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Online mutual aid for problematic drinking

Identity In Recovery From Problematic Alcohol Use:

A Qualitative Study Of Online Mutual Aid

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Highlights

- Interviews explored engagement with online mutual aid for problematic alcohol use
- Three key stages of engagement were identified: lurking, participating and leading
- Online networks afford users control over how they present themselves
- Results highlight the role of identity construction processes in recovery
- Identities constructed online may help to change offline alcohol-related identities

ABSTRACT

Aim. To explore how engagement with online mutual aid facilitates recovery from problematic alcohol use, focusing on identity construction processes. **Design.** Qualitative in-depth interview study of a maximum variation sample. **Setting.** Telephone interviews with UK-based users of *Soberistas*, an online mutual aid group for people who are trying to resolve their problematic alcohol use. **Participants.** Thirty-one members, ex-members and browsers of *Soberistas* (25 women, 6 men): seven currently drinking, the remainder with varying lengths of sobriety (two weeks to five years). **Findings.** Three key stages of engagement were identified: 1) ‘Lurking’ tended to occur early in participants’ recovery journeys, where they were keen to maintain a degree of secrecy about their problematic alcohol use, but desired support from likeminded people. 2) Actively ‘participating’ on the site and creating accountability with other members often reflected an offline commitment to make changes in drinking behaviour. 3) ‘Leading’ was typically reserved for those securely alcohol-free and demonstrated a long-standing commitment to *Soberistas*; leaders described a sense of duty to give back to newer members in early recovery and many reported an authentic identity, defined by honesty, both on- and off-line. **Conclusions.** Engagement with online mutual aid might support recovery by affording users the opportunity to construct and adjust their identities in relation to their problematic alcohol use; individuals can use the parameters of being online to protect their identity, but also as a mechanism to change and consolidate their offline alcohol-related identity.

Keywords: mutual aid; online; alcohol; qualitative; identity; recovery

1. INTRODUCTION

Recovery is often conceptualised as a journey involving a complete life change (Laudet, 2007) that may include a transformation of identity into a ‘non-drinker/user’ (e.g., Biernacki, 1986; Buckingham et al., 2013; Doukas, 2011; Hill and Leeming, 2014; Reith and Dobbie, 2012). Change in social networks and engagement with recovery-orientated mutual aid groups (e.g., Alcoholics Anonymous, AA) may facilitate this transformation by encouraging development of strong recovery-based social identity (Best et al., 2015; Frings and Albery, 2015). Social Identity Theory (SIT) contends that individuals establish their sense of self by drawing on their membership to social groups (Tajfel and Turner, 1979); mutual aid groups, which rely on people with similar experiences helping each other through provision of social, emotional, and informational support (Public Health England, 2013; Raistrick et al., 2006), can provide members with a clear normative structure from which to derive their identity, values, and goals (Moos, 2008). Research has sought to understand the effectiveness of mutual aid (particularly within AA), but the underpinning mechanisms remain unclear.

Online groups have become popular for anonymous support and information (Dosani et al., 2014, Humphreys and Klaw, 2001), and can circumvent barriers to in-person meetings or services, including stigma, embarrassment, and inaccessibility (Cunningham et al., 2011; Gunn, 2015; Khadjesari et al., 2015). Online networks afford users a flexible platform to share narratives within a discreet environment (Merolli et al., 2013), which may be particularly beneficial for stigmatised groups (Hurley et al., 2007).

Users of online groups can disclose information at their own pace (Cooper, 2004), and selectively self-present (Walther, 1996); this permits the construction of an identity/identities that exist alongside others in the ‘real world’. Tracy and Trethewey’s (2005) ‘crystallised self’ theory conceptualises identity as multidimensional, fluid and context-dependent: there is

no ‘fake’ nor ‘real’ self, just different aspects of the whole. This theory, stemming from a social interactionist view of identity (Blumer, 1969; Goffman, 1959; Mead, 1934) holds that one’s self is constructed through social interactions; it is not static, but changes and develops as a function of social context and audience. The use of the internet is therefore interesting for identity construction because as McEwan and Mease (2013) note, the relationship between physical self (e.g., age, gender, race), location (e.g., home, work) and audience – all provide information about membership to identity groups and determine which identity is enacted – is “altered” (p.87-88).

Research on identity around self-harm (Adams et al., 2005), eating disorders (Gavin et al., 2008), and gambling (Cooper, 2004) through internet sites is growing, but little is known about identity for problematic alcohol use¹ in online groups, and a recent review called for more qualitative research to understand alternatives to the 12-step approach (Parkman et al., 2015). *Soberistas* is an online mutual aid group, described by its founder as ‘*non-prescriptive, non-religious, and non-judgemental*’ (Rocca, 2016) and entirely peer-led except for limited content moderation. It is a private limited by shares company and a social business with a global membership base (including the UK, USA, and Australia) of 1828 subscription-paying members (fee: £34/year) and ~2000 active browsers. Subscription-paying members can create a profile, engage in discussions, post blogs, watch webinars and utilise various information resources; browsers can view most content but with restricted usage. A recent survey of the *Soberistas* community (Sinclair et al., 2016) found 94% of respondents to be female, the majority aged between 45-55 years, and 50% living with children. Over 60% reported problematic alcohol use for more than 10 years, although 46.5% had not utilised any form of support previously. While Sinclair et al. (2016) reported an evaluation of the *Soberistas* community, including description of its members and component

¹ The term ‘problematic alcohol use’ is used throughout this paper to reflect the words used by participants when describing a spectrum of harmful and dependent drinking patterns.

parts and processes, the aim of the present paper is to explore how engagement with this online mutual aid group might facilitate recovery from problematic alcohol use, focusing on identity construction processes.

2. METHODS

SEC conducted 31 in-depth telephone interviews with *Soberistas* users between October 2015 and January 2016. Participants were recruited via an online survey embedded within the *Soberistas* website (Sinclair et al., 2016); respondents provided an email address if willing to discuss their views and experiences of using the site. To be eligible, participants had to be over 18 years, based in the UK, speak English, visited *Soberistas* at least once and have telephone access. Seventy-six people provided email addresses.

Our strategy was to achieve a maximum variation of characteristics expected to influence experience of the site (Patton, 1990), including age, gender, current levels of alcohol use, previous treatment history and length of time with *Soberistas*. Using information provided during the survey, we purposively sampled and contacted 58 people. To address gaps in the sample, we placed an advert on *Soberistas* specifically inviting males, those new to the site, or thinking of leaving, to participate. The final sample comprised current subscription-paying members, ex-members, and browsers, 28 of whom were recruited via the survey, and 3 via the advert (Table 1 shows participant characteristics). Some participants had found *Soberistas* weeks prior to interview, while others had used the site since its launch (November 2012). Of those alcohol-free at time of interview, length of sobriety ranged from two weeks to five years.

During interview, participants were asked to talk freely about their use of alcohol, treatment history, and their views, experience and use of *Soberistas*. Open-ended interviewing techniques encouraged participants to lead, but the researcher used probes, asking for clarification with specific examples where necessary. Later interviews became

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more focused, reflecting the decision of the authors to concentrate on a few key categories (see data analysis section below). Interviews lasted on average 48 minutes (range 19-121). Participants were offered a £10 Amazon e-voucher for their contribution.

All participants provided verbal informed consent at the start of interview. The University of Southampton Faculty of Medicine ethical review committee approved the study [ID:17030/18457].

2.1 Data Analysis

Interviews were audio-recorded and transcribed verbatim by SEC. The qualitative software package NVivo (v.10) was employed to aid storage, retrieval, and systematic coding of data.

This study was informed by constructivist grounded theory methodology (Charmaz, 2006; 2014), which acknowledges and emphasises the role of researchers in constructing theory from interactions with participants, knowledge of the field through personal experience, and/or relevant literature. SEC led analysis with discussion and input from the research team. In accordance with principles of theoretical sampling, data collection, coding and analysis were conducted recursively: the decision about who was selected for interview and topics of interest in each interview were informed by analysis of prior data. Participants were selected if they were expected to increase understanding of the theory as it developed.

Analysis began with line-by-line open coding of transcripts from which the authors identified a variety of themes (Charmaz, 2006; 2014). After discussion amongst the team about theoretical plausibility of early ideas, a decision was made to focus on issues of identity once it became apparent this could be central to participants' experiences; subsequent focused coding and memo-writing allowed for refinement of key categories pertaining to identity. The constant comparative method (Glaser and Strauss, 1965) was used to generate labels for

codes and themes identified within the data; constant comparisons were made between interviews, codes, and categories.

The main findings were sent to five individuals selected for their professional and/or personal experience within the addictions field. A focus group was conducted with three and written feedback received from two; the aim was to see whether results resonated with a broader stakeholder group and proved invaluable in improving the clarity with which findings were conceptualised and presented.

3. RESULTS

We use participant quotations to demonstrate how our interpretations are grounded in the data, with identifier format as: gender-specific pseudonym, membership status, drinking status.

3.1. Searching for a common identity: ‘lurking’ on *Soberistas*

Upon finding *Soberistas*, most participants reported time spent ‘lurking’, that is, passively “*consuming all the material*” without actively contributing. Many read stories of likeminded people with similar backgrounds and experiences, and described a “resonance” with the site’s ethos. ‘Lurking’ often provided reassurance:

“Reading other people’s stories was so important because it made me realise I wasn’t alone...to know that it wasn’t unique to me, but there were people exactly like me...my age, my profession, my social background.” (Angela, member, 2-months alcohol-free).

Many participants said it was a “relief” to find *Soberistas* because the secrecy that often surrounded their drinking resulted in them feeling “isolated”, “trapped” or “lost”. As Sarah explained:

“I had this hidden secret that I was a drinker. I presented myself to the world as efficient, a coper...there’s the pride, the secretiveness of it, you’re presenting one side,

but in actual reality, that's not what you're really like" (Member, 3-months alcohol-free).

Several participants reported never telling anyone (including professionals) about their problematic alcohol use to protect their relationships, career, pride, or self-image. Many relied on the internet for information and advice about problematic drinking, and this was a common route to finding *Soberistas*.

Almost every participant spoke about the benefit of 'lurking' to access support anonymously, which was considered especially important during early recovery. Michelle explained:

"You want to keep a lid on it so much; you want to contain it yourself...it's a huge comfort that you're shrouded – there's no spotlight on your real life" (Member, 5-months alcohol-free).

Many participants described feeling ashamed about having an 'alcohol problem' and the fear of stigmatisation motivated them to keep their drinking hidden. 'Lurking' therefore afforded participants a safe way *"to read and get information"* (Dave, member, 1-year alcohol-free) from supportive people with similar experiences, yet preserve the secrecy that dominated this phase of recovery.

3.1.1. Understanding the *Soberistas* 'identity'

Whilst 'lurking', participants assessed whether *Soberistas* could support their recovery journey; they explained that the site had a clear ethos characterised by specific language, values, norms, and beliefs. For example, Kevin explained:

"The first night I was on...the first message I got was, "how long are you AF?" Well I didn't know what 'AF' was – I was actually too embarrassed to ask what 'AF' was. I kind of worked it out myself...I thought that must be 'alcohol-free'." (Member, 2-years alcohol-free)

Numerous participants spontaneously used the term ‘alcohol-free’ during interview which they explained was central to the *Soberistas* ‘identity’, being “*softer than saying ex-alcoholic*” (Louise, browser, 3-weeks alcohol-free). The term ‘alcoholic’ was considered by those who mentioned it to be derogatory, stigmatising and something with which they could not identify: “*I fundamentally did not, and still do not believe that I was ‘an alcoholic’*” (Hayley, ex-member, 3-years alcohol-free). Consequently, participants often welcomed the “*softly, softly approach*” (Angela, member, 2-months alcohol-free) advocated on *Soberistas*; viewing the decision to give up alcohol as a “healthy lifestyle” choice helped many accept their problematic alcohol use without evoking shame. Abby explained:

“What I like [about Soberistas] is that it’s not shaming...it just helped me to not feel really crap about myself because I could see that other people had this problem...other women with children and jobs...not necessarily down and outs.”

(Member, currently drinking)

Although participants described *Soberistas* as “friendly” and “welcoming”, the site was said to unequivocally promote complete abstinence, and members were expected to endorse this alcohol-free identity online – Sarah explained that to fully integrate into the community she had to “*earn [her] stripes*” and equated this with being alcohol-free; she said, “*I’ve been sober 88 days...I can justify being part of the group now*” (Member, 3-months alcohol-free). Another participant explained the only requirement for joining was a “*commitment and desire to be alcohol-free*” and the concern if someone expressed contradictory opinions:

“There would be quite a big backlash and it’s usually the newer people – the ‘newbies’ – that really don’t understand what all the fuss is about. But it’s about maintaining the ethos of the site and what it stands for.” (Karen, member, 13-months alcohol-free)

While firm ‘rules’ around abstinence gave some participants the impetus to take their drinking seriously, others described feeling “intimidated” by members who advocated an abstinence-only approach, Liz explained:

“I said I was thinking of having a drink – I got lots of support but I also got lots of aggressive comments. Then when I did drink, I blogged about it, but it got really quite nasty...I stopped blogging.” (Member, currently drinking)

Liz later stated she would not renew her membership because of “hostility” from others, and the site’s inability to support her attempt to moderate drinking.

3.2.Creating an ‘identity’ through active participation

Several participants recalled the first time they contributed to *Soberistas* and moved from ‘lurking’ to actively ‘participating’. For example, Linda recalled:

“I started tapping into the site and reading every so often, and then I thought, I’ve got to do something about this...I must have read on the site for a few months before I ever did the first blog.” (Member, 15-months alcohol-free).

Another participant, Michelle, wrote her first blog the day she stopped drinking. She explained why participating and ‘creating an identity’ on *Soberistas* helped her maintain abstinence:

“Once you create an ‘identity’, and you put yourself out there on blogs or commenting on other people’s blogs, you’re almost a little bit, in your heart of hearts, accountable...there’s almost, well I’m out there now...you’re accountable to everybody.” (Member, 5-months alcohol-free).

Alcohol-free members frequently discussed the importance of accountability in sustaining abstinence, and a mechanism for accountability is active engagement on the site. This was corroborated by participants who reported non-engagement and lack of accountability when drinking, for example:

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“When I was going through a moderating phase, I didn’t really look at the site...I didn’t really want to engage. Using the site is for me to not drink...when I am drinking I kind of don’t see the point.” (Kimberley, member, 2-months alcohol-free).

Establishing smaller, more personal communities within the larger *Soberistas* network was a common way of creating accountability. Participants explained that members often joined others with similar demographics (e.g., age), goals (e.g., 30-days alcohol-free) or interests (e.g., yoga), and this helped foster “mutual support” and “understanding”, which often paved the way for “intimate” and “real” friendships on *Soberistas*, occasionally involving in-person meetings.

Engagement with likeminded people also provided alcohol-free participants with reaffirmation of their decision to remain so, despite possible resistance or lack of understanding from people offline:

“It’s a bit hard because they [friends/family] don’t understand, but that’s why I get solace in the website and from reading Lucy’s [Soberistas’ founder] book...because those are people, even though I’ve never met them, they can understand...no-one else understands why I’ve given up.” (Maria, ex-member, 2-years alcohol-free)

Some participants cited lack of understanding and perceived stigma in their offline lives for confining expression of their difficulties with alcohol on *Soberistas*. Many wished to keep online and offline identities separate, and when this was jeopardised, some reported feeling fearful. For example, Kerry explained what happened when a friend joined *Soberistas*:

“I went for a dinner party locally and a friend mentioned it [Soberistas] ...I just ran home that night and deleted everything because I’ve got far too much personal information on there...it terrified me...I haven’t blogged since.” (Member, 3-months alcohol-free).

This fear of being recognised caused some participants to keep their offline identity hidden on *Soberistas*, and many discussed the benefits of doing so, namely the ability to “*open up about things they wouldn’t normally*” (Tina, member, 1-month alcohol-free) – anonymity therefore encouraged personal disclosures, and was often considered helpful for recovery:

“I just found it easier to talk about the whole subject anonymously...it becomes terribly easy to talk about it in a third person almost, as if you’re somebody else, and I found that very helpful. I found it much easier to admit that I was sitting there at 9 o’clock in the morning with a bottle of vodka.” (Ben, member, 3-years alcohol-free)

For many, the *Soberistas* community provided a rare opportunity to “offload” to people who understand – Angela explained that was “*the kick-start behind making changes*” (member, 2-months alcohol-free).

3.3. Modelling the ‘*Soberistas* identity’: leading the way

Some described a further engagement transition from ‘participating’ to ‘leading’. Participants either self-identified as leaders, or referred to others in ‘leadership’ roles – for example, in discussing a small thread she was part of, Sarah described the group founder as their “*mother hen*” (Member, 3-months alcohol-free), and Linda, the leader of another group said, “*When I started the discussion...I had progressed to being a grown-up [laughs]*” (Member, 15-months alcohol-free).

Participants explained members earned ‘leadership’ status through consistent online activity over time and continued abstinence, congruent with the *Soberistas* ethos. Attribution of leadership status was informal; essentially some members were “*role models*” (Sonia, member, 7-months alcohol-free), acting like “*sponsors [as in AA] without the title*” (Paul, member, currently drinking).

Those who considered themselves leaders described a sense of obligation *“to give back to other people who are just starting out”* (Michelle, member, 5-months alcohol-free), from which they too benefitted:

“It’s kept me more on the straight and narrow because I’m running this blooming discussion forum...no weakness allowed!” (Linda, member, 15-months alcohol-free).

Reduced anonymity online often accompanied leadership on *Soberistas*. Jenny, a self-professed leader said, *“I thought I’m going to be open...known by my own name...and I was going to stand up and be counted for”* (member, 5-years alcohol-free). Jenny explained she hoped by revealing her personal identity on *Soberistas*, others would follow. She considered it important to give a face *“to this hidden group”* and reduce stigma attached to problematic drinking.

3.4. “Secure in sobriety”: arriving at an ‘authentic identity’

Several participants, mostly leaders or those with longer periods of abstinence, described being *“secure in sobriety”* (Caroline, member, 3-years alcohol-free). This marked a significant change, going beyond simple acceptance of needing to be alcohol-free:

“This is a new chapter in my life and it’s very different. I am absolutely delighted with it...I’m really happy.” (Hayley, ex-member, 3-years alcohol-free)

Yasmin (browser, 18-months alcohol-free) indicated this happiness came from arriving at her *“authentic self”*. Participants explained part of this authenticity involved a change of lifestyle and engagement with new activities (e.g., study, exercise, volunteering). It also meant a *“sense of freedom”* because they reached a point of openness both online and offline:

“I don’t care what people know about me, you know at the meet ups we use our real name and photographs were taken...couldn’t care less now if some of my personal friends

think that I was an ‘alcoholic’...that’s the label they might want to use.” (Karen, member, 13-months alcohol-free).

Some participants even described becoming “*evangelical*” about their sobriety by shouting about the benefits of not drinking and recruit people to the “*sober revolution*” (Ian, browser, 5-years alcohol-free). Others also expressed passion in discussing *Soberistas* – Linda said, “*I’m a Soberista and proud of it!*” (Member, 15-months alcohol-free).

3.5. Life going forward: moving beyond a ‘*Soberistas* identity’

Participants described ‘moving on’ from *Soberistas* at different stages in their recovery journey. Many who reached a stage of security and authenticity moved on because they no longer relied on it to maintain sobriety, or felt the need to give back any more – “*It fulfilled its function...I am in control of my addiction and I feel perfectly able to deal with it*” (Ben, member, 3-years alcohol-free). Dave agreed:

“I feel like in my journey I have taken everything out of Soberistas as I can, and put as much back in as I could – but I’m in a different stage of my journey now and I don’t really need it.” (Member, 1-year alcohol-free)

Others moved on because their peer group had dissolved, Paul explained:

“There were just a few small groups of people I seemed to connect with, and the sad thing is they disappeared – it’s a bit wearing having to explain yourself to new contacts all the time, so this year I have shied away from the chat side of things.” (Member, currently drinking).

Similarly, Karen said the only reason she would leave *Soberistas* is “*not being able to relate to people*” (member, 13-months alcohol-free). Several longer-term alcohol-free participants described feeling like “outsiders” because of the increasing number of new members who were only recently abstinent:

“I’m one of the old timers...with two years under my belt, I’m now looking, well there are people who are seven days and eight days...that’s not me anymore.” (Kevin, member, 2-years alcohol-free).

Longer-term alcohol-free members perceived their needs to be different from newly-abstinent members and often withdrew from *Soberistas* when it no longer resonated with them. However, because many considered the site to be an important part of their recovery journey, they often felt a deep “attachment” to it and continued to pay the subscription fee to support it financially and/or “*keep the security blanket*” (Kerry, member, 3-months alcohol-free). Just as Caroline said that “*sobriety and recovery is an ongoing journey, it never ends*” (member, 3-years alcohol-free), ‘moving on’ from *Soberistas* was rarely seen as finite.

4. DISCUSSION

This paper explores the role of one online mutual aid group in helping people address their problematic alcohol use. Our analysis, grounded in participants’ accounts, highlighted key stages of engagement with *Soberistas*, through which on- and off-line identities could be constructed and adjusted to support recovery. The most linear and commonly discussed pathway of engagement involved transitions from ‘lurking’ to ‘participating’ to ‘leading’, before ‘moving on’; this journey coincided with participants’ journey from problematic alcohol use to being “secure in sobriety”.

Caution is needed in generalising our findings to other online groups for alcohol or different addictions. We did not intend to recruit a representative sample of people who access online support groups, but chose instead to explore the views and experiences of members and browsers of one group to develop theory as to how it may effect change. Given the scarcity of research in this area, and the increasing popularity of internet-based self-support, our findings may deepen understanding of how engagement with online mutual aid might facilitate recovery, highlighting its role in identity construction. By situating our

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findings within the broader recovery literature, our data may have relevance beyond our sample.

Our results demonstrate the internet's role in personal recovery journeys, and support the conceptualisation of identity as multidimensional and fluid, which we suggest might be key to understanding the mechanism of action of online mutual aid. Online networks allow control over how users present themselves (Merolli, 2013; Walther, 1996); individuals balance their need for connection and understanding with their desire for anonymity. 'Lurking' afforded participants the opportunity to gain information and reassurance from similar people who had quit drinking, but also maintain secrecy about their continued use of alcohol or ambivalence toward change. Upon joining *Soberistas*, many participants reported feeling ashamed or scared of revealing their drinking identity with people offline, including professionals, perhaps due to perceived stigma of problematic drinking – engagement with an online group was considered safe as it need not interfere with other offline identities (e.g., a parent at home, or an employee at work).

If the *Soberistas* identity (including values and norms around abstinence) resonated, participants often continued engagement by actively participating; internalisation of the group identity through this engagement may have supported recovery by facilitating the development of a stable non-drinking social identity (Best et al., 2015; Frings et al., 2015). While some participants revealed personal information to other online users through the formation of smaller communities or in-person meetings, others maintained anonymity. The option for restricting identity related to drinking to an online network was considered a benefit over in-person treatment, which lacks this flexibility. Furthermore, online accountability comes with it freedom to break away – participants could easily move on without consequence.

Some participants allowed their on- and off-line identities to be viewed simultaneously; this was most common for leaders and those firmly alcohol-free who had established an ‘authentic identity’. For these participants, their online non-drinking identity (constructed through the internalisation of *Soberistas*’ recovery-orientated norms and values), blurred into their offline identities, and changes in ‘real-life’ social networks and activities were described. The ‘crystallised self’ theory (Tracy and Trethewey, 2005) posits that multiple facets of self are healthy and functional, however a ‘drinking identity’ can interfere with many other identities (e.g., as a parent, an employee, or an “efficient copier”). Participants typically described this facet as destructive, and spoke of feeling liberated when both on- and off-line identities were defined by abstinence. Some participants were open and honest about their alcohol-free status on- and off-line, despite resistance from friends, family and/or colleagues, potentially having internalised the *Soberistas* group norms, which then become a personal resource in times of adversity (Jetten et al., 2014). The convergence of on- and off-line identities, although problematic in some situations (see McEwan and Mease, 2013), was considered a positive step forward in recovery for some participants.

It is important to return to a key study finding concerning the inability of the site to support moderated consumption (in keeping with AA philosophy). This alcohol-free ethos could isolate individuals who relapse after a period of abstinence, or are seeking a non-abstinence recovery path. Indeed, participants who resumed drinking often described leaving the site until they were ready to contemplate abstinence again. Other research has noted moderation as a viable recovery option, and this serves as an alternative approach to that offered by *Soberistas* or AA (see Klaw and Humphrey’s (2000) and Humphrey and Klaw’s (2001) work on ‘Moderation Management’).

4.1 CONCLUSION

The use of qualitative methods provides insight into how this sample used a non-12-step orientated online mutual aid group to address problematic alcohol use. Our findings extend literature that highlights the role of identity in recovery, and how engagement with internet-based groups may help facilitate this. Online groups appear to provide an alternative for people who experience barriers in accessing traditional services, and may serve as a place to explore their relationship with alcohol at early stages of change. Clinicians in non-alcohol-specialist services might consider signposting to such groups that require little prior commitment on behalf of the client. Future research is needed to explore the role of gender in online mutual aid, as most of our participants were female. Identity processes in other online groups using different models of mutual aid, or for people with other addictions, also require further exploration of how engagement with online mutual aid may help initiate as well as support recovery.

Contributors

Sophia E Chambers conducted participant interviews, led analysis, interpreted the results, and drafted the first manuscript. Julia MA Sinclair and Krysia Canvin contributed to the study design, qualitative analysis and interpretation. David S Baldwin contributed to interpretation of analysis and provided editorial direction for all drafts of the text. All authors have contributed substantively to and have approved the final manuscript.

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Conflict of interest

SEC has a PhD studentship funded by the Wessex Academic Health Science Network in partnership with H. Lundbeck A/S. In the last year KC has received personal honoraria (consultancy fees) from H. Lundbeck A/S. In the last three years DSB has received institutional research funding from pharmaceutical companies (H. Lundbeck A/S, Pfizer Ltd) with an interest in anxiolytic and antidepressant drug development, not related to alcohol dependence, and personal honoraria (lecture fees) from AstraZeneca, Janssen, H. Lundbeck A/S, and Pfizer Ltd. JMAS responded to ‘Ask the doctor’ questions monthly (January 2014 – June 2016) on *Soberistas* (unpaid). In the last three years JMAS has received personal honoraria (lecture fees) from H. Lundbeck A/S.

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Table 1. Participant characteristics

Characteristics	Participants n (%)
Gender	
Female	25 (80.6)
Male	6 (19.4)
Age	
25 – 34	2 (6.5)
35 – 44	7 (22.6)
45 – 54	8 (25.8)
55 – 64	10 (32.3)
65+	4 (12.9)
Membership status	
Current subscription-paying member	24 (77.4)
Ex-member	4 (12.9)
Browser (non-member)	3 (9.7)
Estimated length of time on the site	
< 1 month	2 (6.5)
1 – 3 months	3 (9.7)
3 – 12 months	10 (32.3)
> 12 months	16 (51.6)
Drinking Status	
Currently drinking	7 (22.6)
Alcohol-free \leq 1 year	12 (38.7)
Alcohol-free > 1 year	12 (38.7)
Treatment / Support (other than <i>Soberistas</i>) *	
None	13 (41.9)
Previous	13 (41.9)

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Current	5 (16.1)
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*Examples of ‘treatment/support’: AA, private counselling, community services, other online support, and inpatient rehabilitation.