



COVID-19 and Alcohol Consumption

September 2020

Background

In March 2020, the World Health Organization declared COVID-19 a pandemic. Shortly after, jurisdictions around the globe followed suit, and BC declared a public health emergency on March 17, 2020. Information changed rapidly, such as which services would remain open and what lockdown would look like, as well as how BC's response plan would impact daily life. At that time, the Public Health Officer (PHO) coordinated a list of essential services that could operate throughout the province during the early phases of the pandemic, if they met standard sanitation and physical distancing protocols. Retail liquor establishments as well as bars and restaurants that served alcohol in addition to food services were included on this list.ⁱ

In the early stages of the pandemic, we were unsure what the future would bring with respect to how our hospitals would fare with an unknown number of potential COVID patients requiring hospitalization. Alcohol services were included as an essential service because people with alcohol use disorders may face serious medical complications if forced to abstain from alcohol on short notice. Such medical complications include withdrawal symptoms, seizures, psychiatric issues and even death.ⁱⁱ The BC Centre for Substance Use (BCCSU) has also noted that while keeping access to alcohol is important in order to ensure people are able to access alcohol, smaller communities may not be able to allow for the same access to services as larger, more urban, centres. This means the risk of withdrawal is increased for those in smaller communities who may then need to seek input from a health care provider to help them manage withdrawal with the use of prescribed medications.ⁱⁱⁱ

In a 2017 survey, it was found that the rate of hospitalizations for the treatment of conditions caused by alcohol was 249 per every 100,000, which is higher than the rate of hospitalizations for heart attacks (243 per 100,000).^{iv} An international study has also stated that hospitalizations caused by alcohol use could increase by as much as 30% following major traumatic events, such as a pandemic.^v BCCSU has noted that alcohol related harms caused by the consumption of alcohol above the recommended limits is a serious public health issue.^{vi} According to BCCSU: "In BC, there were [approximately] 27 alcohol-related deaths per 100,000 people in 2014, which was more than 3 times higher than the mortality rate for all illicit drugs combined; From 2002 to 2014, hospitalization rates for alcohol-attributable conditions increased from 383 to 513 per 100,000 individuals; From 2001 to 2011, the number of primary care visits for alcohol-attributable conditions in BC increased by 53%".^{vii} By decreasing the number of people coming to the emergency room, this allows for nurses and other health care professionals to better respond to the surges of COVID-19 patients, should these numbers continue to rise (and recent numbers indicate that our COVID-19 numbers are rising steadily).

Recent statistics show clearly that alcohol consumption during COVID-19 has increased. Since the beginning of COVID-19 restrictions, some BC liquor retailers have cited massive increases in alcohol purchasing, up by as much as 40% compared to pre-pandemic.^{viii} However, increased consumption of alcohol can lead to misuse to the point that physical health, mental health, wellness and relationships may suffer.

Nanos polls commissioned by the Canadian Centre on Substance Use and Addiction (CCSA) outline which sectors of the population are increasing their alcohol consumption. They noted that one in five Canadians who were now to stay at home more due to COVID-19 reported that they have increased their alcohol consumption and frequency; 25% of Canadians between ages 35 and 54 self-assessed that they had increased their consumption, as well as 21% of Canadians aged 18 to 34.^{ix} The poll further details that the top reasons for this behaviour include boredom, stress, and lack of a regular work or class schedule. We have seen that COVID-19 has impacted mental health for the general population worldwide and many have turned to alcohol to help cope with the stresses of the pandemic.

In addition to the effects on personal mental health and wellness, increased alcohol consumption in the context of social engagements may be an underlying cause when it comes to the surge in COVID-19 numbers in BC over the summer months. It is well understood that alcohol consumption can impair judgement and negatively affect decisions to follow appropriate public health interventions. Events like this are likely to have caused such issues as the 'Kelowna cluster' which developed from social activities taking place over the Canada Day long weekend

in one setting. More recently, PHO Dr. Bonnie Henry addressed some of these issues by introducing new protocols to cut off alcohol sales by 10:00 pm at bars and restaurants. These changes to protocols make it clear that the PHO is attempting to curb community transmission that has occurred due to social activities where alcohol was present. It remains unclear at this stage whether these changes will also influence reducing the overall increased alcohol use that has been noted during this pandemic.

The COVID-19 pandemic has created barriers for people who use substances. Barriers to access, even with safe supply, continue for people who use drugs. People who use alcohol have, in most settings, been able to continue to purchase alcohol in order to mitigate withdrawal but that too has been a challenge given reduced access to liquor stores outside of urban settings. In addition, more people have started using alcohol to cope with the impacts of lock-down, isolation and general loneliness caused by the pandemic. These individuals have the potential to over-use alcohol to the point that it impacts their health, wellness, jobs and relationships. Nurses can help people identify the need to modify their alcohol consumption, support them to strengthen or build new self-management strategies, provide specialized addiction nursing services and access other health services such as addiction medicine.

Key Messages

- At the start of the COVID-19 pandemic in BC, liquor retail stores were declared essential services by the Provincial Health Officer in an effort to ensure that those with alcohol use disorders would not suffer the negative effects of withdrawal.
- Studies indicate that alcohol use is a serious public health issue and that alcohol related conditions are a leading contributor to high rates of hospitalizations.
- COVID-19 has led to increased alcohol consumption, especially for those between the ages of 18 and 54 as a means of 'escapism' from the heavy emotional toll the pandemic has taken.
- Nurses play a key role in understanding and providing support to those individuals who are at risk of alcohol misuse.
- Nurses can work with individuals to help modify problematic alcohol consumption while also supporting them to build new self-management strategies and/or provide more specialized addiction nursing services.

Further Reading and Resources

- [BCCSU- A Guideline for the Clinical Management of High-Risk Drinking and Alcohol Use Disorder](#)
- [BCCSU- Overview- COVID-19 Risk Mitigation Interim Clinical Guidance](#)
- [Canadian Centre on Substance Use and Addiction: Summer 2019 Drug Summary](#)
- [BC Liquor Distribution Branch: Province Defines LDB as Essential Service](#)
- [CCSA: 25% of Canadians \(aged 35-54\) are drinking more while at home due to COVID-19 pandemic](#)

NNPBC would like to thank Ken McDonald for his work on this Issues Brief.

Please feel free to direct questions and additional comments to info@nnpbc.com.

ⁱ [Liquor an Essential Service – Regulators in AB, BC, ON and SK make changes to assist industry](#). - McCarthy Tetrault, March 31, 2020.

ⁱⁱ Global News, March 24, 2020. [CCSA Canadian Drug Summary](#).

ⁱⁱⁱ [BCCSU- Overview- COVID-19 Risk Mitigation Interim Clinical Guidance](#)

^{iv} [Canadian Centre on Substance Use and Addiction](#), September 2019.

^v [Moise and Ruiz, Centers for Disease Control and Prevention](#), 2016.

^{vi} [BCCSU- A Guideline for the Clinical Management of High-Risk Drinking and Alcohol Use Disorder](#)

^{vii} [Ibid](#)

^{viii} [Hobin and Smith, Canadian Journal of Public Health](#), 2020.

^{ix} [CCSA - Boredom and Stress Drives Increased Alcohol Consumption during COVID-19](#), May 2020.