concepts analysed in this study.

8.6. Possible Limitations

One of the limitations of this study, which Wiggins and Potter (2008) point out as a limitation of research on interpretative repertories in general, is that it cannot determine “whether the structuring of repertoires is a consequence of preformed conceptual organizations or a by-product of the pragmatic organization of practices” (p. 75). Nevertheless, the inability to resolve this question arguably does not detract from the significance of the identification and illustration of the deployment and use of the three interpretative repertories outlined in the current research.

Another criticism aimed at research on discourses and repertoires is that this offers “an impoverished view of human conduct” (Wooffitt, 2005 p. 179). In particular, Wooffitt (2005) argues that since research on repertoires usually only ever identifies two repertoires, it cannot do justice to the complexity of the
organisation of social interaction, which has been consistently noted in conversation analytic studies. In reply, the current study did not only identify two repertoires, but three, along with the tentative proposal of a fourth repertoire. Moreover, when the double edged nature of each repertoire is considered it could be argued that this study actually discussed six different constructions. Additionally, Wooffitt’s (2005) criticism does not consider the possibility that studies such as the current one do not set out to account for the myriad of complexities of the organisation of social interaction, in the way conversation analytic studies do. Indeed given the volume of data analysed such an endeavour would have been impossible in one lifetime. This was discussed in Chapter 3, Section 3.3. Essentially the issue of comprehensiveness boils down to a question of perspective. Just because the current study did not and could not account for all the intricacies of the analysed interaction does not mean it should be discounted as without merit.

A further issue worthy of note in relation to any social constructionist research generally is that of reflexivity (Edwards & Potter, 1992). Reflexivity encourages the consideration of any text, including this one, as a version that selectively constructs coherence and an objective out-there reality (Potter, 2004b). Essentially it encompasses an acknowledgement that an analyst’s own work is not immune from the social psychological processes being studied therein (Potter & Wetherell, 1987). The approach taken here, suggested by Potter and Wetherell (1987) as the most practical way of dealing with this issue, is to acknowledge that my analytic and interpretative accounts are in fact, discursive constructions, and to simply “get on with it” without getting paralysed by the infinite regresses possible. A balance is required “between recognising our qualitative analyses as
constructed…. and – temporarily at least – settling for a version of analysis with
which we are satisfied, which we think makes a valid theoretical and/or political
point” (Gough, 2003a p.31). Sulkunen (2002) argues that facing the reflexive
dilemma, researchers have two options. To either argue for certain discourses over
others, or, instead of committing to any one discourse, take discourses as objects of
reflection to study their presuppositions and practical implications. For the purposes
of this thesis I have taken the latter approach.

As discussed in the previous section in relation to generalisability, it is
assumed that what takes place in interviews resembles what takes place outside. Yet

in principle we have to accept that this assumption may be quite
unfounded or that the resemblance between participants’ accounting
practices in these two kinds of context may be so slight as to prevent
any useful comparison (Potter & Mulkay, 1985 p. 269).

Indeed, although they go on to recognise that the interview situation is
probably not culturally unique, Potter and Mulkay (1985) also note that “accounting
systems tend to be deployed differentially from one social context to another” (p.
268). The present research only investigated talk generated within a focus group
setting. This was the result of a decision that, as the first in-depth foray into binge
drinking from a discursive perspective, in-depth analytical attention should be
directed at one context, before moving on to the study of and comparison with
others. Nevertheless, I have drawn links between research conducted in different
settings. Future research would do well to investigate a variety of settings where
people might discuss DTI, such as social networking sites, online discussion forums,
media publications and naturally occurring conversations.
Arguably, in a focus group context, positive self-presentation could be more readily expected to dominate talk than in certain other settings, such as everyday conversations with friends for example, where a “spirit of contradiction” (Billig, 1987) might manifest more frequently. This may result in some differences in accounting practices between different contexts, however, that is not to say that impression management might not be as relevant in other settings.

A further possible limitation that may be worthy of note relates to what is often viewed as the anti-realist perspective of reality at the centre of DP, mentioned in Chapter 2 Section 6.1. In relation to this study, the topic of which might be mistakenly understood to be intoxication, a critic of DP might argue that my analysis notably excludes any consideration of the physiology of intoxication. However, since the object of study of this research was talk, it is argued that such a consideration would have been only tangentially relevant. Granted, this study cannot shed light on the effects of intoxication, but it never set out to do so, and quite frankly, there is a plethora of studies that already have. The originality of this research lies in the explication of broad discursive constructions of intoxication based on the minutiae of talk. Considerations of the effects of intoxication were understandably beyond its scope.

8.7. Implications

The observed prevalence of positive self-presentation in this study suggests a possible answer to the question posed by Workman (2001), regarding the binge drinking messages that circulate among youth, and “and how those messages are more effective than our public health messages” (pg. 428). Essentially it could be
argued that messages about binge drinking are more effective than public health messages as they preserve the moral status of the drinker. Public health messages about binge drinking usually construct heavy consumption in a negative manner, with negative implications for the drinker as irresponsible or risk taking. Youth who tend to construct themselves as moral drinkers may thus not be engaged by such constructions. This observation has also been made by Plumridge and Chetwynd (1998) in relation to injecting drug users. They contend that “the protection of the moral status of the recipient is a key factor… in the uptake of health promotion messages” (p. 723). People tend to ignore messages that proscribe their normal behaviour or present it in a negative light (O'Reilly et al., 2002).

Additionally, any messages that exist among youth may be more effective than public health messages because the messages among youth are based on largely implicit, unquestioned assumptions. For example, the constructions of intoxication as recreation and self-therapy, discussed in Chapters 5 and 6 respectively, are based on the assumption of the cultural appropriateness of intoxication in certain social settings, at certain times. This was taken for granted during the focus groups. Perhaps then, messages based on implicit, taken for granted assumptions may be more effective than public health messages based on “research” or “science” precisely because the former are implicitly accepted and thus unquestioned, whilst the latter may be more easily criticised as removed from real life experience.

Without delving any further into the convoluted question of why some messages might be more prevalent than others, at least in certain settings, it is worth noting that criticism of alcohol consumption was always somehow deflected during the focus groups. This might explain why the attack on binge drinking in the form of
demonising campaigns might not have been as successful as first imagined. Defending one’s consumption from criticism was common within the focus group context; the same may apply in more everyday settings. Perhaps then, instead of trying to change young people’s positive constructions of DTI by presenting a more negative picture, it may be more fruitful to create a space for a national dialogue on alcohol consumption and the entertainment of alternative constructions of DTI.

Certainly one of the most striking properties of the identified repertoires was their difference from the governmental, public health, and academic constructions of binge drinking discussed in Chapter 2. With the exception of the addiction repertoire, which resembles medical constructions of alcoholism and alcohol addiction, the two most used repertoires, recreation and self-therapy, constitute considerable departures from the previously discussed “expert” constructions of DTI and binge drinking. The main differences surround the importance of standard drinks and the construction of harm.

Standard drinks were hardly ever mentioned during the focus groups, although there were exceptions. As previously mentioned, what was observed consistently across the repertoires was an underlying implicit assumption of the acceptability of occasional DTI regardless of number of drinks consumed, at least in certain contexts. Thus, number of drinks consumed, either standard and otherwise, was often treated as irrelevant. Certainly this is at least partly due to the design of the facilitator questions which tended to focus on occasions and stories rather than number of drinks. Nevertheless, the very different construction of DTI in the focus groups when compared to the standard drink definitions of academics and
professionals is suggestive of the possibility of different treatments of intoxication in lay versus professional circles. This possibility has been previously discussed.

McMahon, McAlaney and Edgar (2007) as well as Coleman and Cater (2007) have highlighted differences in perceptions between the public and government understandings of binge drinking. What is clear is that different definitions reflect different agendas and priorities; however these differences are not necessarily always recognised. Often the term binge drinking is used by public health authorities in a manner that implies a common understanding (Berridge, Thom & Herring, 2007). The problem is that without a shared understanding, it will be difficult to design effective prevention measures.

The other main difference between the identified repertoires and professional as well as expert perspectives on binge drinking and DTI is the treatment of harm. As noted by previous studies (for example Engineer et al, 2003; Sheehan & Ridge, 2001; Workman, 2001) harm was rarely mentioned during the focus group discussions. When harm was mentioned it was usually in the context of the repertoire of addiction. The only exception is outlined in Excerpt 7.4 where Jim constructs significant harm as resulting from a past pattern of consumption. As Workman (2001) noted in relation to his data, the majority of the accounts of DTI constructed during the focus groups effectively ruled out alternative possibilities of construction, including the one popular among experts which focuses on harm.

Given these differences it is not surprising to note that researchers have raised concerns about the “credibility gulf” between professional definitions of binge drinking, including recommendations of safe consumption, and actual levels of sessional alcohol consumption by young people (Martinic & Measham, 2008 p. 6).
Such disparity is reflected in the differences in construction of DTI between the young people involved in this study and the expert definitions of binge drinking discussed in Chapter 2. Again, these differences point to the need for a national discussion on alcohol and the consideration of alternative constructions.
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Appendix A: Six Month Research Proposal
Representations of Binge Drinking Among Northern Territorian Youth

Research Proposal

Ester Mancini

Charles Darwin University

Faculty of Education and Health Sciences

Supervisor: Prof. Graham Tyson
1. Field of research code

380105 Social and Community Psychology

2. Thesis Title

Representations of Binge Drinking Among Northern Territorian Youth.

3. Description of the issues to be addressed

If each society has its own preferred drug (Gossop, 2000), Australia’s is undoubtedly alcohol, a drug consumed by 82.4% of the population (AIHW, 2002a). Alcohol has often been described as integral to Australia’s history, reputation and image both on a local and international level (Shanahan, Wilkins & Hurt, 2002). Congruently, research consistently confirms that drinking is a clear part of Australian culture, frequently enmeshed in social activities (Davey, 1994).

Although a large proportion of the population enjoys alcohol without any negative consequences, it has been estimated that as much as 67% of the alcohol consumed in Australia comprises drinking patterns which place drinkers at risk for acute or chronic harm (Stockwell, Heale, Chikritzhs, Dietze & Catalano, 2002). For men and women aged 18-24, the corresponding figures are 93% and 82.3% respectively, making this the most at risk population (Stockwell et al., 2002). These national figures hide considerable regional variation. The top end of Australia, the Northern Territory (NT), has a disproportionately high level of consumption compared to other states and territories, with a per capita consumption figure 1.5 times the national average (Catalano et al., 2002). The proportion of the population that drinks at risky levels for both short- and long-term harm is also higher in the NT, than in the rest of Australia (Renouf, & Townsend, 2004). Patterns of alcohol
consumption classified as risky or high risk for harm by the National Health and Medical Research Council have become the norm, especially among 18 to 24 year olds, prompting serious concern among health professionals about heavy or binge drinking (Chikritzhs et al. 2003; Sheehan & Ridge, 2001).

Unfortunately, the public does not share this concern. In Australia and in the NT in particular, there appears to be a lack of public recognition that alcohol constitutes a serious problem in this society. A national survey revealed that the majority of respondents consider heroin above alcohol as the drug of most concern to the general community, although in reality, alcohol is one of the greatest causes of drug-related deaths and hospitalisation in Australia, second only to tobacco (AIHW, 2002b). Moreover, despite data showing the high incident of hazardous drinking amongst youth in Australia, young Australians often do not regard drinking as a problem (Broadbent, 1994).

It has recently been argued that health educators and researchers may be contributing to the failure of people to identify drinking as problematic by using language outside the interpretive schemes of laymen (Lederman, Stewart, Goodhart & Laitman, 2003). Traditionally, professional definitions of binge drinking have been based on the relationship between a certain level of alcohol and corresponding harm (Martinic, 1999). In contrast to professional discourse, a recent study revealed that young Australian women rarely perceive harm as an outcome of consumption (Sheehan & Ridge, 2001). Clearly, professional definitions of binge drinking are not congruent with people’s perceptions, creating a widening gap between efforts to promote safe drinking practices and the target audience’s reception and
understanding of these. This issue warrants focussed empirical attention if prevention messages are to be effective, or at least, clearly understood.

Little, if anything at all, is currently known regarding how binge drinking is defined by the public in the NT, the part of Australia where this pattern of consumption appears the most prominent. In particular, it is unclear how young drinkers, who according to professional definitions often engage in binge-type patterns of consumption, perceive the distinction between normative and binge drinking. Thus, the primary aim of the proposed study is to address this gap in the research and examine how binge drinking is socially represented in the Territory among young people.

Within the social sciences, there are two largely independent strands of research which have sought to gain a better understanding of the way the public perceives and represents social objects: the implicit theory approach and social representation theory. Whilst the former focuses exclusively on mental representations of phenomena, the latter has also sought to examine the way knowledge is shared within a society (Green, Muncer, Heffernan & McManus, 2003; Moscovici & Hewstone, 1983). In some ways the latter approach resembles the notions of attitude, opinion and stereotype, yet it goes beyond individual concepts to consider a mix of all of these as they apply within a framework of common-sense or implicit theories (Moscovici & Hewstone, 1983). Despite developing largely independently of each other, these fields of research are not incompatible. The proposed study is informed by both traditions, to allow for a broader view of the way binge drinking is represented by young people in the NT.
4. Description of the importance of these issues

Despite efforts to reduce binge drinking among young people in Australia, the proportion of the population which engages in this activity remains high (Jonas, Dobson & Brown, 2000). The failure of preventive messages to substantially reduce excessive consumption may be partly due to a failure to present harm in terms resounding with the target audience (Calafat et al., 1998). Empirical evidence suggests that young people speak of consumption in terms of consequences such as impaired judgment and illness, rather than standard drinks usually discussed by professionals and publicised in media campaigns (Goodhart, Lederman, Stewart & Laitman, 2003). The use of concepts which the public does not identify with may provide an excuse for drinkers to dismiss binge-drinking as something that “happens to other people” (Goodhart et al., 2003).

In order to overcome this problem it is important to first gain an in-depth understanding of the way young people conceptualise and speak of binge drinking (Goodhart et al., 2003). An understanding of the way binging is perceived is fundamental to the effective prevention of related problems and the efficacy of treatment services available (Ellickson, McGuigan, Adams, Bell & Hays, 1996). The proposed study will examine the way binge drinking is represented in society, with a specific focus on the population most at risk of engagement in this pattern of drinking (i.e. 18 to 24 year olds).

The importance of public perceptions is reflected in a recent increase in empirical interest on this issue (Luke, Ribisl, Walton & Davidson, 2002). Laypersons’ understanding of different concepts have been referred to with different terms by various researchers as social representations, implicit theories, lay theories,
lay beliefs, lay conceptions, lay perspectives, and health concepts (Angermeyer & Matschinger, 1999; Furnham, 1995; Furnham & Henderson, 1983; Furnham, Pereira & Rawles, 2001; Furnham & Wardley, 1990; Huon, Brown & Morris, 1988; Tyson & Hubert, 2000). This growing interest in the way ordinary people represent different concepts lies in the influence of cognition on behaviour. Beliefs may affect a person’s self concept and/or the way they interpret their own behaviour (Furnham, 1988). Moreover, cultural conceptions carry implications for help seeking, stereotyping, and the kind of services advocated and ‘treatments’ available for people with alcohol related problems (Link, Phelan, Bresnahan, Stueve & Pescosolido, 1999).

Previous work in this field of research has revealed interesting findings. For example, American college students tend to believe that drinking problems are confined to those who drink everyday, suggesting that binging may not be classified as problematic unless it occurs on a daily basis (Lederman et al., 2003). Other studies have found that people’s definitions of binge or problematic drinking vary systematically according to their own levels of consumption (Abrahamson, 2003; Shanahan et al., 2002; Wechsler & Kuo, 2000). Higher levels of personal alcohol consumption have been linked to a tendency to make qualitative distinctions between heavy drinkers and alcoholics, based on the presence or absence of inner control, indicating that heavy drinkers who believe to be in control are able to view their own drinking as unproblematic (Abrahamson, 2003). Similar findings were reported by a recent national study of American college students, which indicates that participants define binge drinking on the basis of how much they individually drink (Wechsler & Kuo, 2000). Abstainers considered five drinks in a row for men...
and four for women as binge drinking, whilst frequent drinkers reported eight drinks in a row for men and six for women as a binge. Similar findings emerged in Australia, in a study where drinkers reported any drinking above their own to be high-risk (Shanahan et al., 2002).

There is a striking lack of research into the public’s perception of binge drinking nation-wide. Moreover, although there are a number of studies examining implicit perceptions of alcohol-related problems such as alcohol dependence, alcoholism, addiction and high risk drinking (See for example, Furnham & Lowick, 1984a; Kauffman & Silver, 1997; Luke et al., 2002; Shanahan et al., 2002), research conducted in Australia appears to almost routinely neglect the northern part of the country. Additionally, there is little qualitative data gathered in the NT on alcohol-related concepts. This is surprising given the salience of this problem in the Territory, which undoubtedly warrants close qualitative and quantitative empirical attention.

Clearly it is of interest, from both theoretical and pragmatic perspectives, to closely investigate popular perceptions of binge drinking amongst a sample of the population with the highest level of alcohol consumption in the nation (McMillan & Conner, 2002). In combining the social representation and implicit theories framework, it is anticipated that the present study will provide a more holistic view than that afforded by earlier studies. The proposed research will address a combination of values, attitudes, stereotypes, beliefs, theories, perceptions and attributions, as well as the relationship between these, transcending the segmentation of two traditionally independent approaches.
5. Description of the research methods

The implicit theories approach traditionally relies almost exclusively on questionnaires and quantitative methodology. On the other hand, a wide range of methods have been used in the study of social representations, including qualitative anthropological methods, interviews, focus groups and content analysis. This research will combine the traditional methodology of both traditions through the inclusion of focus group interviews and questionnaires. The methods proposed reflect an attempt to triangulate data by accessing different perspectives, an important consideration particularly stressed by the social representations tradition (Green et al., 2003).

The proposed procedure aims to tap into the representations operating at the microgenetic levels through conversation, and to further explore these with the use of questionnaires (Foster, 2001). The proposed use of focus groups with flexible, free response frameworks will gather rich data on thoughts and perceptions. This methodology enables the examination of representations independent of the researchers’ manipulations, allowing for the possible discovery of previously unrecognised beliefs. It also has the added advantage of preserving the acknowledged importance of language in representations (Furnham & Lowick, 1984b; Hewstone, Jaspars & Lalljee, 1982). Following analysis of the gathered qualitative data, the use of questionnaires will test the generalisability of initial findings among a more representative sample.

Stage 1.

Focus group interviews will be conducted during the first stage of the research in order to explore in depth the representation of binge drinking amongst 18
to 24 year olds. Participants will be recruited through word-of-mouth and posters positioned in the toilets of various pubs and clubs around Darwin, advertising the chance to contribute to research by sitting down in a relaxed atmosphere and having a chat about drinking. The posters will also offer refreshments (i.e. non-alcoholic drinks and nibbles such as cake and chips) on participation and provide the contact number of the researcher. In the event of an inadequate response, the printing of the same advertisement in the Territory’s daily newspaper (i.e. the NT News) will be considered.

It is acknowledged that the sample recruited through this method may not be representative of young people between the ages of 18 and 24, and is likely to exclude those who do not frequent the aforementioned venues. However, the research is specifically concerned with the representation of binge drinking common among young drinkers, who are the most likely to be engaging in such a drinking pattern. Nightclubs, pubs and clubs were chosen as the most suitable places from where to recruit participants, since, in the NT, these public venues are the drinking locations preferred by young people between the ages of 18 and 24 (O’Reilly & Townsend, 1999).

Respondents will be screened by telephone to determine their eligibility for the study. Men and women between the ages of 18 and 24, who report being current drinkers, will be made aware of the purpose and scope of the research, as well as what it would entail should they decide to participate. They will be assured of the confidentiality of their comments and informed that participation is voluntary. Should they decide to contribute, participants will be informed of the venue and time that the focus group will take place and asked of their availability. In accordance
with suggestions on how to run successful focus groups (Kreuger, 1994), each session will consist of 5 – 7 same-sex participants.

Perceptions of alcohol-related phenomena are socially constructed in a socially meaningful context (Abrahamson, 2004). Consequently, in order to examine these representations as they naturally occur, it is proposed that the focus groups be conducted informally in a familiar setting such as a café/pub. This allows participants to interact socially in a familiar environment, in a manner consistent with their common personal experiences. This aspect of the research is considered particularly important since it appears that venues chosen for focus group discussions may influence both mood and group expectations (Sheehan & Ridge, 2001). The refreshments offered are a further effort to recreate the setting within which participants would generally interact. The deliberate sharing of food or drink has been noted to result in a relaxed, informal atmosphere (Sheehan & Ridge, 2001).

Prior to the commencement of discussion, participants will be provided with a plain English statement containing detailed information about the study, procedures and their rights as participants. They will also be asked to acknowledge their consent to participate by reading and signing a consent form. Participants will then be required to individually complete a short, confidential questionnaire on standard demographics (gender, age, ethnicity, marital status, education, employment and household income) and alcohol use (usual drinking habits, usual number of drinks per occasion, level of intoxication after usual number of drinks, largest number of drinks ever consumed and frequency of alcohol consumption).

Group discussion will commence following the completion of the questionnaire. Given the researcher’s vested interest in the outcome of this study, the
involvement of an impartial and experienced discussion moderator is currently being
considered. The researcher would nevertheless attend all group sessions and take
detailed notes on factors such as non-verbal behaviour, which aid transcription and
recreation of group dynamics. The presence of two members of a research team
during focus group discussions has been highly recommended (Krueger, 1994).

Questions to be used by the moderator to stimulate discussion will be
formulated by the researcher, using established guidelines for the development of
focus group questions (Krueger, 1994). They will cover the following themes:
normative patterns of drinking among young people and binge drinking. In relation
to the latter, questions will explore definitions, perceptions of aetiology and
underlying motivations as well as typical episodes of binging. All sessions will be
audio taped for further analysis.

At the completion of each session, participants who have enjoyed being part
of the research will be invited to encourage their friends to participate. Should they
accept to do this, they will be given business cards to pass on to their friends,
detailing the researcher’s contact details and purpose of the research. This attempt to
recruit more participants follows suggestions that, in qualitative studies, most
participants are usually recruited by peers who have already contributed to the
research and enjoyed the process (C. Moon, personal communication, August 24,
2004). This procedure presents the added advantage of facilitating contact with the
researcher by focus group participants who may be interested in the outcome or
progress of the research.

Focus group transcripts will be assessed for common themes using the
NUD*IST program which determines word distribution patterns in a text corpus
(Gaskell, 2001). This process is commonly used with qualitative data. Representative quotes will then be extracted from the transcripts for each theme.

**Stage 2.**

The second stage of this research involves the distribution of questionnaires to a sample of the population between the ages of 18 and 24 years of age. Potential participants will be recruited through various means including random digit dialling and by approach in a public space.

Persons contacted by telephone will be asked a few screening questions to determine whether they, or anyone else in the household, is part of the target group. In the event that a potential participant is located, they will be explained the purpose of the research and invited to participate. In the event that they are willing to do so they will be posted a survey package.

Other participants will be approached on the street, informed of the study and invited to participate either by filling out a questionnaire on the spot, or providing a postal address for a survey package to be mailed to them. All posted surveys will be followed up after two weeks with a reminder postcard encouraging the return of the survey.

The survey packages will include a plain English statement, the questionnaire and a stamped and addressed return envelope. Enclosed instructions will invite recipients to contribute to local research by completing and posting the enclosed questionnaire.

Questions that will comprise the survey will be decided on the basis of the results from the focus groups and will be designed to encourage participants to
describe binge drinking in their own words, without the researcher defining relevant
care concepts a priori. A small pilot study will be carried out with first year psychology
students to ensure that questions are adequate and understandable.

Quantitative analyses of collected data will endeavour to examine
relationships between reported definitions of binge drinking, perceived underlying
motivations and aetiology, as well as patterns of consumption and perceptions of
vulnerability to alcohol-related problems. The methods of statistical analysis to be
employed will include multivariate analyses of variance and multiple regression.

6. Outline of the timing for various stages of research

Application for ethics approval for this research will be submitted before the
next University Human Research Ethics Committee meeting, by the required date of
the 22nd of September 2004.

Data collection for this project will commence with the focus groups which
will be carried out during the month of February 2005. Following the analysis of this
data and the preparation of a questionnaire, the quantitative part of this research is
expected to commence in February 2006, allowing 8 weeks for the distribution and
return of questionnaires. Following the quantitative analysis of this survey data, a
decision will be made as to whether more information is needed and if a further
study is required.

7. Statement of ethical and/or legal clearances obtained or required

Ethical clearance is required and will be sought from the University Human
Research Ethics Committee at its next meeting.
Permission will be required from pubs and clubs to place posters in their lavatories advertising the chance for 18 to 24 year olds to be involved in local research. In addition, Duck’s Nuts, a popular pub located in the centre of Darwin, will be approached to obtain permission to conduct focus groups on its premises.

Consent from individuals participating in focus groups will be obtained in writing at the beginning of each session.

8. Identification of issues of intellectual ownership

There are no envisaged restrictions on the free circulation of research results.

9. Non-English languages

Not applicable.

10. Outline of the resources required for the project

In addition to the minimum resources for higher degree research candidates (e.g. office space, computing facilities, interlibrary loans etc…) I will require the following:

- Design and execution (including colour printing) of posters (approximate number as yet unknown) advertising for participants during stage 1 of data collection. The design may be commissioned from Uniprint (the university’s graphics design company) at $60 per hour. This may be subsequently photocopied or printed in colour using university facilities located in the library at approximately $2.20 per A4 sheet of paper. Posters will have to be laminated to prevent damage, which costs approximately $3.30 per A4 sheet of paper when more than 10 copies are requested.
- Money to purchase refreshments for focus group participants (at $5 per person for approximately 28 people, i.e. $140).

- A high-quality digital recorder to record focus groups.

- Financial assistance for the production of 100 business cards with the researcher’s details and purpose of the research, to be distributed to interested focus group participants. These may be purchased from Uniprint for $40.

- Access to someone who is to transcribe the focus groups, including payment for their services.

- Access to NUD*IST software.

- Financial assistance to attend training using NUD*IST software, including airfares to training site, as there are no sessions available in the NT.

- Financial support to purchase approximately 1000 stamped envelopes (500 to mail questionnaire packages and 500 to include as the return envelopes).

- Financial support for conference travel and registration. This is likely to be required sometime after December 2005 and before the end of my candidature in March 2007.

11. **Identification of the source of other required funds (if applicable)**

A submission is currently being prepared to solicit funding from Carlton & United Breweries.
12. Bibliography of key references of the subject


Appendix B: Plain Language Statement
PLAIN LANGUAGE STATEMENT

Please read and retain for your information

PROJECT: Youth Perspectives on Drinking

CHIEF INVESTIGATOR: Ester Mancini (BPsychHons)

ASSOCIATE RESEARCHER: Dr Graham Tyson

PURPOSE OF THE STUDY:
The aim of this study is to understand the experience and views of drinking of young people. This research is part of the assessment for the completion of a Doctorate in Psychology.

BENEFITS OF THE STUDY:
This study will provide valuable information which may be used in the development of future health campaigns and intervention programs. The information gathered will help design ways to reduce alcohol-related harm among young people. It will also help provide accurate and understandable information on alcohol-related issues.

WHAT WOULD BE EXPECTED OF YOU?
If you decide to participate you will be invited to join 4 or 6 other people to have a chat about your views on drinking. At the end of the 2 hour discussion, you will be asked to answer some short questions about your drinking on a confidential sheet of paper. At the conclusion of the discussion you will receive a free movie pass as a token of appreciation for your participation.

DISCOMFORTS/ RISKS:
There are no anticipated risks associated with this study. However, should you experience any discomfort please leave the discussion and contact the chief researcher at the end of it, who will discuss with you any issues that may have arisen. Alternatively you may wish to contact Amity Community Services on 8981 8030 if you are concerned about your drinking.
CONFIDENTIALITY:

Please note that discussions will be audio taped. This is necessary to make analysis of discussions easier. Information obtained in this study will be treated in confidentiality, within legal limits (for example, by law any indication of child abuse has to be reported to the relevant authorities). The information you provide will be accessible solely to the chief and associate researchers, exclusively for the purpose of this study. Identifying information (e.g. names) will be removed during transcription so that no individual responses will be identifiable.

YOUR PARTICIPATION:

We would be grateful if you did participate in this study but you are free to refuse to do so. If you do decide to participate, you may choose not to answer some questions or withdraw from the research at any time without penalty. Whatever your decision on this matter, thank you for devoting some time to reading this statement, and considering its contents.

RESULTS OF THE STUDY:

Results will be communicated in the form of a report as part of the course requirements for a PhD, with copies available after March 2007. Requests should be directed to the chief researcher. If you wish to review a transcript of the discussion prior to this date, please contact the researcher to make arrangements for you to do so.

PERSONS TO CONTACT:

If you have any questions about the project, please contact the researcher, Ester Mancini on 8946 6547 or by email ester.mancini@edu.edu.au If you have any concerns about the procedures used or the researchers’ methods, contact Hemali Seneviratne, Executive Officer of the Charles Darwin University Human Ethics Committee on 8946 7064. Hemali, who is not connected with this project, can pass on any concerns to appropriate officers within the University.
Appendix C: Letter of Confirmation
Dear Bob,

Thank you for accepting my invitation to attend the focus group on drinking to be held next Monday, the 4th of June 2007. The focus group will be held in the Postgraduate Lounge (building 24, room 23) on the Casuarina campus of Charles Darwin University. *Feel free to bring any friends along!* Refreshments will be served at 4:45pm and the discussion will begin promptly at 5pm, to end by 7pm. At the conclusion of the discussion you will receive a buy one get one free movie pass as a token of appreciation for your participation.

Since I am talking to a limited number of people, the success and quality of our discussion is based on the cooperation of the people who attend. Your contribution is very important, and attendance at the session will help make the research a success.

As mentioned during our phone conversation, the discussion will focus on drinking among young people and I would like to get your experiences and stories related to this topic. For more information about the research, please see the
enclosed Plain Language Statement. Your experiences and thoughts will be very
important to the success of the study. Please note that this is strictly a research
project, and no sales or solicitations will be made.

If for some reasons you find yourself unable to attend or have any questions,
please call me to let me know as soon as possible. My office phone number is
8946 6547.

I thank you once more for your willingness to participate in the study. I look
forward to meeting you on Monday, June 4th.

Kind Regards,

Ester Peña
PhD Candidate (Psychology)

Wednesday, May 30, 2007
Appendix D: Consent Form
CONSENT FORM

I, .................................... of ..................................................

hereby consent participate in a study to be undertaken by Ester Pena, PhD student at Charles Darwin University.

I understand that the purpose of the research is to gain an understanding of the importance of alcohol in young people’s lives and the way they think about different patterns of drinking.

I acknowledge that:

- I have read the Plain Language Statement and I understand its contents
- I voluntarily and freely give my consent for participation in such study
- I voluntarily and freely give my consent for the discussion to be audio recorded
- If someone should mention my name during the discussion, this will be removed during transcription and my comments will be unidentifiable
- My name and address will be kept separately from the audio recording of the discussion
- Any information I provide will not be released in an identified form and will be treated in confidentiality, within legal limits (For example,
by law any indication of child abuse has to be reported to the relevant authorities)

- I understand that the information I provide will be used for research purposes and may be reported in scientific and academic journals

- I am free to leave at any time during the discussion and withdraw my consent, at which time my participation in the research will immediately cease

Signature:...........................................  Date: .................................
Appendix E: Facilitator Guide
FACILITATOR GUIDE

Introduction:

- Introduce topic: Drinking stories, Types of things you get up to
- Emphasise on personal experiences and as many different points of view as possible.
- No right or wrong answers.
- Mobile phones.
- Audio recording.
- Limits to confidentiality (e.g. mandatory reporting of child abuse, but not for example, DUI). “Members must not disclose information about criminal acts of a client unless there is an overriding legal obligation to do so or when failure to disclose may result in a clear risk to themselves or others”.
- Ground rules (brief mention)-
  - only person speaking at a time,
  - no side conversations,
  - everyone encourages everyone to participate,
  - no dominating….

Icebreaker:

Individual uninterrupted statement of autobiographical nature.

General Introductions.
Main Body:

Sessions to be divided into three 30-minute sections:

1. Patterns of drinking among young people.

   a. When and in what situations do you drink alcohol?

      i. Typical drinking episodes (or most recent)

   b. Possible differences in the amount of alcohol consumed in each situation.

Suggestions:

- When/where do you find yourself drinking the most?

- Have you had any experiences when drinking has gotten out of hand/ was too much? / (CAN drinking be too much?) /

- When does drinking become excessive, at what point, in what context (assuming that it does), for yourself and others?

- Describe first memories of drinking/first ever drink,

- What do you enjoy most about drinking?

- What do you least like about it?
2. Focus: High levels of consumption in a short time frame

The flow of discussion in the second 30 minutes is determined by what was said in the first section, so that if BINGE DRINKING (or binging) is mentioned, participants describe a pattern of high consumption in a short time.

Prompt for key information: Introduce concept Focus discussion on

of drinking a lot this particular

- typical episodes in one session / short pattern of drinking

- definitions, period of time Do not offer the words

- perceived DO NOT offer the Binging or Binge

long & short-term words Binge Drinking Drinking. Prompt for

key

consequences or Binging and prompt information.

for key information.

3. Narrow focus on Binge Drinking

Continue discussion as Introduce the topic of Introduce the topic of

above. Binging and discuss Binging and discus
Suggestion:

What are the first things that come to your mind when you hear the words “binge drinking”? What is it exactly? Are there any other names for it? What would be the best name for it?

Conclusion:

1. Wrap up discussion, thank participants for volunteering and honesty…

2. How do you feel about the discussion?

3. Ask whether they can provide friend’s details who may be interested in participating in a similar discussion.
Appendix F: NT News Story
Research student Ester Mancini wants to talk to young Territorians who have been drunk.

Does she expect a queue from Charles Darwin University to Pine Creek?

"No," she said. "I want to talk to young people and they are more interested in drinking than helping with research into drinking."

Ms Mancini, 22, is looking for volunteers aged between 18 and 24 to talk about their experiences with alcohol.

"I'm interested in getting a youth perspective on drinking since it seems to me that, sometimes, strategies proposed to help young people forget to take into account what actually goes on in the real world," she said.

"I'm interested to find out what young people themselves have to say about drinking and their experiences.

"Young people are often demonised and labelled as irresponsible because of how they drink.

"But not many of these 'experts' have ever bothered to ask them for their point of view."

"There is an increasing awareness among researchers that we need to hear the young people's side of the story."

"And that's what I want to do. That's what I wish to contribute to my field: the youth perspective."

Ms Mancini said she was looking for young people who have had at least one experience of being drunk.

Volunteers are being invited to share their drinking stories in a small group.

"All names and personal information will be kept confidential," said the PhD psychology student.

"They will be deleted once the information has been collated and won't appear in my research."

The first discussion group will be held from 5pm to 7pm at the Vodka Bar at Duck's Nuts, Darwin, on Tuesday, February 8. Those wishing to attend should telephone 8946 6847.

And, yes, Ms Mancini is shouting - soft drinks and a movie ticket.
Appendix G: Transcription Symbols
Transcription Symbols

*Taken and adapted from Jefferson, 2004b.*

[ A *left bracket* indicates the point of overlap onset.

] A *right bracket* indicates the point at which two overlapping utterances end, if they end simultaneously, or the point at which one of them ends in the course of another. It is also used to parse out segments of overlapping utterances.

= *Equal signs* indicate no break or gap.

*A pair of equal signs*, one at the end of one line and one at the beginning of a next, indicate no break between two lines.

The pair is also used as a transcript convenience when a single speaker’s talk is broken up in the transcript, but is actually through-produced by its speaker.

*A single equal sign* indicates no break in an ongoing piece of talk, where one might otherwise expect it, e.g. after a completed sentence.

(0.0) A number in parentheses indicates elapsed time by tenths of seconds.

(·) *A dot in parentheses* indicates a brief (± a tenth of a second) interval within or between utterances.

___ *Underscoring* indicates some form of stress, via pitch and/or amplitude. A short underscore indicates lighter stress than does a long underscore.
:: **Colons** indicate prolongation of the immediately prior sound. The longer the colon row, the longer the prolongation.

↑↓ **Vertical arrows** indicate shifts into especially high or low pitch.

,.? **Punctuation markers** are used to indicate ‘the usual’ intonation. These symbols usually occur at appropriate syntactical points, but occasionally there are such displays as the following:

A **Upper case** indicates especially lound sounds relative to the surrounding talk.

°a° **Degree signs** bracketing an utterance or utterance-part indicate that the words are softer than the surrounding talk.

- **A dash** indicates a cut off.

> < **Right/left carats** bracketing an utterance or utterance-part indicate that the bracketed material is speeded up, compared to the surrounding talk.

< > **Left/right carats** bracketing an utterance or utterance-part indicate that the bracketed material is slowed down, compared to the surrounding talk.

·hhh **A dot-prefixed row of ‘h’s** indicates an inbreath. Without the dot, the ‘h’s indicate an outbreath.

Cahht **A row of ‘h’s within a word** indicates breathiness.

(h) **Parenthesized ‘h’** indicates plosiveness. This can be associated with laughter, crying, breathlessness, etc…

🙂 **A smiley face** indicates a certain quality of voice which conveys suppressed laughter.
()  *Empty parentheses* indicate that the transcriber was unable to get what was said. The length of the parenthesized space reflects the length of the ungotten talk.

In the speaker-designation column, the empty parentheses indicate the transcriber’s inability to identify a speaker.

(aa) *Parenthesized word and speaker* designations are especially dubious.

(()) Double parentheses contain the transcriber’s descriptions.