



# THE EFFECT OF COVID-19 ON ALCOHOL CONSUMPTION AND POLICY RESPONSES

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# COVID-19 Has Significantly Impacted Drinking Behaviours And Correlated Harm



## Volume of consumption increased

Most people did not change their drinking amount but among those who did, a larger proportion increased consumption

Alcohol duty receipts in DEU, GBR and USA increased by 3-5%



## Frequency of consumption increased too

In 11 countries, 43% of respondents increased drinking frequency; 25% decreased frequency

Binge drinking remained constant or, if anything, it decreased slightly



## Place of consumption changed

The hospitality sector, such as hotels, bars and restaurants, was severely hit, other sectors such as retail stores and e-commerce saw increasing sales (e.g. +234% in online purchases in the USA)



## Some groups were most affected

Women, parents of young children, people with higher income and individuals with depressive and anxiety symptoms reported the highest increase in alcohol consumption



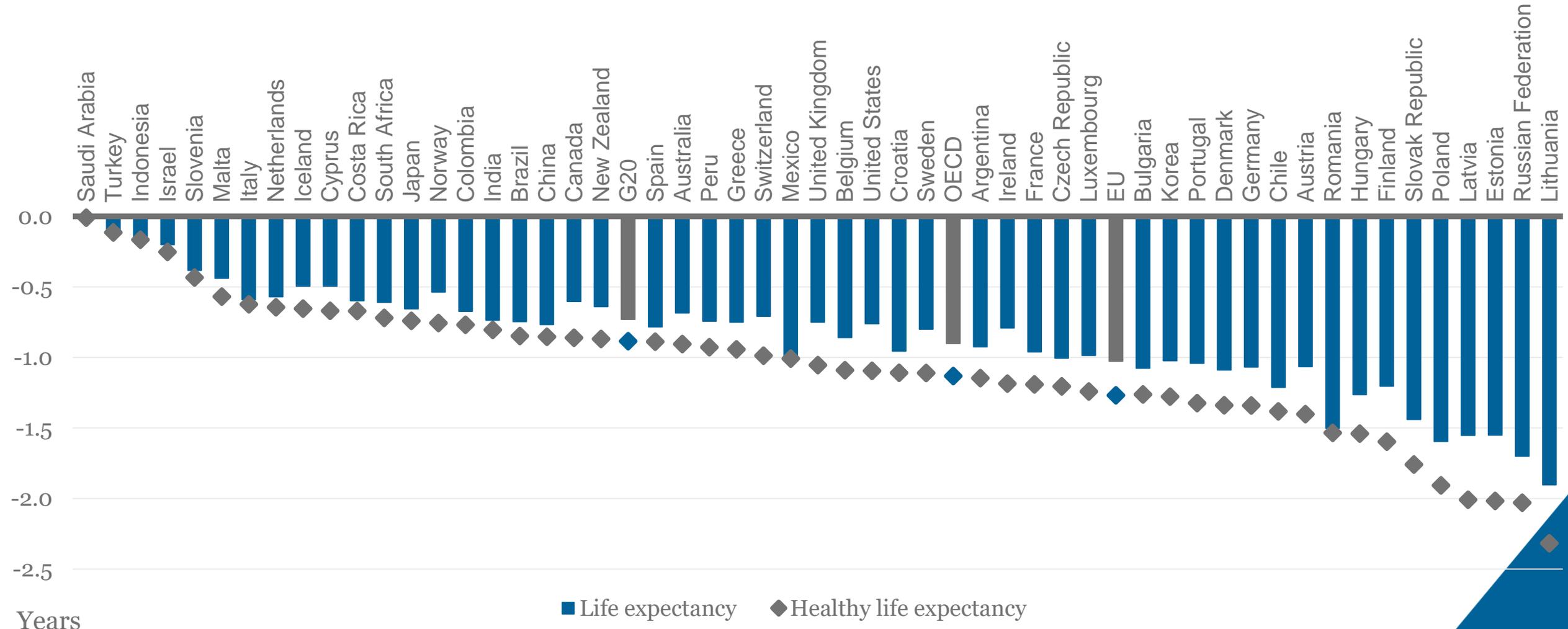
## Domestic violence increased

Domestic violence was exacerbated by lockdowns and stay at home orders

Across EU countries, there has been a 60% rise in emergency calls about domestic violence



# Impact of Drinking Above 1-1.5 drinks/day for women/men on Life Expectancy and Healthy Life Expectancy, average 2020-50



Source: OECD (2021) Preventing harmful alcohol use – [oe.cd/alcohol2021](https://oe.cd/alcohol2021)

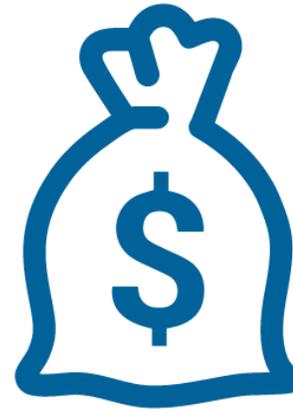


# Diseases Caused by Drinking $\geq 1-1.5$ Drinks/day Carry A Significant Economic Burden For Countries And Individuals



**2.6%**

of healthcare expenditure in EU countries is attributable to conditions caused by drinking  $\geq 1-1.5$  drinks/day for women/men



**1.9%**

Reduction in GDP due to conditions caused by drinking  $\geq 1-1.5$  drinks/day for women/men in G20 countries



**+30%**

Chances to perform well at school in (mainly European) teenagers who have never experienced drunkenness



**177 EUR**

Equivalent tax increase per capita due to conditions caused by drinking  $\geq 1-1.5$  drinks/day for women/men in EU countries



# Gaps Remain In Strategies To Tackle Harmful Alcohol Consumption

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WHO data and evidence in the literature identify some gaps in the policy action to tackle harmful use of alcohol. Key gaps include:

- Only **37%** of the 52 countries analysed have a **written national policy** and an **action plan**;
- **74%** of countries **do not** automatically **adjust** alcohol taxes **for inflation**;
- The **majority** of countries does **not have** the most effective **regulation of advertising**, particularly for social media and sport sponsorships;
- In Europe and the United States, **less than 10%** of people potentially benefitting from **screening and brief intervention in primary care** are covered by this intervention .



# A PPPP Approach Is An Excellent Investment and Addresses Many Of The Current Policy Gaps

## A comprehensive prevention package

**P**olice enforcement to limit alcohol-related injuries and violence;

**P**rotecting children from alcohol promotion;

**P**rimary care to help patients with harmful drinking patterns;

**P**ricing policies to limit the affordability of cheap alcohol.

In 48 countries, over 30 years (2020-2050)



**8.5 million**

Cases of alcohol-related conditions avoided per year



**USD 28 billion**

saved every year due to reduced healthcare expenditure ( $\approx$  health budget of Israel)



**3.9 million**

additional full-time workers per year due to increased productivity



**16:1**

USD 16 returned in economic benefit for each dollar invested, excluding the impact on alcohol industry



# Preventing Harmful Alcohol Use



Do you have questions? Contact us at: [Marion.Devaux@oecd.org](mailto:Marion.Devaux@oecd.org)  
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Data, graphs, country notes and much more at: [oe.cd/alcohol2021](https://oe.cd/alcohol2021)



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