

# Sociability of Alcohol Consumption and Alcoholism in Times of COVID-19 Crisis

---

**Brezovec, Erik; Zoričić, Zoran; Glavina, Trpimir**

*Source / Izvornik:* **Archives of psychiatry research, 2022, 58, 99 - 106**

**Journal article, Published version**

**Rad u časopisu, Objavljena verzija rada (izdavačev PDF)**

<https://doi.org/10.20471/may.2022.58.01.11>

*Permanent link / Trajna poveznica:* <https://urn.nsk.hr/urn:nbn:hr:111:923271>

*Rights / Prava:* [In copyright](#)/[Zaštićeno autorskim pravom.](#)

*Download date / Datum preuzimanja:* **2024-10-03**



*Repository / Repozitorij:*

[Repository of University of Zagreb, Centre for Croatian Studies](#)



# Sociability of Alcohol Consumption and Alcoholism in Times of COVID-19 Crisis

Erik Brezovec<sup>1</sup>, Zoran Zoričić<sup>2</sup>, Trpimir Glavina<sup>3</sup>

<sup>1</sup>Faculty of Croatian Studies, Zagreb, Croatia, <sup>2</sup>Department of Psychiatry, University Hospital Centre Sestre milosrdnice, Zagreb, Croatia, <sup>3</sup>Department of Psychiatry, University Hospital Centre Split, Split, Croatia

**Abstract** - COVID-19 has changed the social context, but also our ability to act in it. This new normal also influenced the patterns of alcohol consumption. In this sense, the main goal of this paper is a theoretical analysis of COVID-19 context of sociability of alcohol consumption. The paper analyses the ways of establishing the individual meaningfulness of alcohol consumption. The stratification of collective patterns in the context of a pandemic is analysed and the implications of stratification on future drinking patterns, but also on the potential risks of higher alcoholism rates in the future are theoretically considered. The analysis is based on previous research on the habits of alcohol consumption during quarantine. The rate of alcohol consumption in the studies did not differ significantly from that before quarantine. In some cases, a lower rate of alcohol consumption has been reported. However, the rate of excessive drinking, and socially unregulated drinking, individual drinking, and drinking of a larger number of alcoholic beverages on occasion was on the rise. The theoretical explanation that can be set on the basis of previous research supports the fact that society is responsible for regulating the acceptable alcohol consumption. In the absence of social/cultural influences, an individual consumes alcohol for his own pleasure - it is directed towards himself and not towards society. If this social and value meaningfulness of alcohol consumption is lost, the individual will have a higher risk of developing alcohol dependence. Society is a protective factor in the development of alcohol dependence. During the COVID-19 pandemic, most individuals did not consume alcohol because of the social patterns that that consumption implies (or is an integral part of), but they consumed it because of internal anxiety. The use of alcohol for the purpose of calming the anxiety caused by the pandemic, without an individual reflection on the sociability of alcohol consumption, is a potential public health problem of the future.

**Key words:** COVID-19; alcohol consumption; sociology of alcohol consumption; addiction

---

Copyright © 2022 KBCSM, Zagreb

e-mail: apr.kbcm@gmail.com • www.http://apr.kbcm.hr

## Introduction

The COVID-19 pandemic changed the structure of social relations and interactions. In a short period of time, an individual could no longer organize himself in social interaction on the basis of previous common sense

patterns. Public health has become a new force in establishing the discourse of alternative forms of social action. Acting in accordance with epidemiological measures has become both normatively and value-wise necessary and desirable. The self-regulation of sociability has changed. However, in a broader social sense, this change necessarily involved changes at lower social levels, i.e. in specific forms of establishing a collective meaning - for example, the collective meaning of certain phenomena that are inseparable from society.

---

Correspondence to:

Erik Brezovec, PhD

Faculty of Croatian Studies,

Borongajska cesta 83d,

10 000 Zagreb, Croatia

E-mail: ebrezovec@hrstud.hr

One such phenomenon is alcohol consumption. Alcohol consumption is a social phenomenon, a kind of a social fact that is inseparable from society [1]. Alcohol is consumed within the values and norms established by a certain society. Thus, in order for alcohol to be consumed without imposing stigmas or labels, it is necessary to know at least something about drinking. How, why, how much and where one can drink, what amount of alcohol, what kind of alcohol? All these questions are adopted by man through his daily life, through primary and secondary socialization. Such a social mechanism allows for the social regulation of the potentially harmful effects of alcohol on general population. First of all, social mechanisms are a protective factor that enables 'enjoying' while drinking alcohol, but which does not allow and sanction the excessive or (situational) illegal drinking and thus limits the space in which alcoholism can develop.

This social mechanism of alcohol consumption regulation has been historically established. It is based on collective knowledge that has accumulated and determined as a kind of folk wisdom towards drinking. *Bier nach wein trinkt nur schwein, wein nach bier das schmeckt mir* (Only pigs drink beer after wine; beer before wine makes you feel fine); that is a German folk saying that gives a recipe for drinking. This recipe is based on drinking experiences in which beer after wine is not pleasant and often results in greater intoxication and nausea. On the other hand, wine after beer will not produce such an effect. Folk wisdom has thus maintained an important social function in terms of alcohol consumption, and that is its regulation towards socially acceptable (functional) drinking (drinking that may potentially harm the health of an individual but does not harm the health of the social system). It is common sense, everyday knowledge that is transmitted in society and for the sake of society. The function of folk wisdom was to preserve the social system and the community, not the individual. However, this common sense was also based on axiological, i.e. value rationality [2], which, although useful, did not always reveal absolute

precision and functionality. That is why common sense knowledge, in general, can claim that: *Common sense, like tradition, preserves folk wisdom and folk nonsense, and the task of science is to distinguish one from the other* [3,4]. Regardless of this digression, folk wisdom about alcohol consumption has fulfilled its social function to a greater or lesser extent depending on the situation or the social dynamics of time.

However, at the time of the corona virus, i.e. the COVID-19 pandemic, common sense knowledge underwent radical changes, primarily because the entire social knowledge about alcohol consumption was related to its socio-cultural dimension. Alcohol was part of social meaning formation. Namely, in a social context, a person did not socialize because of alcohol but used alcohol because of the social conditions of situation. This social relationship and the establishments of social solidarity throughout alcohol consumption in the context of COVID-19 are losing its strength. Of course, this does not mean that the social foundations of alcohol consumption have disappeared. They are still used, but they are isolated from the social mechanisms that controls it. This means that for an individual, alcohol consumption still makes sense, there is still some knowledge about alcohol consumption, but this knowledge is now selectively used to alleviate the side effects of the stressful quarantine period, in the individual's 'four walls', without clear notions and reflections on social and situational norms of drinking.

In this paper, the mentioned processes are theoretically analysed. The following central question arises: can we, based on the theoretical assumptions of the sociology of alcohol consumption and on the basis of empirical indicators, determine the potential public health risks of higher rates of alcoholism in the so-called post-Corona period?

### Empirical indicators of drinking during COVID-19

Before embarking on a theoretical analysis, two basic questions need to be asked.

Are people drinking more or less during the COVID-19 pandemic? How do people drink during the COVID-19? The answer to these questions can be found in several studies that have addressed precisely the phenomenon of alcohol consumption during a pandemic. The fundamental, common-sense hypothesis could have gone in two directions. One is that due to the stress caused then (but also now) by the current situation, there is an increase in the frequency of alcohol consumption. The other hypothesis, quite opposite to the first, claims that due to the closure of places where social alcohol consumption took place, there is a decrease in the total percentage of alcohol consumption.

To be able to detect the way in which alcohol consumption is socially addressed in the COVID-19 situation we must use the available empirical data. So in that sense, Biddle and associates in Australia, based on ANUpoll data (34th ANUpoll in Australia), compared the alcohol consumption rates recorded before and during the COVID-19 pandemic. Data collection for the 34th ANUpoll was realized in May 2020 on a sample of 3219 adult citizens in Australia. It is important to note that the research itself is characterized by some shortcomings – for example the research compared alcohol consumption throughout two different databases. Moreover, data for the COVID-19 drinking patterns were mostly collected *online* (through panel surveys), which undermines the representativeness of the sample itself when it comes to the nationally representative sample. Despite these shortcomings, the data can serve as a kind of framework (in combination with other research) to set a general picture of alcohol consumption during COVID-19. Namely, this research showed that the rate of alcohol consumption at the time of COVID-19, compared to the data from 2017/2018, is in a slight increase in the male part of the samples and in a significant increase for the female part of the samples. The research was based on self-assessment, which means that the respondents assessed for themselves how different their alcohol

consumption is now compared to previous periods. As for the female part of the samples, one of the main predictors for increased alcohol consumption was the role of the mother (those who internalized the role of the mother consumed alcohol to a greater extent during COVID-19). On the other hand, a significant predictor of increased alcohol consumption for men during COVID-19 was loss of work [5]. Research on changes in drinking habits in Australia was also conducted by Callinan and associates. In their study on a sample of 1,684 adult subjects, excessive drinking levels decreased during the pandemic. Callinan and co-workers specifically examined the age factor and concluded that the level of frequency and intensity of alcohol consumption in young respondents decreased, while in middle-aged respondents it increased, primarily in middle-aged women. The main factor associated with higher levels of excessive drinking during COVID-19 in this study was stress levels [6].

Furthermore, in the United Kingdom area, Oldham and associates conducted a similar study to assess differences in drinking habits before and during the COVID-19 pandemic. The survey was also conducted online on a sample of 2777 adult respondents in the UK. In the survey itself, 30% of respondents when asked about the frequency of alcohol consumption during COVID-19, answered that they drink more often than before the COVID-19 period. Of these 30% of respondents, 14% answered that they drink more frequently, but in moderation, and 16% that they drink more alcoholic beverages per occasion of consumption than was the case before the COVID-19 period. In the mentioned research, the reasons for drinking were also analysed. Of those respondents who mentioned drinking more and more often, there was an association with the belief that alcohol could protect them from becoming sick. Moreover, factors associated with the increase were the general impaired mental health of the respondents during quarantine and the financial regression of the individual or family. In this study too, living with children was a significant predictor

of a higher and more frequent rate of alcohol consumption during COVID-19 [7].

In Germany, an analysis of the purchase of alcoholic beverages was conducted. Sales, i.e. personal purchases of alcoholic beverages compared to last year increased by 6.1% [8,9]. But this data, despite its methodological and statistical accuracy, does not say much. The purchase of alcohol in a quarantine situation can be increased due to a number of factors - such as closed cafes where alcohol would be consumed anyway. Nevertheless, even though buying alcohol insinuates consumption, it is still not consumption. This increase is reflected in purchases but not in consumption [9]. In Poland, the first phase of the project on alcohol consumption during COVID-19 was implemented. The first phase included a period of strict quarantine in Poland from 10 to 20 April 2020 on a sample of 443 respondents. In this case, 30% of respondents reported changes in drinking habits. Of the total sample, 16% of respondents reported consuming less alcohol during a pandemic, and 14% reported consuming more alcohol. Increased levels of alcohol consumption were associated with perceived stress levels, and no statistically significant differences were found in this study with respect to sociodemographic indicators [10].

Research on changes in alcohol consumption habits was also conducted in the area of the former Yugoslavia. The research was conducted by Sutlović and associates on a sample of 930 respondents. The study was conducted online on a convenient sample in which a gender distribution of 659 women and 271 men between the ages of 20 and 45 was obtained. The study included respondents from Croatia (n = 549), Bosnia and Herzegovina (n = 219) and Serbia (n = 169). The results show a declining trend in the frequency of alcohol consumption during COVID-19 compared to earlier periods in all three countries. However, this was also a matter of self-assessment of one's own alcohol consumption. Respondents in this study more often answered that the increase in alcohol consumption was visible at

the level of society in general, but not in themselves [11].

### **Theoretical discussion about alcohol consumption during COVID-19**

The presented researches are indicative insofar as they provide certain common features of the results. Although they were carried out with significant shortcomings, it is precisely these common features that provide a degree of relevance of these studies for further theoretical analyses. The social dimension of alcohol consumption is already indicated in the introduction. Alcohol as such is, in its consumption, inseparable from society which gives it the limits of what is permissible. These frames were stratified in the COVID-19 pandemic. Namely, as some basic dimensions of sociability have changed, the ways in which individuals approach alcohol consumption have also changed, but alcohol consumption has not disappeared with the change of social context. It is still present, but in that presence, within the new context, one has to ask how individuals form their own rationality of consumption. What does alcohol mean to an individual during COVID-19? The established meanings of alcohol consumption for the establishment of social relations are set aside. The social role of alcohol in the current context is no longer the main motive for drinking. As there is no possibility of social realization of consumption framework, only the second socially accepted dimension of alcohol consumption remains - alcohol as a socio-historically acceptable anxiolytic. In this sense, the complete social paradigm of the social meaningfulness of alcohol consumption is changing. An individual drinks alcohol not because of the society but for himself. It is precisely this type of drinking, separate from the sociability of alcohol consumption, which was in the *old normal* labelled as potentially problematic and that leads to alcoholism. Alcoholism in the context of social life is a process of losing the collective level of meaning of drinking alcohol. When in an individual (alcohol as a

kind of aggregate of the interaction ritual of a situation) ceases to fulfil this function [12] and acquires meaning in itself and for itself, there is a label of deviance that society puts on that individual. In this context, the deviance of alcoholism is seen primarily as a social phenomenon (not yet medical) that falls within the domain of labelling. According to Becker [13], labelling is a two-way process - the game of an individual's action and society's reaction to that action (and vice versa). A person becomes deviant only when society in that interplay gives him the label of deviance. In the case of alcohol dependence, society is the first reaction to an individual's alcoholism. The label precedes the diagnosis. Social mechanisms regulate values that will direct conformist action in the direction of reacting to deviation (in relation to alcohol consumption). This social mechanism was not fully applicable during the pandemic. The reason for this lies in the lack of direct social contact and confirmation of the social values that determine alcohol consumption - for example, going out to a cafe with friends for a beer; night out; wedding; family lunches; wakes... All these situations allow the consumption of alcohol in a specific way. As long as consumption is in the service of social, it is acceptable. Without this social contact, there is no reflection on other people's consumption, but also on the own personal consumption. Alcohol consumption in a pandemic, in the absence of direct social contact, in most cases occurs within its own four walls, within direct and immediate social relations - within what is called *us*-relations within Alfred Schütz's phenomenological sociology [14]. These relationships are imbued with emotions to a greater extent than *they*-relationships, relationships that are relationships between roles and with a high level of anonymity. Consumption in an intimate environment leads to the individualization of the meaning of alcohol. Alcohol then becomes a meaningful means of resolving emotional mismatch within the family: *I drink to relax*. This is supported by the mentioned empirical data on the connection between the role of motherhood and higher

levels of alcohol consumption during COVID-19. Spending time with the family in the role of mother (for whom this role within the home is a role with a high level of responsibility) leads to a higher level of stress, and in parallel to a higher level of alcohol consumption.

However, it is precisely stress within the context of the relationship between alcohol consumption and the pandemic period that is the main factor (and in the empiricism shown) for the increased level of alcohol consumption (increase of the number of drinks per occasion). Namely, the relationship between stress and alcohol consumption can be explained as one that is realized due to a kind of inability to cope with the problem - the inability to adapt to the situation [15,16]. The pandemic period, quarantine and accompanying collective fear are situations in which it is difficult to find methods for adequate adaptation. Stress levels are high, and escaping still seems like the best option. This escape can be found in psychoactive substances. As alcohol is a socially permissible substance, it seems common sense to reach for what society offers us in a situation where most dimensions of social interaction are disabled. In this context occurs individualized drinking. Drinking for one's own sake, and not for the sake of society, gradually leads to drinking for the sake of drinking, is the basis for the social determination of deviant drinking. However, in the case of a pandemic, such drinking, due to paused social mechanisms, cannot be detected and labelled, and thus can be very difficult to process for further diagnosis of alcoholism. Without active social patterns that guide and regulate drinking, on theoretical grounds, it can be said that the pandemic period is a period in which the overall level of alcohol consumption does not increase significantly (since social drinking cannot be realized), but that the risk of alcoholism is significantly higher, as well as the risk of this alcoholism not being detected. One of the indicators for the mentioned is certainly the empirical presentation of the increase in the number of drinks consumed per occasion during quarantine, but also the fact that the

increase in alcohol consumption occurs to a greater extent in middle age persons. Youthful drinking is more closely related to hedonistic drinking. Young people drink more, but also because of society, while the older population drinks less, but they are culturally and socially regulated [17]. That there was no increase in alcohol consumption among young people during quarantine can be explained by the fact that this social dimension was reduced, while the increase in alcohol consumption in middle age is the result of the inability to cope with stress and accumulated family life. So even the empirical data are leading us to explain and understand this phenomena in the domain of sociology.

This paper provides a theoretical analysis of pandemic alcohol consumption as well as an analysis of the risk of accompanying social and medical pathology - alcoholism. Values and social patterns that acted as a kind of regulators of alcohol consumption during the pandemic, and especially during quarantine, were set aside, as they were related primarily to the sociability of the consumption itself. As there was no social interaction, alcohol consumption was not socially meaningful. Yet, within alcohol itself, social meaning exists in an alternative way, and that is the acceptance of alcohol as a substance with which we are allowed to relax during times of high stress (which is ultimately woven into our common sense knowledge). At the time of a pandemic, alcohol acquires a greater individual, rather than social/collective meaning. This is where potential public health problems for the future arise. Namely, society is a protective mechanism of alcohol consumption. Due to society and the value/situational regulations of drinking, alcoholism remains largely the exception and possibly even a rule. Without these regula-

tions, society in a pandemic remains in a value vacuum against alcohol consumption: where there are no limits to consumption ('no one will complain to us about what we drink and how much we drink'), and it is also tempting to us as a means of reducing the stress ('because in the end, who wouldn't drink in the situation we're in').

Because of this non-social drinking, potential alcoholism may remain unrecognized primarily due to the impossibility of social sanction (etiquette) of one who practices illicit alcoholism. In the gradual relaxation of society after the pandemic, both structural and value frameworks are revitalized. Alcohol as a substance will regain its social meaning and importance in achieving social solidarity. Labelling and sanctioning illicit drinking will once again become a practice of approving and protecting the allowed drinking. However, the period of negation of these social elements (during the quarantine and pandemic) will remain as an insufficiently healed wound ready to open at any moment. Individualized drinking in the future, and based on this theoretical analysis, may prove to be a potential factor in future increases in alcoholism rates. This estimated increase is the new challenge that awaits the public health system in the upcoming period.

### Acknowledgements

None.

### Conflict of interest

None to declare.

### Funding Sources

None.

### References

1. Durkheim E. *Pravila sociološke metode*. Zagreb: Jesenski and Turk; 2014.
2. Weber M, Tribe K. *Economy and Society: A New Translation*. Harvard: Harvard University Press; 2019.
3. Horton PB, Hunt L. *Sociology* (second edition). New York: McGraw; 1968.
4. Županov J, Šporer Ž. *Sociology on the Crossroad*. *Revija za sociologiju*. 1985;15:53-65.

5. Biddle N, Edwards B, Gray M, Sollis K. Alcohol consumption during the COVID-19 period: May 2020. Canberra: ANU Centre for Social Research and Methods; 2020.
6. Callinan S, Smit K, Mojica-Perez Y, D'Aquino S, Moore D, Kuntsche F. Shifts in alcohol consumption during the COVID-19 pandemic: early indications from Australia. *Addiction*. 2020;116:1381-8.
7. Oldham M, Garnett C, Brown J, Kale D, Shabab L, Herbec A. Characterising the patterns of and factors associated with increased alcohol consumption since COVID-19 in a UK sample. *Drug Alcohol Rev*. 2021;40:890-9.
8. Consumer Research Association (GfK). Consumer panel FMCG [Internet]. 2021 [cited 23<sup>rd</sup> May 2021]. Available from: [https://cdn2.hubspot.net/hubfs/2405078/cms\\_pdf/fileadmin/user\\_upload/dyna\\_content/de/documents/news/consumer\\_index/gfk\\_ci\\_maerz\\_2020\\_shoppen\\_in\\_zeiten\\_der\\_ansteckung.pdf](https://cdn2.hubspot.net/hubfs/2405078/cms_pdf/fileadmin/user_upload/dyna_content/de/documents/news/consumer_index/gfk_ci_maerz_2020_shoppen_in_zeiten_der_ansteckung.pdf)
9. Koopmann A, Georgidaou E, Kiefer F, Hillemacher T. Did the General Population in Germany Drink More Alcohol during the COVID-19 Pandemic Lockdown? *Alcohol Alcohol*. 2020;55:698-9.
10. Chodkiewicz J, Talarowska M, Miniszewska J, Nawrocka N, Bilinski P. Alcohol Consumption Reported during the COVID-19 Pandemic: The Initial Stage. *Int J Environ Res Public Health*. 2020;17:4677.
11. Sutlović D, Mandić S, Korać N, Nestić N, Horvat V, Vapa I, et al. Increase in alcohol consumption during the Covid-19 lockdown: Truth or false? *Croatian J Health Sci*. 2011;1:3-11.
12. Brezovec E. Consumption of Alcohol in Croatian Social Reality Alcohol as Part of Interaction Ritual Chain. *Alcohol Psychiatry Res*. 2017;53:139-146.
13. Becker HS. *Outsiders: Studies In The Sociology Of Deviance*. New York: The Free Press; 1966.
14. Dragojević R. The Life-World Landscape of "Well-Informed Alfred Schütz". *Revija za sociologiju*. 1996;27:85-96.
15. Moos RH, Brennan PL, Fondacaro MR, Moos BS. Approach and avoidance coping responses among older problem and nonproblem drinkers. *Psychol Aging*. 1990;5:31-40.
16. Belak Kovačević S. Stres i suočavanje kod ovisnika o opijatima [master's thesis]. Zagreb: Faculty of humanities and social sciences, University of Zagreb; 2004.
17. Brezovec E. Dimensions of social inclusion and exclusion of alcohol consumption in Krapinsko-Zagorska county [dissertation]. Zagreb: Faculty of humanities and social sciences, University of Zagreb; 2021.

## Društveno pijenje alkohola i alkoholizam za vrijeme COVID-19 krize

**Sažetak:** COVID-19 promijenio je društveni kontekst, ali i našu sposobnost da u njemu djelujemo. Ovaj novi normativ utjecao je i na obrasce pijenja alkohola. Glavni cilj ovog rada je upravo teorijska analiza društvenog pijenja alkohola u kontekstu pandemije COVID-19. U radu se analiziraju načini utvrđivanja individualnog značaja pijenja alkohola. Istražuje se raslojavanje kolektivnih obrazaca u kontekstu pandemije i teoretski se razmatraju pretpostavke budućeg raslojavanja obrazaca pijenja, kao i potencijalni porast alkoholizma. Analiza se temelji na prethodnim istraživanjima o navikama pijenja alkohola tijekom perioda karantene. Stopa pijenja alkohola u studijama se nije značajno razlikovala od one prije karantene. U nekim slučajevima zabilježena je niža stopa pijenja alkohola. Međutim, stopa prekomjernog pijenja i društveno nereguliranog pijenja, pojedinačnog pijenja i povremenog ispijanja većeg broja alkoholnih pića bila je u porastu. Teoretsko objašnjenje koje se može postaviti na temelju prijašnjih istraživanja podupire činjenicu da je društvo odgovorno za reguliranje prihvatljivog pijenja alkohola. U nedostatku društvenih/kulturnih utjecaja, pojedinac pije alkohol za svoje zadovoljstvo - usmjeren je prema sebi, a ne prema društvu. Ukoliko se izgubi društveni i vrijednosni utjecaj pijenja alkohola, pojedinac će biti pod većim rizikom za razvoj ovisnosti o alkoholu. Društvo je zaštitni čimbenik u razvoju ovisnosti o alkoholu. Tijekom pandemije COVID-19 većina pojedinaca nije pila alkohol zbog društvenih obrazaca koje takvo pijenje podrazumijeva (ili je njihov sastavni dio), no pili su zbog unutarnje tjeskobe. Korištenje alkohola u svrhu smirivanja tjeskobe uzrokovane pandemijom, bez individualnog razmišljanja o društvenosti pijenja alkohola je potencijalni budući javnozdravstveni problem.

**Ključne riječi:** COVID-19; pijenje alkohola; sociologija pijenja alkohola; ovisnost



