

Monitor 2020

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Introduction

Background

Drinkaware is a charity providing impartial, evidence-based information, advice and practical resources to help people make better choices about their drinking. To support its work in this area, Drinkaware utilises research and evidence to understand the prevalence of different drinking behaviours within the population, as well as the experiences and attitudes of drinkers. This evidence will inform Drinkaware's work to reduce alcohol-related harm and help the charity to determine how and where to focus its efforts.

This report sets out findings from research conducted by YouGov between August and September 2020 into UK adults' behaviour and attitudes in relation to alcohol and other aspects of health and wellbeing (including mental health and work-related issues which may affect wellbeing). This study specifically explored the impact of the Coronavirus pandemic and resulting lockdown on drinking behaviour, other health behaviours, mental health, and working situation. Previously, similar research has been conducted for Drinkaware by YouGov (in 2019, 2018 and 2017) and by Ipsos MORI (2009-2014). Where appropriate, findings from 2020 are reported in the context of those from previous waves of the research.

Objectives

The main objectives of this research were to:

- Provide an overview of adults' drinking behaviour in the UK, including how frequently and how much they are drinking.
- Explore the impact of the COVID-19 pandemic and lockdown on drinking behaviour and other health behaviours such as diet and smoking.
- Investigate the impact of the COVID-19 pandemic and lockdown on mental health and wellbeing, and how any impacts may interact with drinking behaviour.
- Explore how the COVID-19 pandemic and lockdown has affected work situations and patterns, and in turn, how this may interact with drinking behaviour.

Methodology

YouGov interviewed a representative sample of 9,046 UK adults aged 18 to 85 online, between 27th August and 15th September 2020. Data has been weighted to be representative of the UK adult population (aged 18 to 85) according to gender, age, social grade, and region. The sampling and weighting process remains exactly consistent with that used in the 2019, 2018 and 2017 Drinkaware Monitors.

Standardised tools

The following standardised tools and/or definitions were included in the survey and analysis process:

Alcohol Use Disorder Identification Test – Consumption (AUDIT-C)

The Alcohol Use Disorder Identification Test – Consumption (AUDIT-C)¹ provides a composite measure of alcohol consumption levels, incorporating: frequency of drinking, units consumed on a typical occasion, and frequency of drinking 6 units or more (for women) or 8 units or more (for men). These 3 questions each carry a score of 0-4, depending on the answer given. This gives each individual an AUDIT-C score between 0 and 12. Scores for this tool have been grouped as shown in Table 1 below.

Table 1: AUDIT-C categories

Category	AUDIT-C score
Low risk	0-4
Increasing risk	5-7
Higher risk	8-12

¹ Bush, K., Kivlahan, D.R., McDonell, M.B., Fihn, S.D. & Bradley, K.A. (1998). The AUDIT alcohol consumption questions (AUDIT-C): an effective brief screening test for problem drinking. *Archives of Internal Medicine*, 158:16, 1789-1795.

The Drinking Motive Questionnaire: Revised Short Form (DMQ-R SF)

The Drinking Motive Questionnaire: Revised Short Form (DMQ-R SF)² consists of 12 motivations for drinking and a five-point response scale. An individual's responses are used to determine the extent to which they drink for social reasons (e.g. to improve parties and celebrations), enhancement reasons (e.g. because they like the feeling), conformity (e.g. to be liked), or coping reasons (e.g. to improve a bad mood). This measure was included in the survey to enable responses to be analysed according to the different motivations.

Drinking occasions

As part of the 2017 Drinkaware Monitor, a tool was developed for respondents to self-identify the extent to which they engaged in any of a list of key typical drinking occasions (identified by Ally et al., 2016³). The same tool was used again in the 2020 Drinkaware Monitor. The occasions included in the tool were:

- Drinking at home alone
- A small number of drinks at home with the family
- A small number of drinks at home with a partner as a couple
- Several drinks at home with a partner
- Getting together at your or someone else's house
- Going out for a meal
- Evening or night out with friends, with no drinking at home
- Mixed home drinking and night out with friends

² Kuntsche, E. & Kuntsche, S. (2009). Development and validation of the Drinking Motive Questionnaire Revised Short Form (DMQ-R SF). *Journal of Clinical Child and Adolescent Psychology*, 38:6, 899-908.

³ Ally, A. K., Lovatt, M., Meier, P. S., Brennan, A., & Holmes, J. (2016). Developing a social practice-based typology of British drinking culture in 2009–2011: implications for alcohol policy analysis. *Addiction*, 111: 1568–1579. doi: [10.1111/add.13397](https://doi.org/10.1111/add.13397).

Readiness to Change Questionnaire (RCQ) – Short Version

This study also includes a shortened version of the Readiness to Change Questionnaire, developed in the context of alcohol behaviour by Hannover et al. (2002)⁴. Rather than seeking to specify the actual stage of readiness to change people are at, the shortened version of the questionnaire simply seeks to assess the extent to which a person is ready to change by asking those who drink alcohol to say if they agree or disagree that either they don't think they drink too much, sometimes think they should cut down, or are actively trying to cut down on their drinking.

Interpreting the data

Where differences between sub-groups are discussed, only those differences that are statistically significant are reported (unless otherwise stated). These differences are statistically significant to a confidence level of 95%.

Please also note that throughout the report we use rounded percentages. Figures may not always sum to 100% where appropriate due to this rounding but will remain within a percentage point.

⁴ Hannover, W., Thyrian, J. R., Hapke, U., Rumpf, H.-J., Meyer, C., & John, U. (2002). The Readiness to Change Questionnaire in subjects with hazardous alcohol consumption, alcohol misuse and dependence in a general population survey. *Alcohol and Alcoholism*, 37(4), 362-369.

Executive summary

The 2020 Drinkaware Monitor should be considered in the unique and unprecedented context of the Coronavirus pandemic. The pandemic has changed British society and its repercussions will be felt for years to come.

The nationwide lockdown that was enacted in March 2020 and the ongoing restrictions have changed the lives of everyone in Britain and it is unsurprising that many turned to food or alcohol.

The reasons behind turning to alcohol are complex and for many are considered situational and temporary. However, with the pandemic still prevalent and restrictions still in place at the time of writing, these behaviour changes could have long term health implications.

State of the nation on drinking levels

- More UK adults are drinking four times a week or more than in previous years with the proportion increasing from 16% in 2019 to 19% in 2020, which may reflect different patterns during lockdown. This increase is mainly driven by women and adults aged over 55. However, there has been little change at overall level with around half (52%) of adults drinking at least once a week and around four-fifths (83%) drinking at least once a year, results in line with 2019.
- The nationwide lockdown imposed by the UK Government in March 2020 does not appear to have affected alcohol consumption at an overall level when compared with previous years. Weekly consumption of alcohol remains unchanged since the 2018 Monitor (when this data was last collected) with the majority (80%) drinking at low risk levels (0-14 units a week) or not at all. However, women are more likely to report drinking above this threshold than in 2018 (14% vs. 12%).

- There have also been no significant changes in the overall prevalence of harmful drinking as determined by AUDIT-C score⁵. By this measure, three-fifths (60%) of the UK adult population are classified as low risk and a quarter (25%) as increasing risk. Around one-in-seven (15%) are higher risk drinkers. Women are more likely to be classified as higher risk drinkers (11%) compared with 2019 (8%).
- Certain demographic groups continue to be more likely to drink at higher risk levels. These include:
 - Men
 - Middle-aged adults (aged 45-54 in particular)
 - ABC1 social grade

Drinking in lockdown

- A quarter (26%) of drinkers reported drinking more than usual in the earlier part of lockdown (from late March to June 2020) while a similar proportion (27%) reported drinking less. In the later part of lockdown (July to August 2020) the proportion drinking more than normal reduced (15%) while the proportion drinking less remained the same (29%). In total, one-in-ten (10%) reported drinking more than normal throughout lockdown while two-fifths (39%) say they drank around the same amount as normal throughout.
- There were demographic differences in who was drinking more than normal during lockdown:
 - Women were more likely to have drunk more than normal than men in the earlier part of lockdown (27% compared with 25%) but men were more likely to have drunk more than normal in the later part (16% compared with 14%)
 - Middle-aged drinkers are more likely to have drunk more than normal throughout lockdown (13% of those aged 35-54 drunk more throughout)
 - Parents of children aged under 18 were also more likely to have drunk more than normal earlier in lockdown (34% compared with 14% of those with no children under 18).

⁵ 'Alcohol Use Disorder Identification Test – Consumption'. Provides a full measure of alcohol consumption levels and risk. See methodology section for a full explanation.

- Reasons for drinking more during lockdown are complex, but the two most commonly given are having more time available (52%) and having less structure to the day/week (50%). This is particularly true for higher risk drinkers who were more likely to report drinking more both earlier and later in lockdown.
- The results suggest that for many, increased drinking during lockdown is also a result of needing support. Those who drank more than normal throughout lockdown are more likely than others to say they drink for enhancement or coping motivations, including to help them when they feel depressed or nervous (19% vs 8% of all drinkers) or to cheer them up when in a bad mood (17% vs 7%).
- Furthermore, those whose mental health was negatively affected by lockdown are more likely to have been drinking more during lockdown. Over a third (35%) of those who experienced a substantial negative impact on their mental health drank more in the earlier part of lockdown compared with 21% of those who experienced only a small impact or no impact at all. The same differences held later in lockdown (20% compared with 12%).
- Lockdown drinking was also affected by job security. Those who had been made redundant are more likely than other workers to have been drinking more than normal both earlier (38%) and later (23%) in lockdown. Those concerned about their job or business (if self-employed) security are also more likely to have been drinking more than normal, both earlier (36%) and later (20%) in lockdown.
- As many cite lack of structure to their day or week or having more time as a reason for drinking more, it is interesting to note that for many who were drinking more than normal earlier in lockdown and then reduced to less than normal, moderation techniques which enforce boundaries on time were more likely to be used.
- Whilst many used moderation techniques to cut back to pre-lockdown levels of drinking, this does not include those who need to the most, as higher risk drinkers are less likely to have engaged in moderation techniques.
- Many drinkers (58%) found that their drinking patterns did not change during lockdown compared to normal. However, one-fifth (19%) reported drinking on more days a week than usual and one-ninth (11%) reported drinking in different situations/settings than usual. Higher risk drinkers are more likely to have changed their drinking behaviours during lockdown than low risk drinkers.

- A third (34%) spent less on alcohol during lockdown than they would normally, while one-fifth (19%) spent more than normal. A quarter (24%) bought a larger amount of alcohol than usual in one go.
- As lockdown restrictions eased, over half (54%) intend to continue drinking the same amount as before lockdown and one in five (21%) intend to cut down. Those who intend to cut down are more likely to have been drinking more than normal in lockdown, suggesting that there is a sense among this group that drinking habits during lockdown are situational rather than a new permanent state of affairs.
- One in seven (14%) have been concerned about someone else's drinking during lockdown. For most (56%) this was a family member or friend outside their immediate household while 37% reported being concerned about someone in their household.

Work

- Workers in certain industries tend to drink more than others with manufacturing (29%), finance and insurance (28%) and electricity, gas, steam and air conditioning supply (24%) featuring the highest proportion of higher risk drinkers. However, it is likely that this is linked to gender balance in these industries, with industries with higher proportions of higher risk drinkers tending to be more male-dominated.
- Key workers are less likely to have been drinking more than normal earlier in lockdown than non-key workers. In total, 30% of key workers drank more than normal earlier in lockdown and 16% drank more than normal later in lockdown.
- There are no differences in alcohol risk or consumption by furlough status with those who were not furloughed during the pandemic just as likely to have been drinking more than normal as those who were. Those who were made redundant were also no more or less likely to have been drinking more during the lockdown.
- Many of those surveyed had begun working from home as a result of the pandemic, when they hadn't previously. This group are significantly more likely to have been drinking more than normal both earlier (36% compared with 29% of those working in the same location) and later (19% compared with 19%) in the lockdown, suggesting that more time spent at home has led to increased alcohol intake.

- Most employees feel positively about how their employer has handled COVID-19. Over two-thirds (68%) agree that their employer has recognised the challenges that staff have faced and a similar proportion (66%) agree that their employer has communicated with staff well. Most working parents (58%) agree that their employer has helped them balance parenting and work.
- For 45% of those in work, COVID-19 has made their job more stressful and the results indicate that this is a factor in increased drinking during lockdown. Half (51%) of those who drank more earlier in lockdown found their jobs were more stressful due to the pandemic. Increased workload (50%) and new operational challenges (49%) are the two main reasons given by respondents for finding work more stressful.
- About two-fifths (38%) of employees have had employer-organised events, either in person or digitally, since the start of the lockdown. Most (63%) of these did not involve alcohol and only 3% of employees found that all employer-organised events involved alcohol.
- Most (57%) are less likely to drink during a virtual social event than an in-person one and only a handful (15%) felt that they drank more with their colleagues during lockdown than they did previously. A third (34%) prefer work events that involve alcohol to those that do not, but more (42%) do not have a preference either way.

Health and wellbeing

- Three-in-ten (31%) ate less healthily during the lockdown and around one-fifth (19%) gained weight. Women are more likely to report a change in diet or weight for the worse than men. Unhealthy behaviours are linked to alcohol consumption, with those eating less healthily and putting on weight more likely to have been drinking more than normal both earlier and later in lockdown.
- Around one-sixth (17%) feel that the pandemic has negatively impacted their mental health to a large or very large extent; this group are also more likely to have been drinking more than normal throughout lockdown (28%).
- Specific mental health problems have also increased during the lockdown with more experiencing stress (43%), anxiety (42%) and depression (40%) compared to before. Higher risk drinkers are more likely to have experienced depression (43%) and sleep problems (39%) than low risk adults (39% and 35% respectively).

- Two-fifths (39%) have spoken to someone about health issues since the start of lockdown. The most common source of support is friends or family (22%) followed by a GP (17%) or other health professional (9%).
- Those who drank more than normal in lockdown are more likely to have spoken to someone about health issues. Of those who drank more than normal earlier in lockdown, 45% had done so compared with 35% of those who drank the same amount as normal and 40% of those who drank less than normal. Similarly, 47% of those who drank more than normal later in lockdown spoke to someone compared with 35% who drank the same as normal and 42% who drank less than normal.
- Due to the pandemic, most accessed support from a GP remotely with 84% speaking to them over the phone and only 26% doing so in person. Most found accessing support remotely to be a positive experience; two-thirds (68%) who spoke to their GP remotely found it helpful.
- Only a minority (5%) of those who contacted a GP or health professional discussed alcohol consumption with them. However, those who reported drinking more alcohol than usual during lockdown are more likely to have talked about alcohol consumption with their GP. One in nine (11%) of those drinking more than normal earlier in lockdown did so, as did the same proportion of those drinking more later in lockdown.
- A third (33%) have used a website or app to monitor their health, but only a tiny minority (3%) have used one to manage their alcohol consumption. However, three in ten (31%) drinkers would be willing to use one and higher risk drinkers (42%) are more willing to do so than increasing (36%) or low (25%) risk drinkers.

Calorie labelling

- Most drinkers (70%) say they are aware of how many calories are in alcoholic drinks and three-fifths (61%) support the introduction of calorie labelling. There are no differences in consumption level, with higher risk drinkers just as likely to support it as low risk drinkers (59% vs 61%)..
- Over half (53%) agree that they would find calorie labelling useful, but fewer (30%) would change the amount of alcohol they drink based on calorie content. This suggests that although calorie content might be helpful it may not have a significant impact on consumption.

- Women are more likely to find calorie labelling useful than men (58% compared with 47%) and are more likely to say that it will affect their choice of drink (35% compared with 23%). Younger respondents are also more likely to be in favour, with 59% saying they would find it useful and 39% that it would affect the amount of alcohol they consume.

State of the nation on drinking levels

Key findings

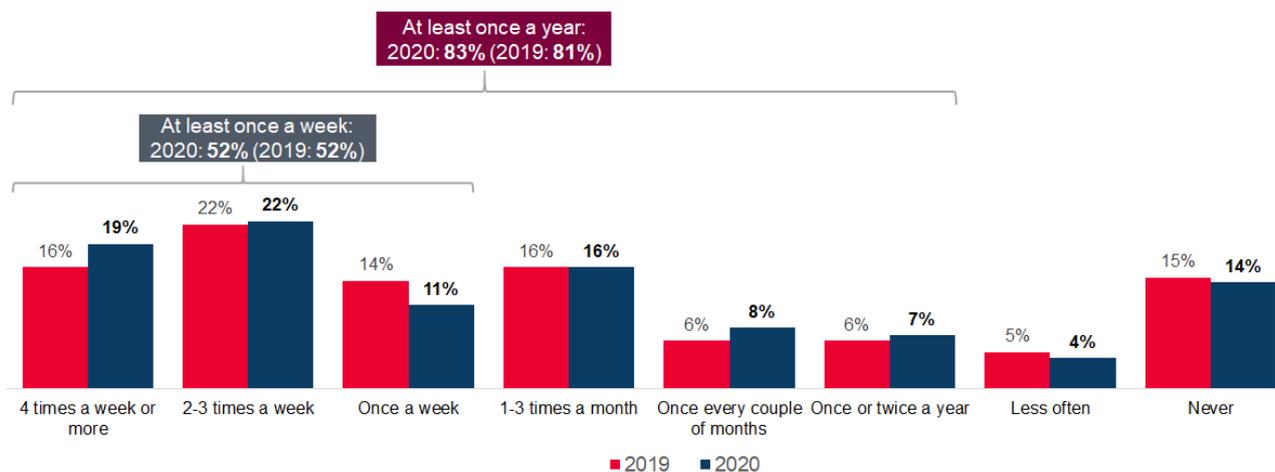
- *More UK adults are drinking four times a week or more than in previous years (16% in 2019; 19% in 2020), which may reflect different patterns during lockdown. It is women and those aged over 55 who are most likely to be drinking more frequently.*
 - *There is no significant difference in weekly alcohol consumption when compared with previous years; this remains unchanged at an overall level since 2018. However, women are more likely to be drinking above the recommended level of 14 units per week, compared with 2018.*
 - *There have been no significant changes in the prevalence of harmful drinking. Three-fifths (60%) of the UK adult population are classified as low risk (AUDIT-C score 0 to 4) with 25% classified as increasing risk (score 5 to 7) and 15% as higher risk (score 8 to 12), consistent with 2019. However, women are now slightly more likely to be classified as higher risk.*
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This chapter provides an overview of alcohol consumption patterns among adults (aged 18 to 85) in the UK, including frequency of drinking and weekly unit consumption. It also includes an in-depth description of higher risk drinkers (defined by the AUDIT-C measure). The Drinkaware Monitor survey tracks how alcohol consumption is changing among the UK public. Findings from this year's report show that despite the pandemic, overall drinking levels have remained consistent with previous years.

Drinking frequency

The vast majority of UK adults drink alcohol, with 83% stating that they do so at least once a year, and 14% stating that they never drink alcohol. As shown in Figure 1, this is consistent at an overall level with the 2019 Drinkaware Monitor, when 83% of adults reported drinking at least once a year (and 15% stated that they never drank). Around half (52%) reported drinking at least once a week, and again this is consistent with 2019. However, the 2020 survey shows an increase in those drinking four times a week or more (from 16% in 2019 to 19% in 2020) which may reflect different drinking patterns during the COVID-19 pandemic and resulting lockdown.

Figure 1: Frequency of drinking alcohol among UK adults, by study year



Base: all UK adults aged 18-85 in 2020 (n=9,046) and 2019 (n=2,145)

As expected, the frequency of drinking varies among different demographic groups. Men are more likely than women to drink on a regular basis, with 57% drinking at least weekly (compared with 47% of women) and 22% drinking four times a week or more (compared with 16% of women). However, the proportion of women drinking four times a week or more shows a significant increase since 2019 (from 12% to 16%). This increase among women accounts for most of the overall increase in drinking at this frequency. Men were similarly likely to drink four times a week or more in 2020 (22%) and 2019 (21%).

Drinking frequency also naturally varies with age. Among 18-34 year olds, under half (44%) report drinking weekly or more often; this rises with age to 52% of 35-54s and 58% of those aged 55+. These proportions are exactly consistent with those seen in the 2019 Drinkaware Monitor. However, the proportions drinking four times a week or more show more variation: among adults aged 55+, there is a significant increase in drinking at this frequency, from 25% in 2019 to 29% in 2020. This change cannot be seen among those aged 18-34 (7% drank four times a week or more in 2019 compared with 8% in 2020), or those aged 35-54 (15% in 2019; 17% in 2020). This shows that the overall increase in drinking four times a week or more is predominantly driven by change among older age groups.

As seen in previous iterations of the Drinkaware Monitor, socio-economic grade also has an impact on drinking levels: 58% of those in ABC1 social grades drink weekly or more often compared with 45% of C2DEs, and this is consistent with the results seen in previous years. The overall increase in drinking four times a week or more appears to apply somewhat more to ABC1s: 19% reported drinking at this frequency in 2019 which has risen to 22% in 2020 (for C2DEs the equivalent figures are 13% and 15%; a non-significant difference).

Among the devolved nations, approximately half reported drinking weekly or more often (52% in England and Wales; 46% in Scotland; 47% in Northern Ireland). These proportions are broadly consistent with previous years.

Weekly consumption

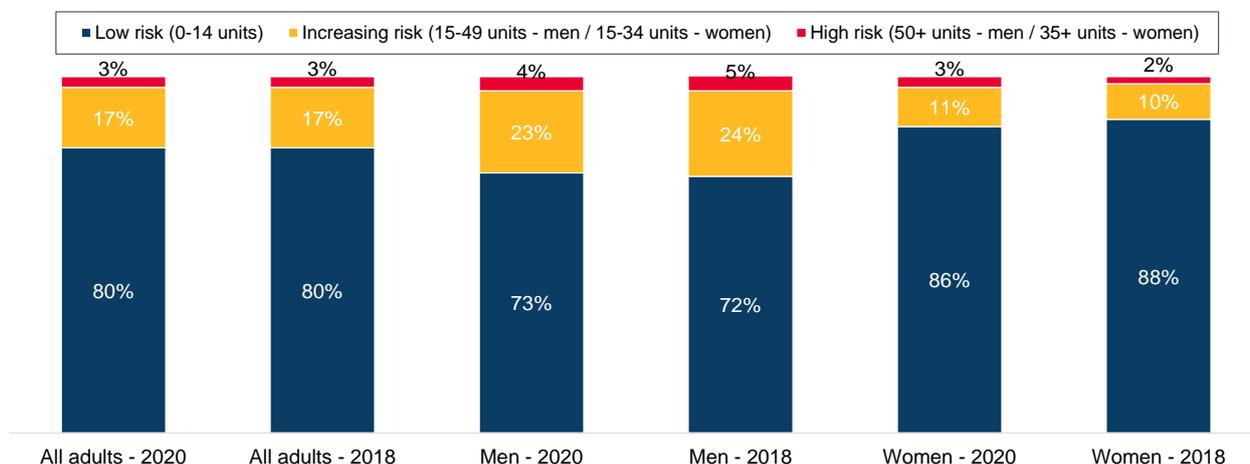
Four-fifths (80%) of UK adults report drinking within the UK Chief Medical Officers' low risk drinking guidelines (or not at all) during the week prior to the interview. In line with guidance from the UK Chief Medical Officers issued in 2016, the low risk drinking guidance is to drink no more than 14 units per week for both men and women. A fifth (20%) of adults report exceeding this recommended limit during the last week, with 17% drinking at increasing risk levels (15-49 units for men, and 15-34 units for women) and 3% falling into the higher risk category (50 or more units for men, and 35 or more units for women).⁶ All these proportions are exactly consistent with those seen in the 2018 Drinkaware Monitor (when this data was last collected).

Figure 2 shows the differences in alcohol consumption between 2018 and 2020 by gender. Men are more likely to exceed the recommended limit: 27% report doing so, compared with just 14% of women. However, for women, this is a significant increase from the proportion seen in 2018 (12%), which likely reflects the increase in women drinking four times a week or more. Among men, the proportion is consistent with that seen in 2018.

⁶ Risk levels mentioned here are different from the AUDIT-C scores discussed above. Public Health England and the National Institute for Health and Care Excellence (NICE) base their alcohol risk classification (weekly units) on models from the Sheffield Alcohol Research Group. 'Increasing risk' is defined by NICE as 15-34 units a week (for a woman) and 15-49 units a week (for a man). Higher risk is regularly drinking above these levels, while lower risk is regularly consuming below them. In contrast, AUDIT-C uses three variables: frequency of drinking, units consumed on a typical occasion, and frequency of drinking 6 /8 units or more.

Men remain more likely to report drinking at higher risk levels (4% compared with 3% of women).

Figure 2: Alcohol unit consumption in the last week among UK adults, by gender and study year



Base: all UK adults aged 18 to 85: 2020 (n=9,046); 2018 (n=8,906)

The likelihood of drinking above the recommended limit of 14 units a week increases somewhat among the middle age groups. Among 18 to 34 year olds, 84% are drinking within the low risk drinking guidelines; this falls to 78% among those aged 35 to 54 and 77% among those aged 55-64, before rising again to 80% among those aged 65 or older. These proportions are consistent with those seen in the 2018 Drinkaware Monitor.

In addition to drinking more frequently, those in ABC1 social grades are also likely to consume more units. Almost a quarter (23%) of ABC1s report drinking at increasing or higher risk levels (15+ units) compared with 17% of C2DEs. The disparity between the two social grade categories is greater than seen in 2018 (when 21% of ABC1s and 19% of C2DEs were drinking at this level), although the year-on-year change for each category is not statistically significant.

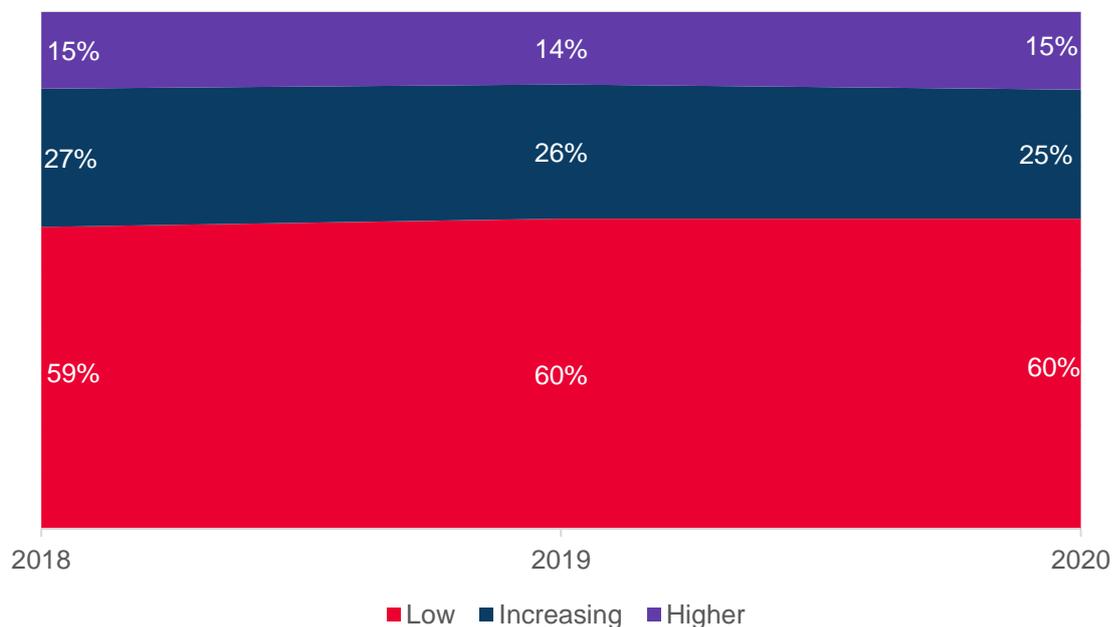
Among the devolved nations, a fifth (20%) in England and Wales, and slightly less in Scotland (18%), and Northern Ireland (17%) reported consuming over 14 units during the week prior to interview. For Northern Ireland, this is a significant decrease since 2018, when 22% reported drinking at this level.

Prevalence of harmful drinking

Harmful drinking is defined using the Alcohol Use Disorders Identification Test (AUDIT-C) scoring system. A risk score is determined by the following brackets: 'low risk' (scoring 0-4 through the AUDIT-C questionnaire); 'increasing risk' drinkers scoring 5-7, and 'higher risk' drinkers scoring 8-12. Within the higher risk category, we also look at the subset scoring 11-12, defined as 'possible dependence'.

At a total level, there have been no changes in the prevalence of harmful drinking since the 2019 Drinkaware Monitor. Three fifths (60%) of the total UK adult population (i.e. including non-drinkers) fall into the 'low-risk' category and a quarter (25%) into the 'increasing risk' category. One in seven (15%) are defined as 'higher risk' drinkers and within this, 3% are defined as 'possible dependence'. Figure 3 shows how AUDIT-C patterns have changed over time and results have been consistent: in 2019 for example the equivalent figures were: low risk 60%; increasing risk 26%, and higher risk 14%.

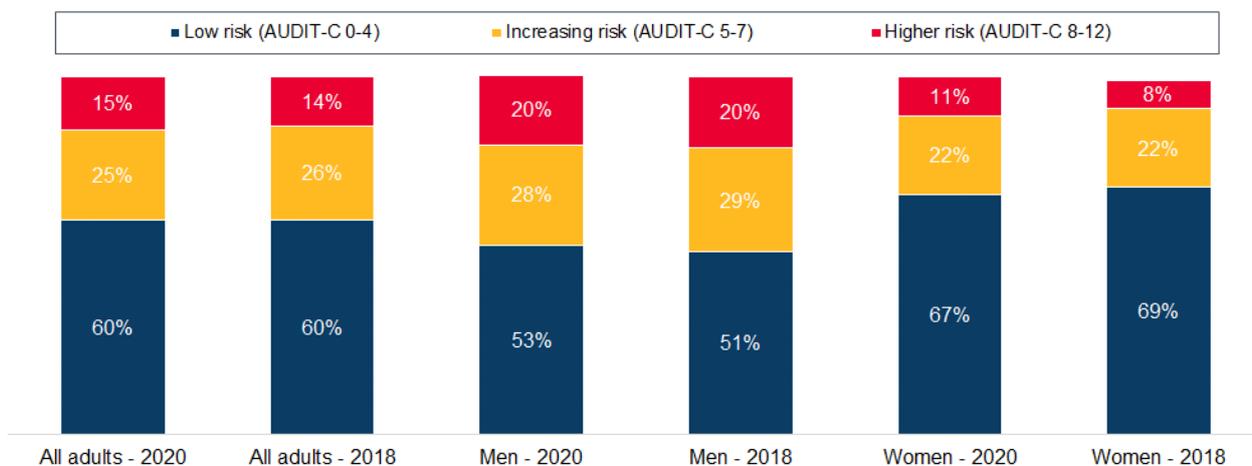
Figure 3: AUDIT-C score by year



Base: all UK adults aged 18 to 85: 2020 (n=9,046); 2019 (n=2,145); 2018 (n=8,906)

In line with earlier findings, women are much more likely to be categorised as low risk (67%) than men (53%) (Figure 4). Almost half (47%) of men are classified as either increasing or higher risk, compared with 33% of women. Most notably, one in five (20%) men exhibit higher risk drinking behaviour, compared with 11% of women. However, for women, this represents a significant increase since 2019, when just 8% were classified as higher risk. The small proportion of people classed as ‘possible dependence’ are predominantly men: 4% of men fall into this category, compared with 1% of women.

Figure 4: AUDIT-C categories among UK adults, by gender and study year



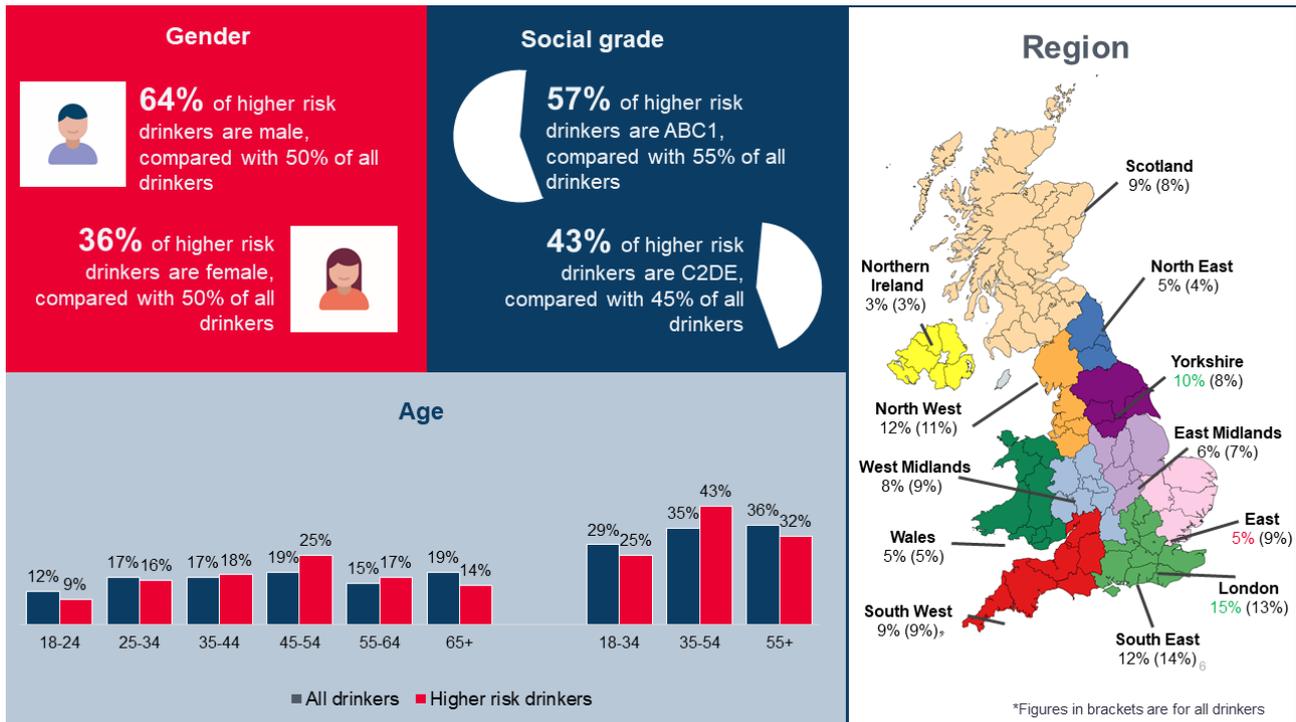
Base: all UK adults aged 18 to 85: 2020 (n=9,046);2018 (n=8,906)

Spotlight on higher risk drinkers

As shown in the visual summary below (Figure 5), higher risk drinkers (AUDIT-C score 8-12) tend to be men (64% compared with half of all drinkers). They are concentrated in the middle age years, but most particularly in the 45-54 age group, which accounts for 25% of higher risk drinkers compared with 19% of all drinkers. They are less likely to be aged 18-24 (9% compared with 12% of all drinkers) or to be aged 65+ (14% compared with 19%).

Higher risk drinkers are indicatively (not significantly) more likely to be in ABC1 social grades than drinkers overall. They are generally spread across the country but are particularly likely to be found in London (15% compared with 13% of all drinkers) and Yorkshire and Humber (10% compared with 8%).

Figure 5: Demographic summary of higher risk drinkers

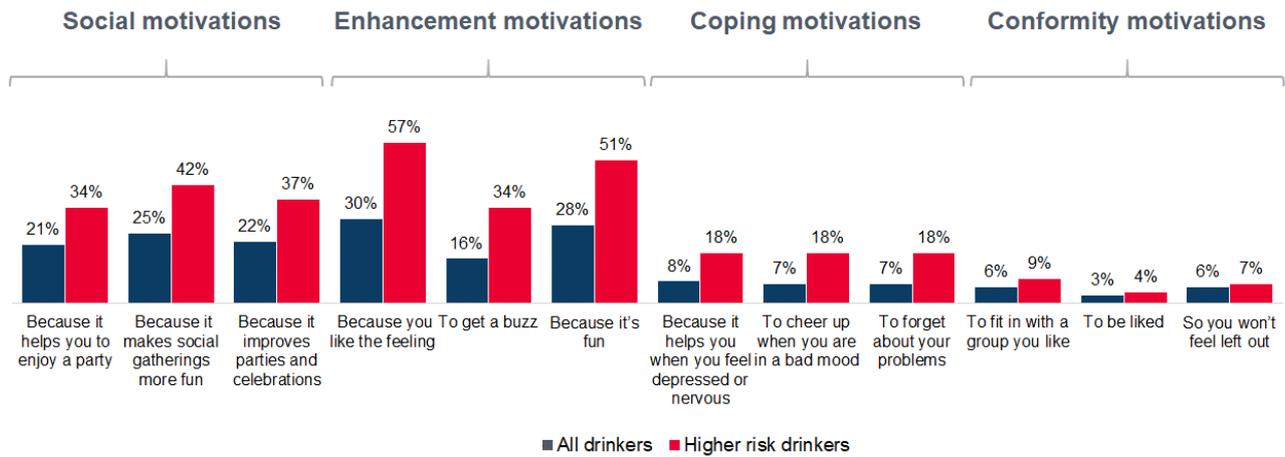


Base: all drinkers (7,825), higher risk drinkers (1,379). Figures in green are significantly higher than the proportion of all drinkers in the region; figures in red are significantly lower

Higher risk drinkers are more likely than drinkers overall to cite most motivations for drinking, but the difference is particularly pronounced for enhancement and coping motivations (Figure 6). Higher risk drinkers are roughly twice as likely to mention each enhancement motivation (for example 34% say they drink to get a buzz most of the time or always, compared with 16% of all drinkers). Similarly, higher risk drinkers are over twice as likely to cite each coping motivation (for example 18% say they drink to cheer up when in a bad mood most of the time or always, compared with 8% of drinkers overall).

Higher risk drinkers are also significantly more likely than drinkers overall to drink due to social motivations, but the difference is not quite so pronounced as it is with enhancement and coping motivations. Conformity motivations are applicable to few drinkers even in the higher risk category, and the only significant difference is in 'to fit in with a group you like' which is cited by 9% of higher risk drinkers compared with 6% of all drinkers.

Figure 6: Drinking motivations among higher risk drinkers (most of the time/always)



Base: all drinkers (n=7,834); higher risk drinkers (n=1,406)

Drinking in lockdown

Key findings

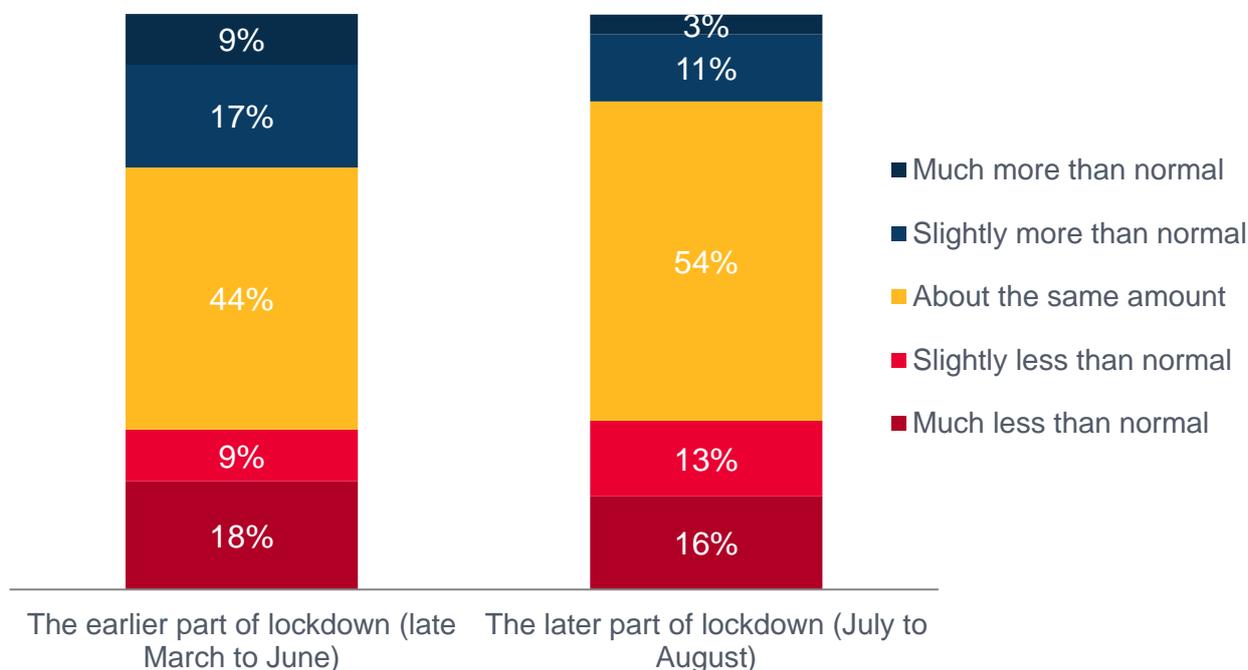
- *A quarter (26%) drank more than usual in the earlier part of lockdown and a similar proportion drank less, while around half drank the same amount. Notably, one in ten drinkers drank more than usual throughout both parts of lockdown.*
 - *There are multiple factors encouraging those that drank more than normal in lockdown to do so, but increased lockdown drinking is linked to concerns over job security as well as a feeling of needing alcohol as a support mechanism; those struggling with their mental health are more likely to have drunk more.*
 - *Many (58%) found that their drinking behaviours did not change during lockdown compared to normal. However, one-fifth (19%) reported drinking on more days a week than usual and one-ninth (11%) reported drinking in different situations/settings than usual. A third (34%) spent less on alcohol during lockdown than they would normally, while one-fifth (19%) spent more than normal.*
 - *As lockdown restrictions ease, over half (54%) intend to continue drinking the same amount as before lockdown and one in five (21%) intend to cut down. Those who intend to cut down are more likely to have been drinking more than normal during lockdown, suggesting that there is a recognition among this group that increased alcohol consumption during lockdown was temporary.*
 - *One in seven (14%) have been concerned about someone else's drinking during lockdown. Over half (56%) of this group were concerned for a friend or family member outside their household while 37% were concerned about someone in their household.*
-

In late 2019, the first cases of COVID-19 or Coronavirus were reported in China. By early 2020 the virus had spread to the UK leading to the UK government taking the unprecedented decision to impose a national lockdown on the 23rd March. All non-essential businesses as well as schools and universities were told to close and the entire UK population required to stay at home, being allowed to leave once a day for exercise or to buy food and supplies. By June, the prevalence of the virus had decreased and restrictions were eased, with some primary school years and some non-essential businesses allowed to reopen. Nevertheless, some restrictions on movement and businesses remained in place throughout summer and autumn 2020. This section explores the impacts, both positive and negative, of the Coronavirus pandemic and resulting lockdown on drinking behaviour. Reference to 'earlier' in lockdown relate to the period late March to June when the greatest restrictions were in place, and 'later' in lockdown relates to July to August when some restrictions had eased.

Quantity of alcohol consumed

As shown in Figure 7, a quarter (26%) of drinkers reported drinking more than normal in the earlier part of lockdown when restrictions were more severe (late March to June) and a similar proportion (27%) reported drinking less than normal. In the later part of lockdown once restrictions had eased somewhat (July to August) the proportion of drinkers who drank more than normal reduced (15%) whilst the proportion of those who drank less remained the same (29%), indicating a return for some drinkers to pre-Coronavirus drinking behaviour in the later part of lockdown.

Figure 7: Amount drunk in lockdown compared to normal

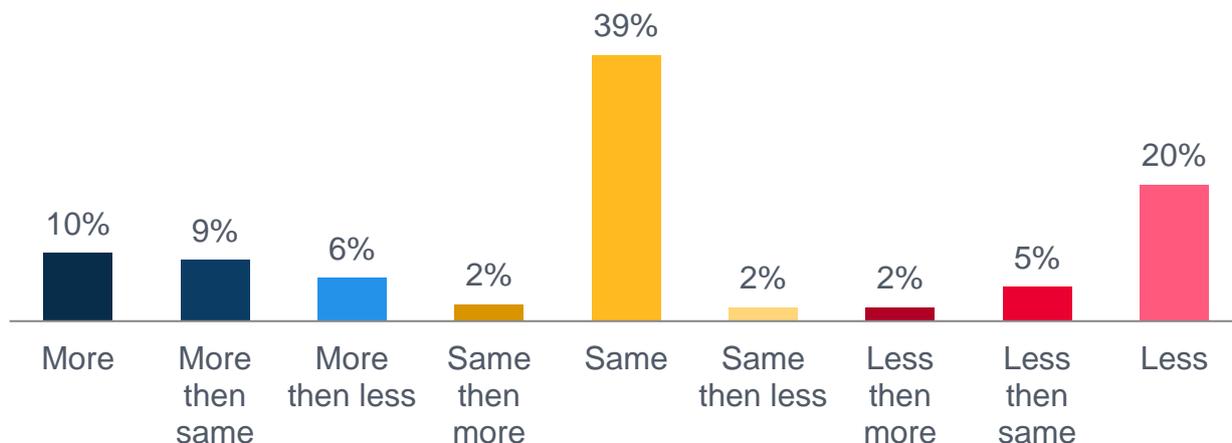


Base: All drinkers (n=7,834)

Figure 8 shows how drinking changed during lockdown for respondents. Two in five (39%) reported drinking the same amount as normal throughout both parts of lockdown, and one in five (20%) drank less than normal throughout.

A smaller proportion (10%) drank more than normal throughout both parts of lockdown, while a further one in eleven (9%) returned to their normal drinking levels in the later part of lockdown after initially drinking more than normal.

Figure 8: Amount drunk during lockdown compared to normal - combined



Base: All drinkers (n=7,834)

Drinking more than normal

In the earlier part of lockdown, women were more likely than men (27% compared with 25%) to have drunk more than normal. However, in the later part of lockdown this was reversed with men more likely to have drunk more than normal than women (16% compared with 14%), as women were more likely to return to their normal drinking levels (11% of women drank more than normal earlier and reverted to usual amounts later, compared with 8% of men). It is worth noting that men tend to drink more than women in general and are therefore more likely to have drunk more in lockdown.

Middle-aged drinkers are the most likely to have drunk more than normal during lockdown, with 13% of those aged 35 to 54 drinking more throughout and 11% drinking more earlier in lockdown before reverting to their usual drinking levels. Those aged 55+ showed the least impact of lockdown on the amounts they drank with half (51%) of this group having drunk the same amount as normal throughout.

Parents of under 18s were more likely than those without children under 18 to drink more than normal earlier in lockdown (34% compared with 14%) and whilst the proportion reduced significantly later in lockdown, they were still more likely than those without children under 18 to drink more than normal later in lockdown (19% compared with 14%).

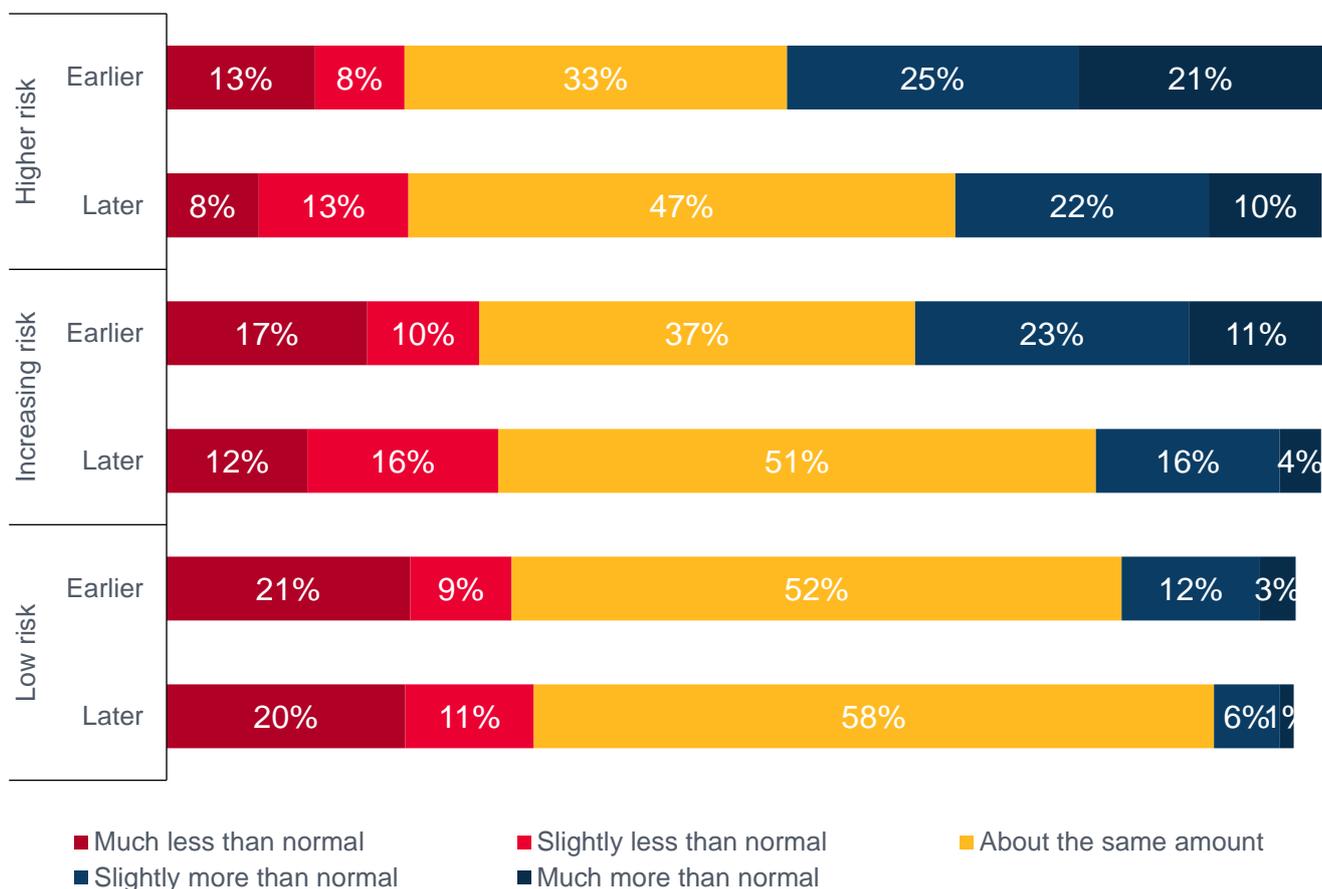
Risk level and drinking more than normal

In the earlier part of lockdown, those categorised as higher risk drinkers (AUDIT-C score 8-12) are most likely to have drunk more than normal (46%), demonstrated by Figure 9.

This compares with 35% of increasing risk drinkers (score 5-7) and 15% of low risk drinkers (score under 5). In the later part of lockdown, the proportion of increasing risk drinkers reporting that they drank more than normal reduced to one in five (19%).

However, whilst a reduction from earlier in lockdown, three in ten (31%) higher risk drinkers drank more than normal later in lockdown. In total, a quarter (24%) of higher risk drinkers drank more *throughout* lockdown.

Figure 9: Changes in drinking patterns earlier and later in lockdown compared to normal – by AUDIT-C risk level



Base: Low risk drinkers (n=4,182); increasing risk drinkers (n=2,246); higher risk drinkers (n=1,406)

Work and drinking more than normal

Redundancy and concern for job or business security were also factors when considering who was drinking more than normal during lockdown.

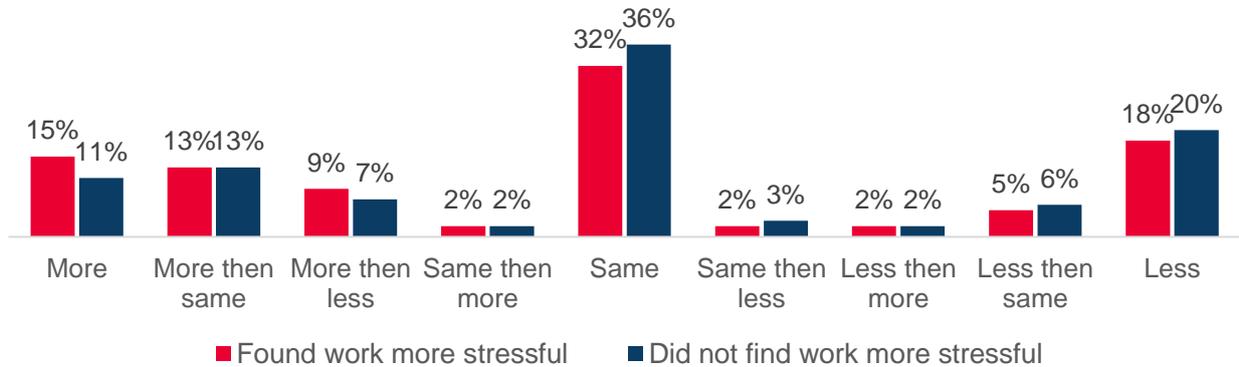
Those who have been made redundant, and particularly those in the consultancy process, are more likely than other workers to have been drinking more, both earlier in lockdown (38% and 50% respectively compared with 25%) and later in lockdown (both 23% compared with 14%).

Further, those who are concerned for either their job security or their business security (if self-employed) were more likely than those who are not concerned to be drinking more than normal both earlier in lockdown (36% compared with 31%) and later in lockdown (20% compared with 15%).

Those who changed their work location were much more likely than those who did not to drink more earlier in lockdown (41% compared with 29%) with over a third (36%) of those who started to work from home drinking more than normal earlier in lockdown. Whilst this reduced to one in five (19%) later in lockdown, this remained significantly higher than those who had no change to their work location (15%).

Work stress also had an impact on drinking behaviour. Those who were finding work more stressful were more likely to drink more than those who did not, both earlier in lockdown (36% compared with 31%) and later in lockdown (19% compared with 15%). Those who found work more stressful are more likely to have been drinking more throughout lockdown (15% compared with 11% of those who did not find it more stressful). As shown in Figure 10, 13% drank more in the earlier part of lockdown before reverting to normal drinking habits in the later part of lockdown around one in ten (9%) drank *less* than normal in the later part of lockdown after initially drinking more. Those who found their job more stressful are also less likely to have drunk the same amount as before throughout lockdown (32% compared with 36%).

Figure 10: Changes to drinking patterns during lockdown by whether work became more stressful

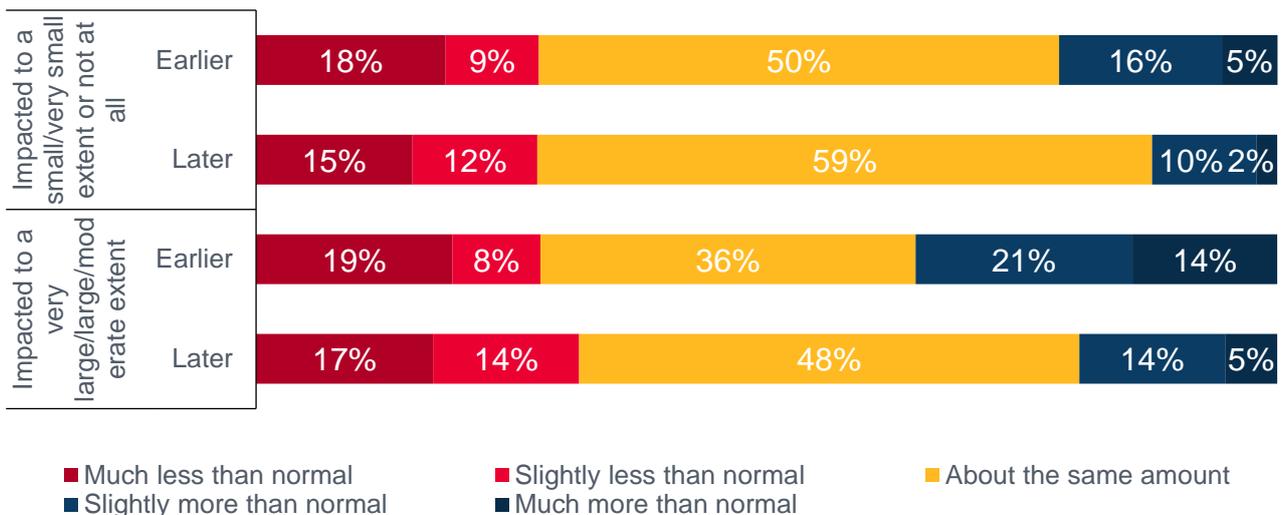


Base: all who found work more stressful (1,983); all who did not find work more stressful (1,260)

Health and drinking more than normal

The wider mental health impact of the pandemic also impacted on drinking behaviours. As shown in Figure 11, those reporting that the pandemic has had a large or moderate impact on their mental health are more likely to report that they drank more earlier in lockdown than those who experienced a small or no impact on their mental health (35% compared with 21%). This difference remained in the later part of lockdown (20% compared with 12%).

Figure 11: Changes in drinking patterns earlier and later in lockdown compared to normal – by impact of Coronavirus on mental health and wellbeing



Base: All drinkers (n=7,834); very large/large/moderate extent (n=2,904); small/very small/not at all (n=4,740)

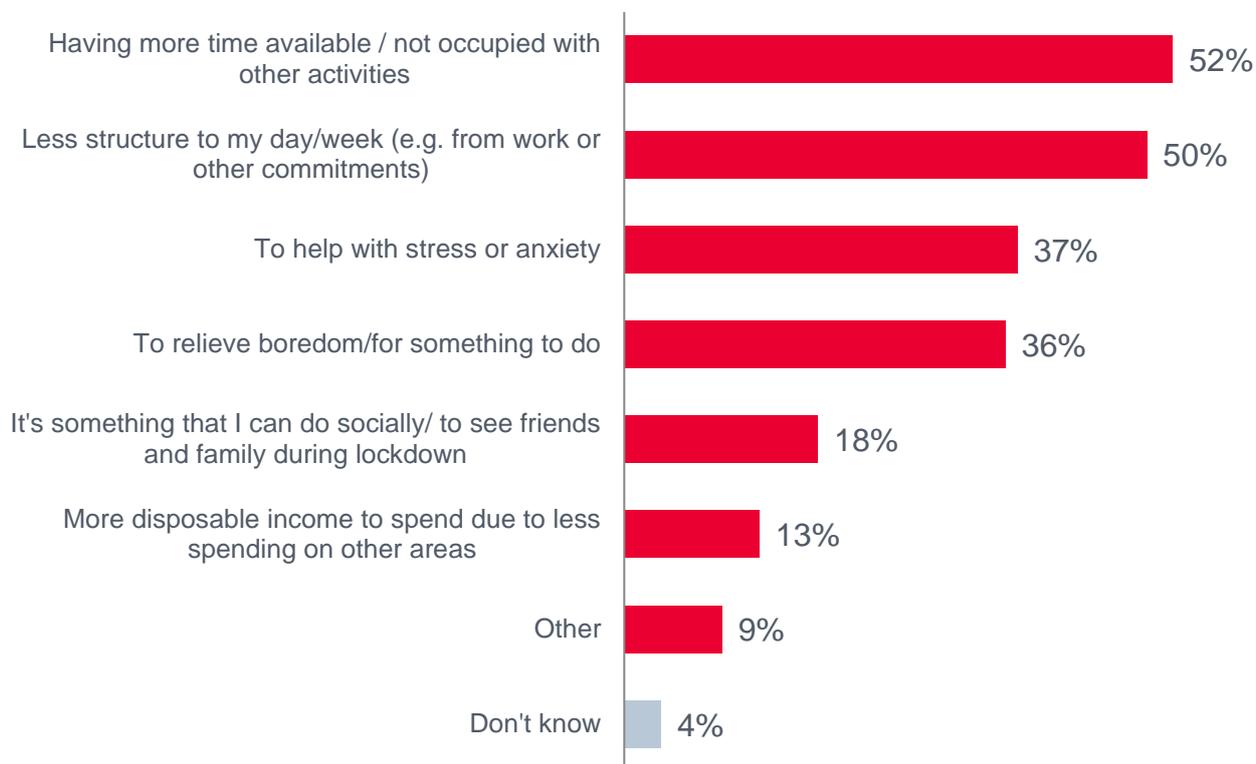
Further, those who take medication for stress, anxiety or depression were more likely to drink more than normal than those not taking medication (29% compared with 25% earlier in lockdown, 19% compared with 14% later in lockdown). Those who started taking medication since the pandemic were especially more likely to be drinking more than normal (35% earlier in lockdown, 23% later in lockdown).

Drinking in lockdown is also related to other unhealthy behaviours. Both earlier and later in lockdown, those who were eating less healthily were more likely to be drinking more than normal (37% earlier and 21% later in lockdown compared with 28% and 16% of those eating more healthily) and those who had gained weight were also more likely to have been drinking more than normal (38% earlier and 21% later in lockdown compared with 21% and 11% of those who had lost weight). Further, among smokers, two fifths (41%) of those who were smoking more than normal were also drinking more than normal earlier in lockdown and over a quarter (28%) later in lockdown. This would suggest that a proportion of those drinking more than normal over lockdown were also engaging in a cluster of other unhealthy behaviours.

Reasons for drinking more

Among those who drank more than normal at any point during lockdown, most frequently the reasons for doing so were having more time available or not being occupied with other activities (52%), having less structure to their day or week (50%) or to help with stress or anxiety (37%) (Figure 12). Over a third (36%) also reported drinking more to relieve boredom or for something to do.

Figure 12: Reasons for drinking more than normal during lockdown



Base: All who drank more than normal during lockdown (n=2,382)

Those in higher risk categories were more likely to report each of the reasons. Over half (57%) of higher risk (AUDIT-C scores 8-12) drinkers reported having more time available as a reason, and a similar proportion (53%) reported having less structure to their day or week as a reason. Further, more than two in five (44%) higher risk drinkers reported to help with stress and anxiety as a reason, increasing to half (52%) of those drinking at possible dependence levels (AUDIT-C scores 11-12).

Perhaps unsurprisingly, those who are currently furloughed are also more likely to cite having more time available (69%) or having less structure to their day or week (65%). Additionally, having less structure to their day or week is higher among those who are working from home (55%), those who are concerned for their job or business security (57%) and those who have experienced a large or moderate negative impact on their mental health (51%).

There is also a relationship with being a parent of under 18s and being more likely to drink more than normal because of stress and anxiety (42%). This is also reflected in more women than men reporting this (42% compared with 32%) and those aged 35-54 being most likely to (43%).

As discussed earlier, the impact of the pandemic on mental health has resulted in some turning to alcohol. This is seen again in these results with those who have experienced a large or moderate negative impact of the pandemic on their mental health citing that they drank more than normal to help with stress and anxiety (51%). Those taking medication for stress, anxiety or depression are also more likely to give this reason for drinking more than normal (55%).

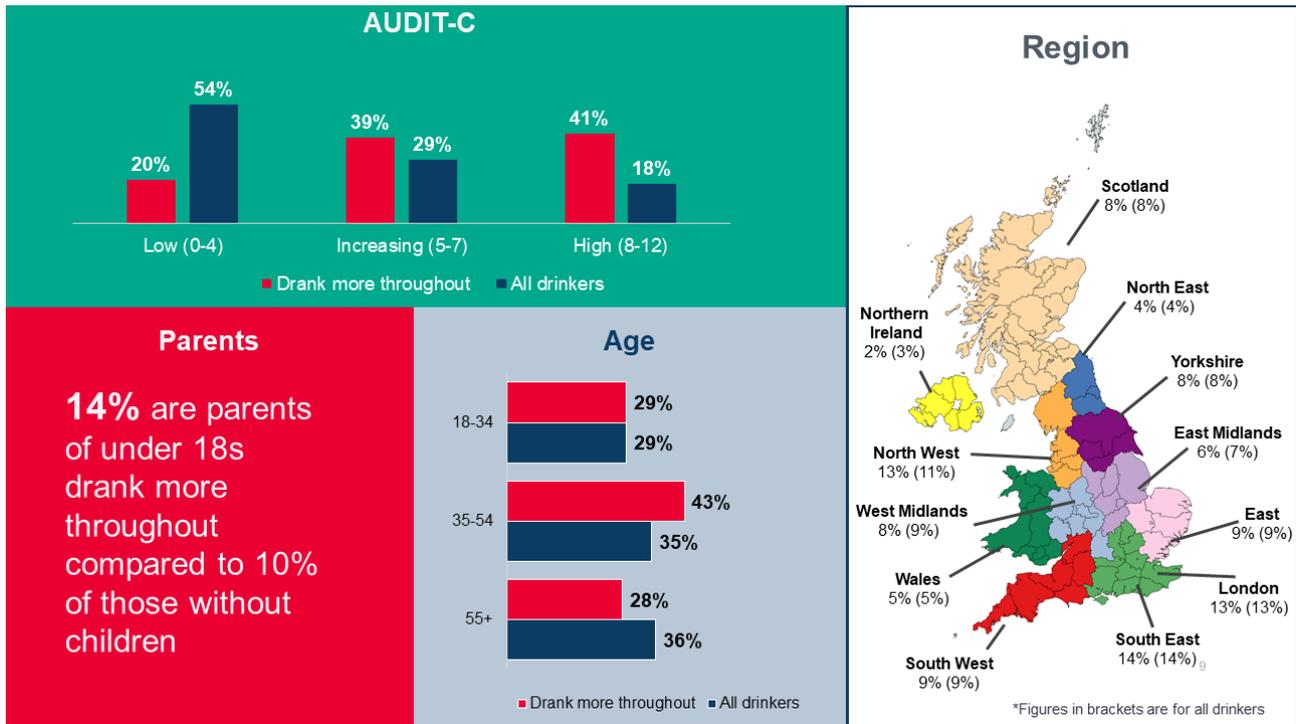
Drinking more than normal throughout lockdown

Whilst some of those who drank more than normal in the earlier part of lockdown then reduced to the same amount or less in the later part, one in ten (10%) drank more than normal throughout lockdown (during both the early part and later part of lockdown).

Figure 13 shows the demographic profile of this group. While there are no significant difference by gender or region, overall, they are more likely to:

- Be middle-aged (43% aged 35-54)
- Have children under 18 (14%)
- Have a higher risk AUDIT-C score (41%)
- Be in an ABC1 social grade (12% compared with 9% of C2DE)

Figure 13: Demographic profile - those who drank more throughout



Base: those who drank more throughout (803); all drinkers (7,834)

There is no difference between those who have been furloughed and those who have not, however those who have been made redundant or in consultation are more likely to have drunk more than normal throughout lockdown than those who are not affected by redundancy (17% compared with 10%). Those who have been made redundant are more likely to cite having less structure to their day as a reason for drinking more (60%) than those who were not which suggests this is behind the higher proportions drinking more throughout lockdown. It is also the case that employees who are concerned about their job security are more likely to have drunk more throughout lockdown than those who are not concerned (15% compared with 11%).

Stress and mental health also show an impact. Those who agree their job is more stressful are more likely to have drunk more than normal throughout lockdown than those who disagree (15% compared with 11%). Further, those who feel the pandemic has had a large or moderate negative impact on their mental health and wellbeing are more likely than those who have experienced a small or no impact to drink more than normal throughout lockdown (14% compared with 8%).

Those who feel that their life has been greatly affected by Coronavirus are more likely than those who disagree to have drunk more than normal throughout lockdown (12% compared with 8%).

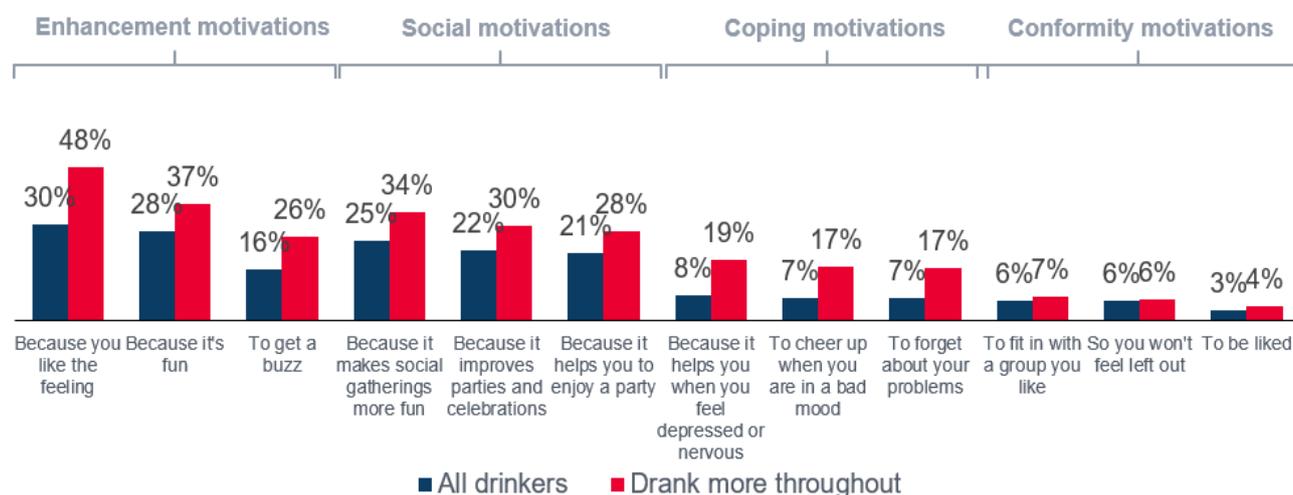
There is also a relationship between other unhealthy behaviours and drinking more than normal throughout lockdown. Those who have eaten less healthily are more likely than those who have eaten the same or more healthily to have drunk more than normal throughout lockdown (16% compared with 9% and 10%) and close to one in six (16%) of those who had gained weight drank more than normal throughout lockdown compared with fewer than one in twelve who maintained the same weight (8%) or lost weight (7%).

Additionally, among those drinkers who smoke, more than one in five (21%) of those who smoked more compared to normally also drank more throughout lockdown, compared with one in ten who smoked about the same as normal (10%) or less than normal (9%).

Motivations and Occasions

When considering motivations for drinking, those who drank more than normal throughout lockdown are more likely than others to drink because of enhancement and coping motivations (Figure 14).

Figure 14: Drinking motivations (most of the time/always)



Base: All drinkers (n=7,834); All who drank more than normal throughout lockdown (n=803)

In particular, almost half of this group (48%) drink (always or most of the time) because they like the feeling, over a third (37%) do so because it's fun, and a quarter (26%) do so to get a buzz.

One in five (19%) drink because it helps when they feel depressed or nervous always or most of the time, and 17% to cheer up when they are in a bad mood. Those who drank more than normal throughout lockdown are also more likely than drinkers overall to drink to forget about their problems (17% compared with 7%).

Across all occasions, those who drank more throughout lockdown are more likely to drink in those situations at least weekly. As they are less motivated by social situations than by coping and enhancement factors, they are more likely to drink in the home. Almost half drink at home alone at least weekly (47%) or have a small number of drinks at home with a partner (49%). Over a third (36%) drink several drinks at home with a partner at least weekly, and three in ten (31%) drink a small number of drinks at home with family. All these proportions are significantly higher than other drinkers.

When compared with others who drank more than normal at either part of lockdown, those who drank more than normal throughout were more likely than each group to give the reasons that they drank more than normal to help with stress or anxiety (46%), or to relieve boredom/for something to do (42%).

Drinking less than normal

In total, 27% drank less than normal in the earlier part of lockdown and 29% drank less than normal in the later part. Certain demographic groups are more likely to have drunk less than normal:

- Those aged 18-24 (38% earlier; 36% later)
- Those in London (33% earlier; 34% later)
- Those from BAME (Black, Asian, and Minority Ethnic) backgrounds (34% earlier; 34% later)

Risk and drinking less than normal

Those with an AUDIT-C score under 5 were unsurprisingly most likely to drink less than normal during lockdown (29% earlier and 31% later). However, these proportions are only slightly lower for increasing risk drinkers (27% earlier and 28% later). By contrast, higher risk drinkers were notably less likely to report drinking less during both phases of lockdown (20% earlier and 21% later).

Work and drinking less than normal

Those who were not in work were more likely to either have been drinking less than normal throughout lockdown or drinking the same amount as usual. Over half (54%) of retirees and those not in work and not looking for work drank the same throughout lockdown, compared with only 35% of those in work. Students were more likely to have drunk less than normal: two in five (42%) reported that they drank less earlier in lockdown and a similar proportion (39%) later in lockdown.

In the earlier part of lockdown, those on flexible furlough were most likely to report that they drank less than normal (35%). Later in lockdown, as furlough ended for some, a third (34%) of those who had been furloughed but returned to work reported drinking less than normal (compared with 27% earlier in lockdown) and at this stage were more likely to report doing so than those who were not furloughed (28%).

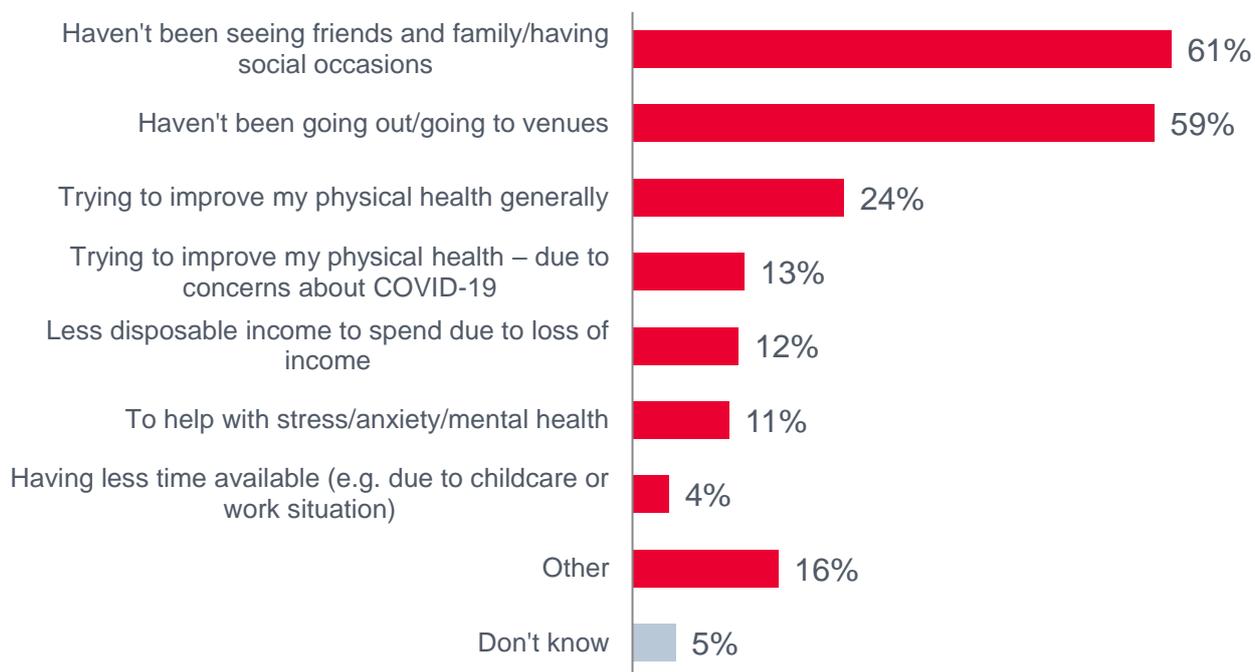
Health and drinking less than normal

Those with healthier habits in lockdown regarding diet and smoking are more likely to have drunk less than normal. Over a third of those who reported eating more healthily also reported drinking less than normal (35% earlier and 37% later in lockdown) and a similar proportion of those who have lost weight (36% earlier and 38% later in lockdown). Further, among smokers, those who reported smoking less than normal were more likely to report drinking less than normal (43% earlier and 45% later in lockdown). What this suggests is that during the lockdown, people were either adopting more healthy habits overall, less healthy habits overall, or staying the same as they were before; what they were *less likely* to do is substitute some unhealthy habits for others (e.g. drinking less but smoking more; eating healthier but drinking more).

Reasons for drinking less

Most commonly the reasons given for drinking less than normal are not seeing friends and family or having social occasions (61%) and not going out or going to venues (59%) (Figure 15). A quarter (24%) report trying to improve physical health generally. When compared with low risk drinkers, each of the reasons are more likely for those who are increasing risk or higher risk.

Figure 15: Reasons for drinking less than normal during lockdown



Base: All who drank less than normal during lockdown (n=2,763)

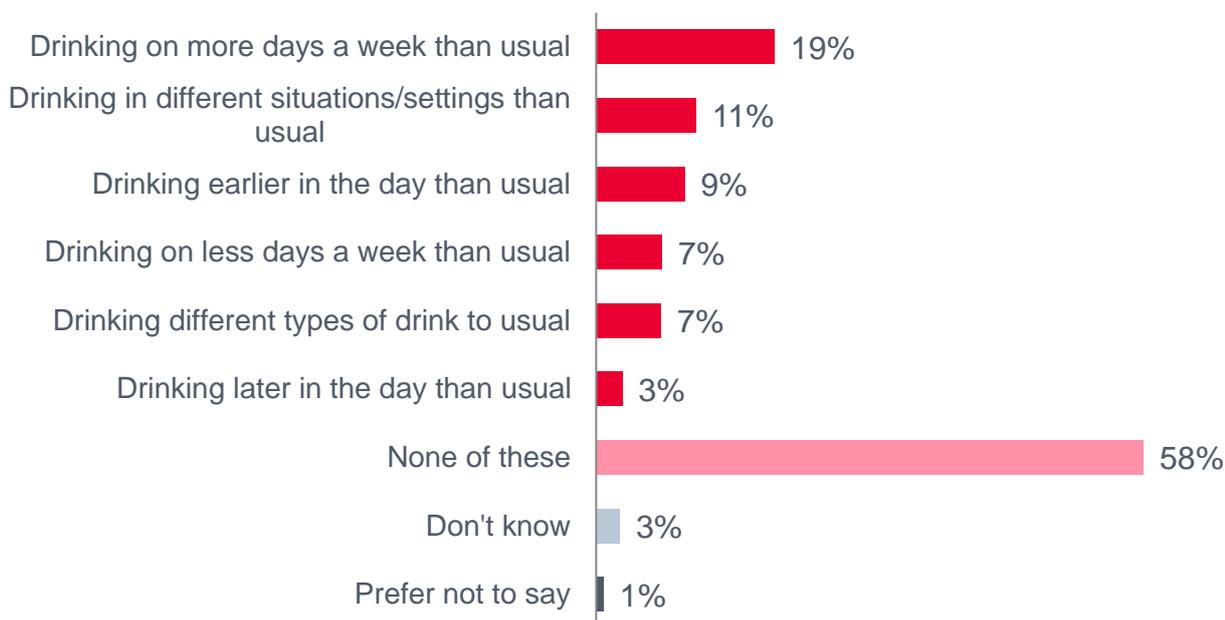
Younger age groups are more likely to report lack of socialising as a reason for drinking less than normal. Among 18-24 years olds, around three quarters cite not seeing friends and family or having social occasions (78%) or not going out or going to venues (74%). Relating to this, students are most likely to cite these reasons (80% and 72% respectively). These reasons are also highest for those living in London (66% and 68% respectively).

Having less disposable income to spend due to loss of income is significantly higher among those who are currently furloughed or were previously (22%) than those who were not furloughed (7%). The same is true for those who have been made redundant or are in consultancy (30%) compared with those who are not (11%) and those who are concerned for their job or business security (22%) compared with those who are not concerned (7%).

Changes to drinking behaviours

As well as understanding whether drinking levels increased or decreased overall, the Monitor survey tracked how drinking patterns changed during the week in lockdown. During lockdown, over half of drinkers (58%) did not report that their drinking behaviours changed compared to normal (Figure 16). However, one in five (19%) report drinking on more days a week than usual and one in ten (11%) report drinking in different situations compared to normal (Figure 16). However, one in five (19%) report drinking on more days a week than usual and one in ten (11%) report drinking in different situations/settings than usual.

Figure 16: Changes to drinking behaviour during lockdown compared to normal



Base: All drinkers (n=7,834)

There is a relationship with age with those aged 55+ most likely to report that their drinking behaviours did not change compared to normal (72%), significantly higher than both those aged 35 to 54 (55%) and those aged 18-34 (45%).

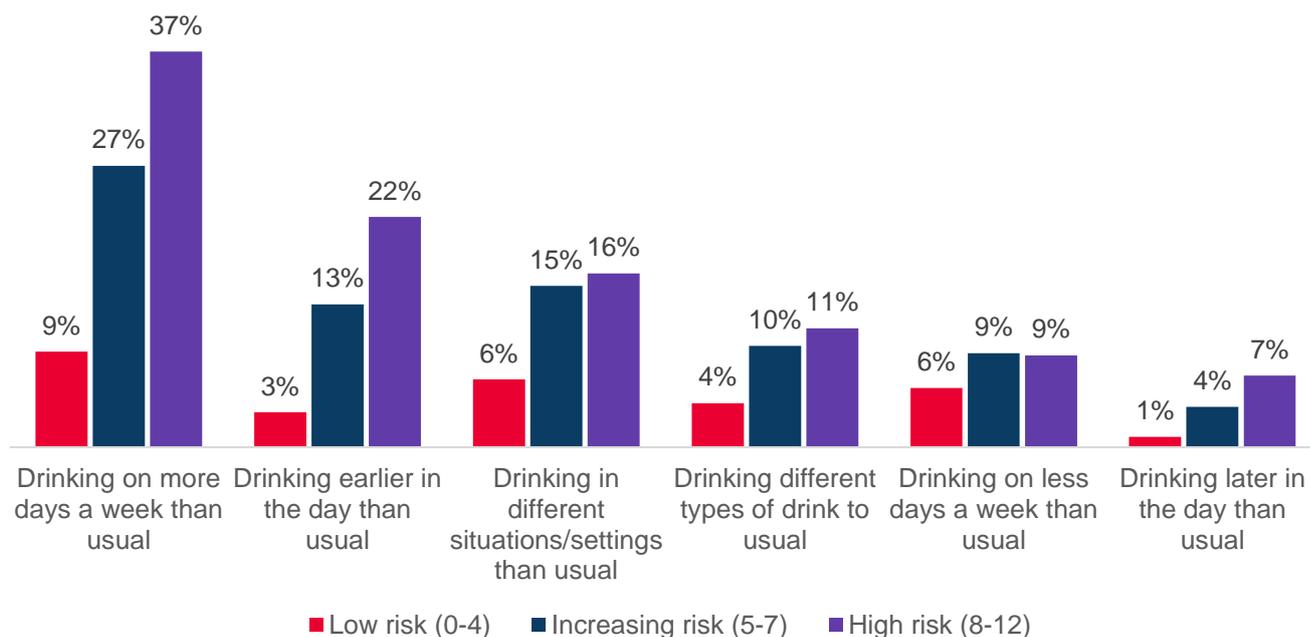
Parents of under 18s are more likely to have changed drinking behaviours than those without children under 18. They are more likely to drink on more days a week than others (26% compared with 17%) and are more likely to drink earlier in the day than usual (12% compared with 9%).

Risk and changes to drinking behaviours

Higher risk drinkers (AUDIT-C scores 8-12) are most likely to have changed drinking behaviours compared with low risk drinkers (AUDIT-C scores 0-4) and increasing risk drinkers (AUDIT-C scores 5-7). Only a third (33%) of higher risk drinkers reported that their drinking behaviours had changed in the ways listed, significantly lower than both increasing risk drinkers (45%) and low risk drinkers (74%).

As shown in Figure 17, higher risk drinkers were particularly more likely to be drinking on more days a week than usual (37% compared with 27% increasing risk and 9% low risk drinkers) and to drink earlier in the day than usual (22% compared with 13% increasing risk drinkers and 3% low risk drinkers). Higher risk and increasing risk drinkers are also more likely to have been drinking in different situations or settings than usual (16% and 15% compared with 6% of low risk drinkers).

Figure 17: Changes to drinking habits in lockdown by AUDIT-C score



Base: low risk (4,182), increasing risk (2,246), higher risk (1,406)

Work and changes to drinking behaviours

Those whose working status and situation has been less affected by the pandemic were more likely to report that their drinking behaviours did not change during lockdown. Over half (56%) of key workers⁷ who drink reported that their drinking behaviours had not changed compared with half (49%) of those who are not key workers. Similarly, those who were not furloughed were more likely than those currently or previously furloughed to report that their behaviour has not changed in the ways listed (53% compared with 46%), as are those who have not been affected by redundancy compared with those who have been made redundant or are in consultancy process (60% compared with 37%).

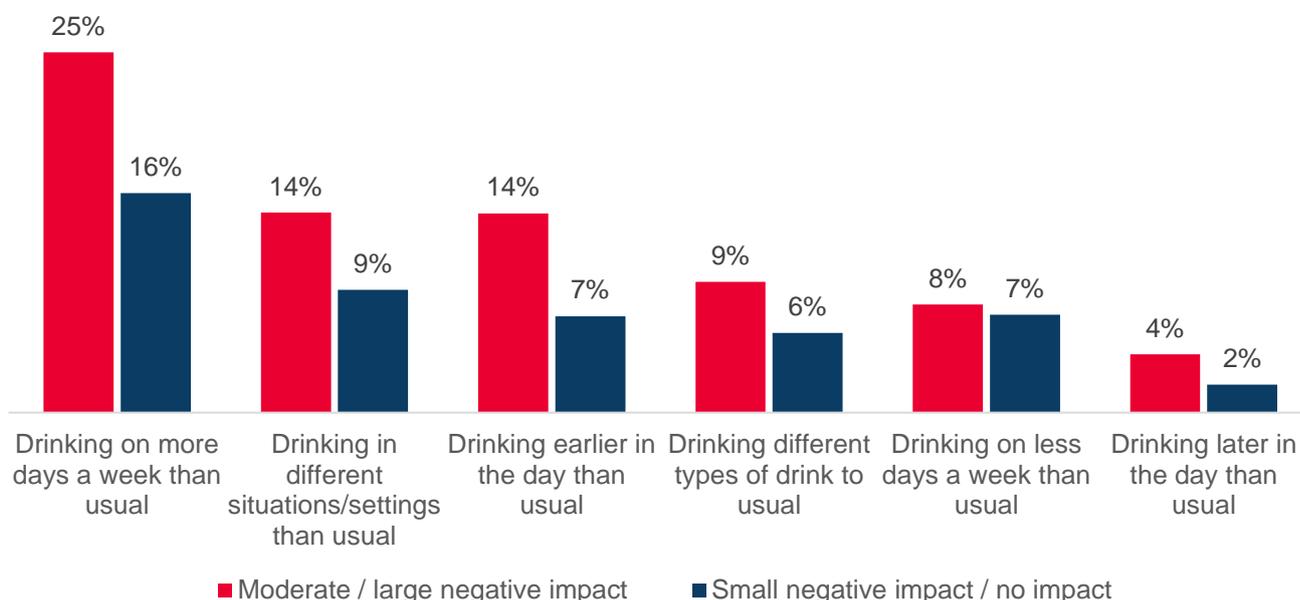
Those who find work more stressful are more likely than those who do not, to be drinking on more days a week than usual (28% compared with 23%) or to be drinking earlier in the day than usual (14% compared with 10%).

Health and changes to drinking behaviours

Those whose mental health was negatively impacted by Coronavirus are more likely to have changed their drinking behaviours, shown by Figure 18. Across all behaviours, with the exception of drinking on less days a week than usual, more drinkers who reported a large or moderate negative impact on their mental health reported doing this than those whose mental health was only impacted to a small extent or was not impacted at all. In particular, they are more likely to be drinking on more days a week than usual (25% compared with 16% small or no impact), drinking earlier in the day than usual (14% vs 7%) and drinking in different settings (14% vs 9%).

⁷ Key workers were defined in the survey as follows: 'By key worker, we mean that your job role is essential and critical to the Covid-19 response and falls under one of the categories listed by the government. This includes health and social care, education and childcare, key public services, local and national government, food and other necessary goods, public safety and national security, transport and utilities, communication and financial services.'

Figure 18: Changes to drinking habits in lockdown by impact of Coronavirus on mental health



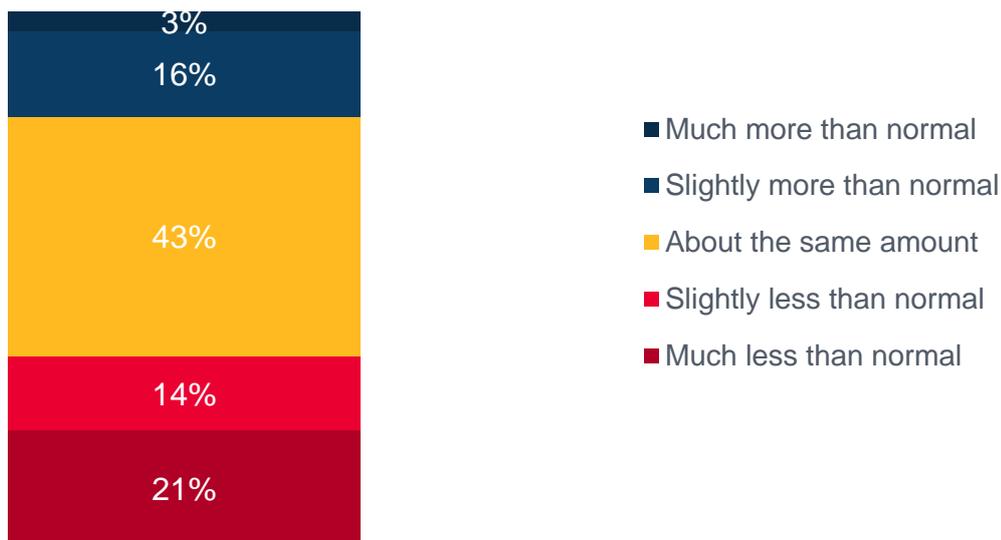
Base: moderate / large impact (2,904); small negative impact / no impact (4,740)

Further showing the impact of the pandemic on drinking behaviours, drinkers who agree that their life has been greatly affected by Coronavirus are more likely to have changed drinking behaviours than those who disagree their life has been greatly affected (47% compared with 38%). The former are more likely to be drinking on more days a week than usual (22% compared with 16%) and drinking in different situations or settings than usual (14% compared with 7%). Those who are most likely to agree that Coronavirus has greatly impacted their life are more likely to have been impacted in the workplace. Over two-thirds (68%) of those who have been made redundant or who are in consultation say Coronavirus has greatly affected their life as do 62% of those concerned about their job security. It could therefore be that increases in drinking behaviours are related to problems or disruption at work.

Spend on alcohol

Figure 19 shows how the amount spent on alcohol changed during lockdown. A third (34%) of drinkers report spending less on alcohol than they would normally, and one in five (19%) report spending more than normal. Further, a quarter (24%) bought a larger amount of alcohol than usual in one go, with one in six (17%) having done so more than once.

Figure 19: Spend on alcohol compared to normal



Base: All drinkers (n=7,834)

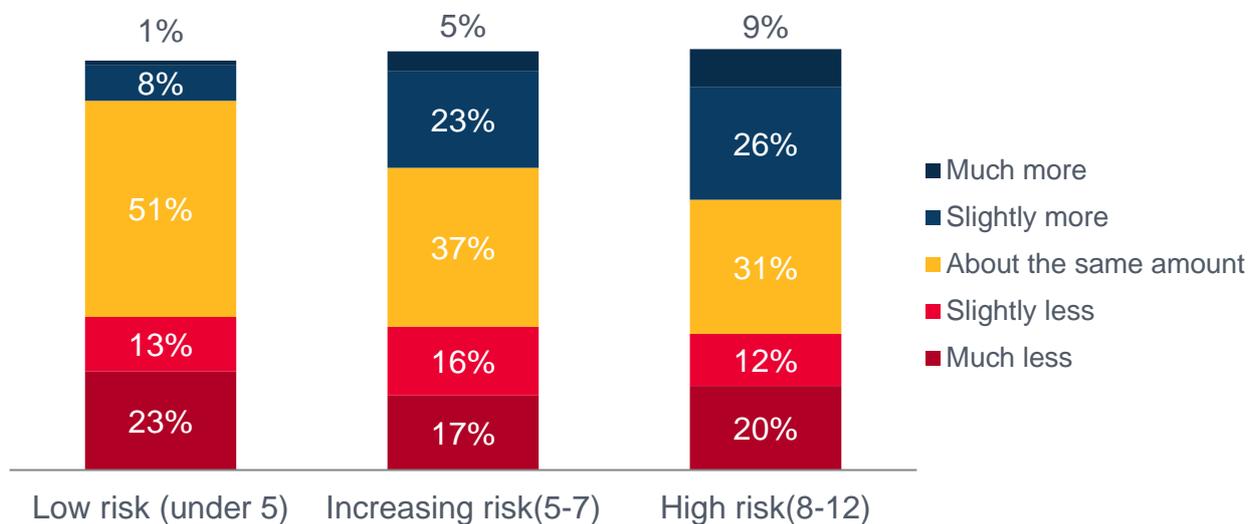
Reflecting changes to drinking behaviours, groups who were more likely to be drinking more than normal during lockdown were also more likely to have spent more than normal and to buy larger amounts of alcohol in one go.

A quarter (24%) of drinkers aged 35 to 54 spent more on alcohol than they would normally, significantly more than those aged 18 to 34 (19%) and those aged 55+ (14%). They were also more likely to have bought a larger amount of alcohol than usual in one go more than once (22% 35 to 54s compared with 16% 18 to 24s and 14% 55+). This in part is reflected by parents of under 18s being more likely to have spent more than normal than those without children under 18 (27% compared with 17%) and to have bought a larger amount more than once (21% compared with 16%).

Figure 20 shows how amount spent on alcohol connects to AUDIT-C score. As they are more likely to have been drinking more than normal during lockdown, higher risk drinkers are more likely to have spent more than normal on alcohol (35%), significantly higher than

increasing risk drinkers (27%). Both groups are significantly higher than low risk drinkers (9%) who were most likely to have been spending the same amount (51%) or less (36%) than normal.

Figure 20: Spend on alcohol compared to normal by AUDIT-C level



Base: all low risk drinkers (4,182), increasing risk (2,246), higher risk (1,406)

Over two in five (43%) higher risk drinkers bought a larger amount of alcohol more than once compared with a quarter (24%) of increasing risk drinkers and just one in twenty low risk drinkers (5%).

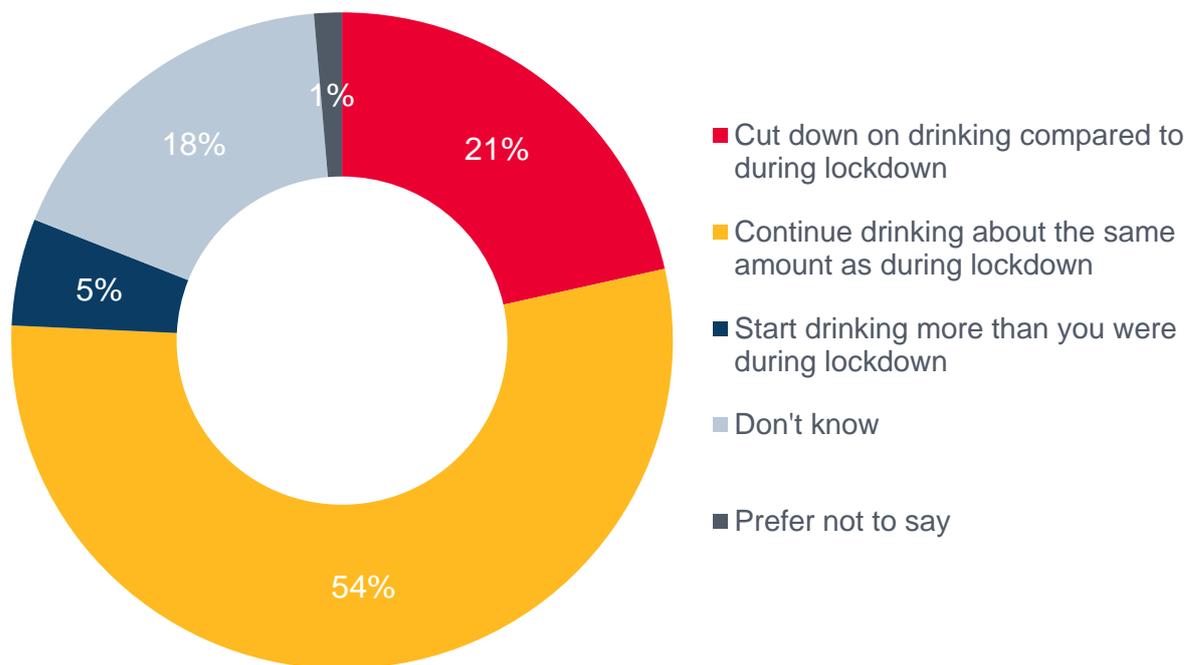
Those who have been made redundant or are in consultation are more likely than those who are not to have spent more on alcohol (26% compared with 19%) and to have bought a larger amount more than once (24% compared with 17%). Those who are concerned for their job or business security are more likely than those who are not concerned to have spent more on alcohol (27% compared with 22%) and bought a larger amount more than once (24% compared with 20%). Those working from home are more likely to have spent more (25%) and bought larger quantities (31%) as well as those who are finding work more stressful (27% and 31%).

Those drinkers who experienced a large or moderate negative impact on their mental health were also more likely to have spent more than normal on alcohol than those who experienced a small or no impact (25% compared with 16%) and to have bought larger quantities more than once (22% compared with 14%).

Future intentions and moderating techniques

Respondents were asked if they intended to change their drinking as lockdown restrictions eased compared to during the lockdown. While intentions often do not reflect actual behaviour, they do give an indication of the respondent’s desire to change and are a useful metric for assessing attitudes. Over half (54%) intend to continue drinking the same amount as during lockdown and one in five (21%) intend to cut down on drinking compared to during lockdown (Figure 21).

Figure 21: Drinking intentions as lockdown restrictions ease



Base: All drinkers (n=7,834)

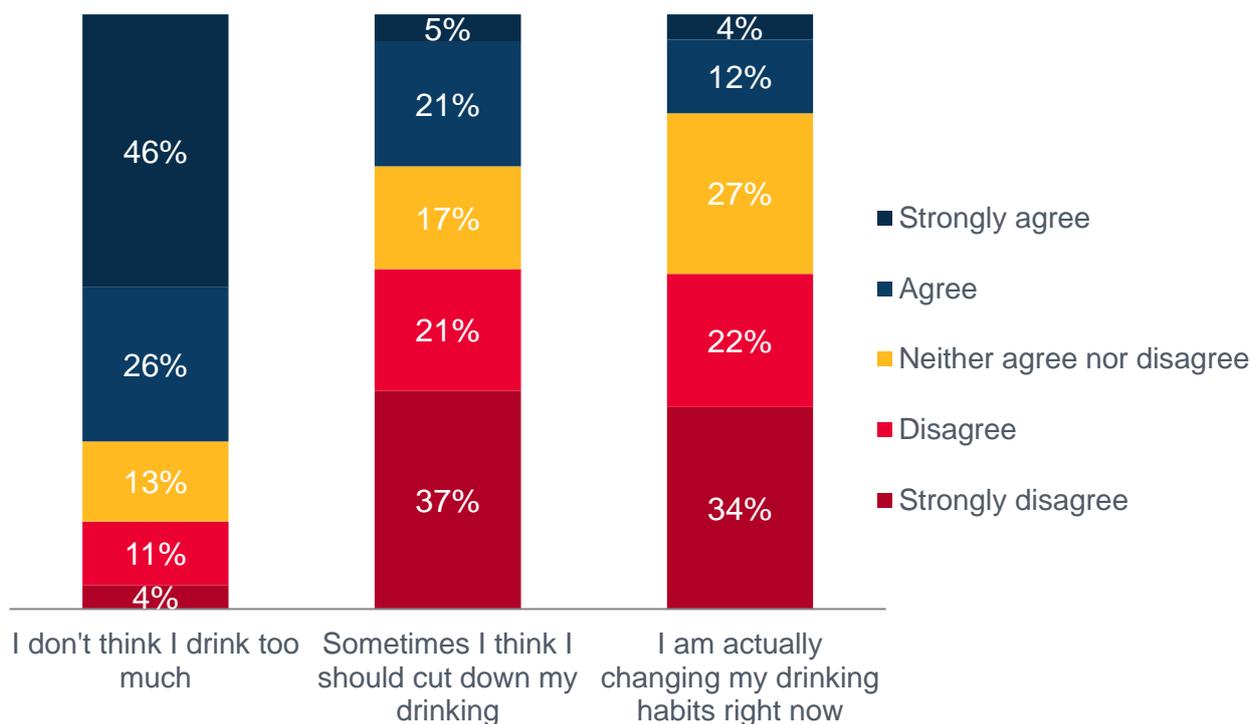
Most (72%) drinkers agree ‘*I don’t think I drink too much*’ however some (15%) disagree with this statement (Figure 22). Higher risk drinkers are the most likely to disagree, with seven in ten (71%) ‘possible dependence’ drinkers (AUDIT-C scores 11-12) and almost half (47%) higher risk drinkers (AUDIT-C scores 8-12) disagreeing compared with one in six (16%) increasing risk drinkers (AUDIT-C scores 5-7) and a handful (3%) of low risk drinkers (AUDIT-C scores 0-4).

A quarter (26%) of drinkers agree ‘*Sometimes I think I should cut down my drinking*’, similar to the proportion who intend to cut down after lockdown. Again, there is a strong association with risk level. The vast majority (84%) of ‘possible dependence’ drinkers

agree with the statement, and two thirds (67%) of higher risk drinkers agree. This compares with over a third (36%) of increasing risk drinkers and 6% of low risk drinkers.

However, whilst many feel they should address their drinking, fewer are currently taking action. Around one in six (17%) agree 'I am actually changing my drinking habits right now'. Higher risk drinkers are more likely to agree (30%) than increasing risk (22%) and low risk (10%) drinkers.

Figure 22: Feelings about drinking



Base: All drinkers (n=7,834)

Intention to drink less than during lockdown

Among respondents who are planning to cut down on their alcohol consumption, there is a sense that drinking habits in lockdown are situational and temporary. In particular, those who had changes to circumstances and also increased their consumption during lockdown more likely to intend to cut down as restrictions ease.

- Most (59%) drinkers who were drinking more than normal in the later part of lockdown intend to cut down as lockdown restrictions ease, as do one in five (20%) of those who were drinking less than normal later in lockdown. Seven in ten (69%) of those who drank more than normal throughout lockdown intend to cut down on drinking.

- Two in five (42%) higher risk drinkers intend to cut down, significantly higher than increasing risk drinkers (29%) and low risk drinkers (11%).
- Three in ten (30%) parents of under 18s intend to cut down drinking as restrictions ease, compared with one in five (20%) of those without children under 18.

Those who experienced changes to work during the pandemic are also more likely to intend to cut down on drinking as restrictions ease in the future. A third (33%) of those who are currently furloughed, compared with a quarter (26%) not furloughed, and over a quarter (28%) of those who have been made redundant or are in consultancy, compared with one in five (21%) of those not affected, are intending to cut down on drinking.

Employees who started to work from home are also more likely to intend to cut down than those who had no change to their place of work (29% compared with 24%), as are those workers who are concerned for their job or business security when compared with those not concerned (30% compared with 25%). These results suggest that while those who found their working situation changing during the pandemic, or were worried about job security, drank more than normal during the lockdown they also tend to recognise that their consumption levels have increased and that they should cut down.

Individuals who experienced a mental health impact of the pandemic are also more likely to intend to cut down their drinking as restrictions ease. This includes workers who are finding work more stressful (29%) and drinkers who have experienced a large or moderate negative impact on their mental health (27%) as well as those who take any medication for stress, anxiety or depression (24%), and especially those who have started taking medication since the pandemic (31%). Again, this suggests that this group are recognising that their alcohol consumption has become problematic.

Currently reduced or reducing alcohol consumption

Those drinkers who drank more earlier in lockdown and then later reduced to either the same as before or less than previously were more likely to use various moderation techniques than those who drank more throughout.

As many cite lack of structure to their day or week or having more time as a reason for drinking more, it is interesting to note that for many of those who were drinking more than normal earlier in lockdown and then reduced to less than normal, moderation techniques which enforce boundaries on time were more likely to be used. More than three in five (64%) have been taking drink-free days during the week for a while, compared with over

half (54%) of those who drank more than normal throughout, and over half (54%) have avoided drinking alcohol on a 'school/work night' for a while compared with a third (33%) of those who drank more than normal throughout. A quarter (26%) have stayed off alcohol for a fixed time period for a while and one in six (16%) have started doing this recently (compared with 11% and 8% among those who drank more than normal throughout).

Those who reduced to drink less than normal later in lockdown after initially drinking more than normal are also more likely to restrict the amount of alcohol they consume and are more likely to have been doing so for a while. Around a third (32%) have been drinking within the guidelines for a while (compared with 22% of those drinking more throughout), and the same proportion set themselves a drinking limit (32% compared with 27% of those drinking more throughout). Almost two in five (38%) alternate alcoholic drinks with soft drinks (compared with 26% of those drinking more throughout) and almost a quarter (23%) drink smaller glasses of wine or smaller bottles of beer (17% of those drinking more throughout).

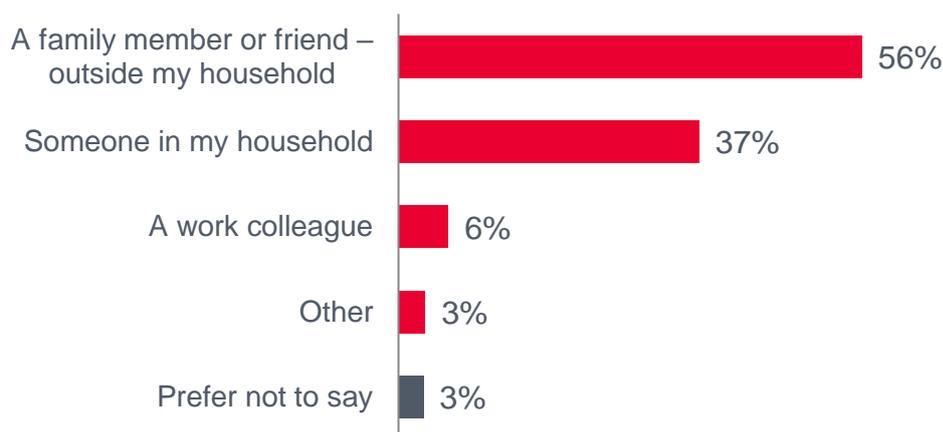
In addition to being more likely to have been using moderating techniques, those who reduced their drinking to less than normal in the later part of lockdown after initially having drunk more are more likely to have spoken to someone about a physical or mental health issue during lockdown than those who drank more throughout (52% compared with 45%).

However, higher risk drinkers are less likely to have engaged in moderation techniques. They are less likely to have taken drink free days than low risk drinkers (56% compared with 64%) and to have avoided drinking alcohol on a 'school / work' night (35% compared with 55%). Only a minority (9%) of higher risk drinkers have stayed off alcohol for a fixed time period. This suggests that while many used moderation techniques to cut back to pre-lockdown levels of drinking, this does not include those who need to the most.

Concern for others' drinking

One in seven (14%) adults have been concerned about someone else's drinking (Figure 23). Of those, over half (56%) have been concerned by a family member or friend outside of their household and over a third (37%) by someone in their household.

Figure 23: Whose drinking concerned by



Base: All concerned by others drinking (n=1,292)

Women tend to be more likely to be concerned than men (17% compared with 11%), as are those aged 18-34 (18%) than 35 to 54 (15%) or 55+ (10%). Potentially a reflection of age, those who live with friends or housemates are more likely than others to be concerned for someone else's drinking (21%).

Increasing risk and higher risk drinkers are more likely than low risk adults to have been concerned about someone else's drinking (17% compared with 12%). And among those who are concerned, increasing or higher risk drinkers are more likely to be concerned about someone in their household than low risk (40% compared with 33%).

Those whose work has been affected are more likely to be concerned about someone else's drinking. Those who are currently furloughed are most likely to be concerned (20%), those who are in the consultancy process for redundancy are more likely than those who are not affected by redundancy (24% compared with 14%) and those with concern for their job or business security are more likely than those not concerned (18% compared with 14%).

Further, those who agree that their life has been greatly affected by Coronavirus are more likely to be concerned for someone else than those who disagree (17% compared with 12%), as are those who have experienced a large or moderate negative impact on their mental health compared with those with small or no impact (20% compared with 11%).

Work

Key findings

- Alcohol consumption differs by industry, with male-dominated industries such as manufacturing (29%) and finance (28%) having the highest proportion of higher risk drinkers.
 - Those in full-time employment were just as likely to be drinking more than normal both earlier and later in the lockdown as those who were furloughed or made redundant. There are also no significant differences in AUDIT-C score by these metrics. When compared to those who are unemployed or not working, both groups are more likely to have drunk more than normal in lockdown and are less likely to be low risk drinkers.
 - Most are positive about how their employer has handled the lockdown. Over two-thirds (68%) felt that their employer recognised the challenges they faced and communicated with them well (66%). Most working parents (58%) agree that their employer has helped them balance parenting and work.
 - Those who started to work from home as a result of the lockdown are more likely to have been drinking more than normal both earlier and later in the lockdown (34% and 19%); this suggests that disruptions to working routine and more time spent at home increased alcohol consumption.
 - Increased work stress is also a factor in increased alcohol consumption. Over half (54%) of those drinking more throughout the lockdown say their jobs became more stressful due to the pandemic compared with just 26% who said their jobs had not been affected.
 - Most (63%) employer-organised events during lockdown did not involve any alcohol and only a handful (3%) of employees reported that all their employer-organised events did.
 - Alcohol consumption at work-events during lockdown was less than before. Over two-fifths (43%) reported that employer-organised events during the pandemic involved less alcohol than previously and only a minority (15%) were drinking more with their colleagues during lockdown than they were before.
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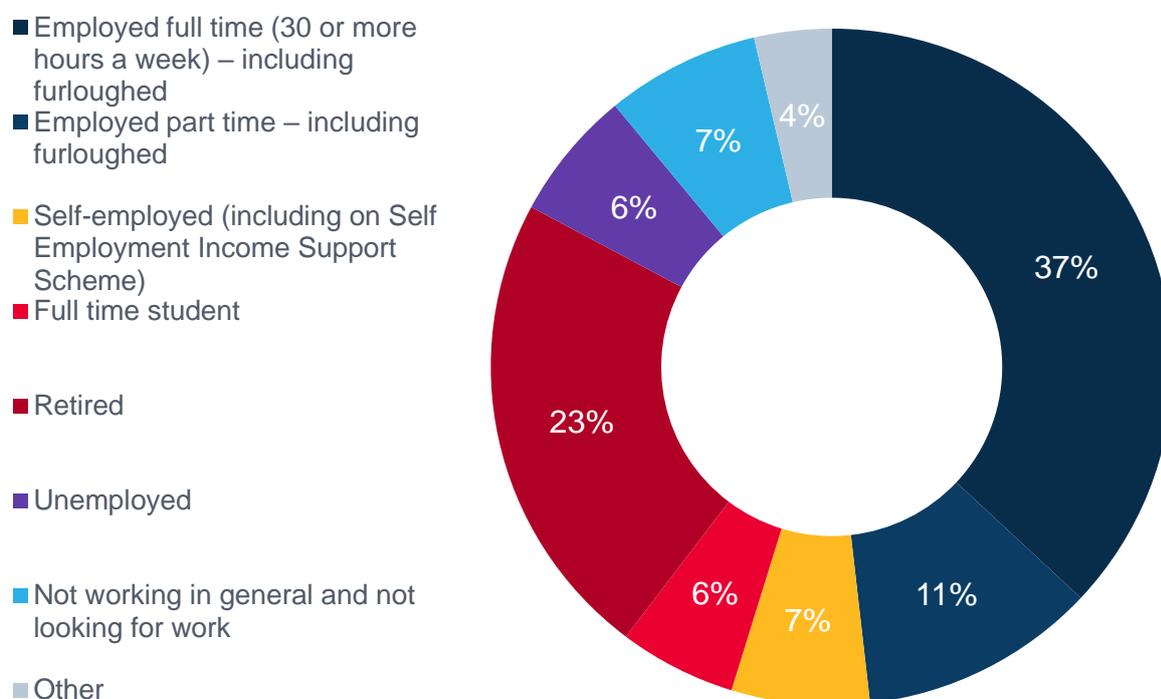
This section discusses alcohol consumption among different industries, as well as impacts of lockdown and how these varied depending on work situation. It also covers employer support during lockdown. The 2020 Monitor survey is the first time that the relationship between work and alcohol consumption has been explored by Drinkaware, with the intention to better understand how alcohol use differs between different industries and occupations.

Working status

In total, over half (55%) of those surveyed are in work (including those who are furloughed) (Figure 24). A further 23% are retired, 6% are in full-time education while 11% are unemployed.

In total, 3% of those surveyed had been made redundant since the Coronavirus outbreak started, with a further 1% in the consultation process for redundancy. Reporting current or pending redundancy was more common among men than women (3% compared with 2%) and younger workers (4% of 18-34 year olds compared with 3% of 35-54 year olds).

Figure 24: Working status of sample⁸



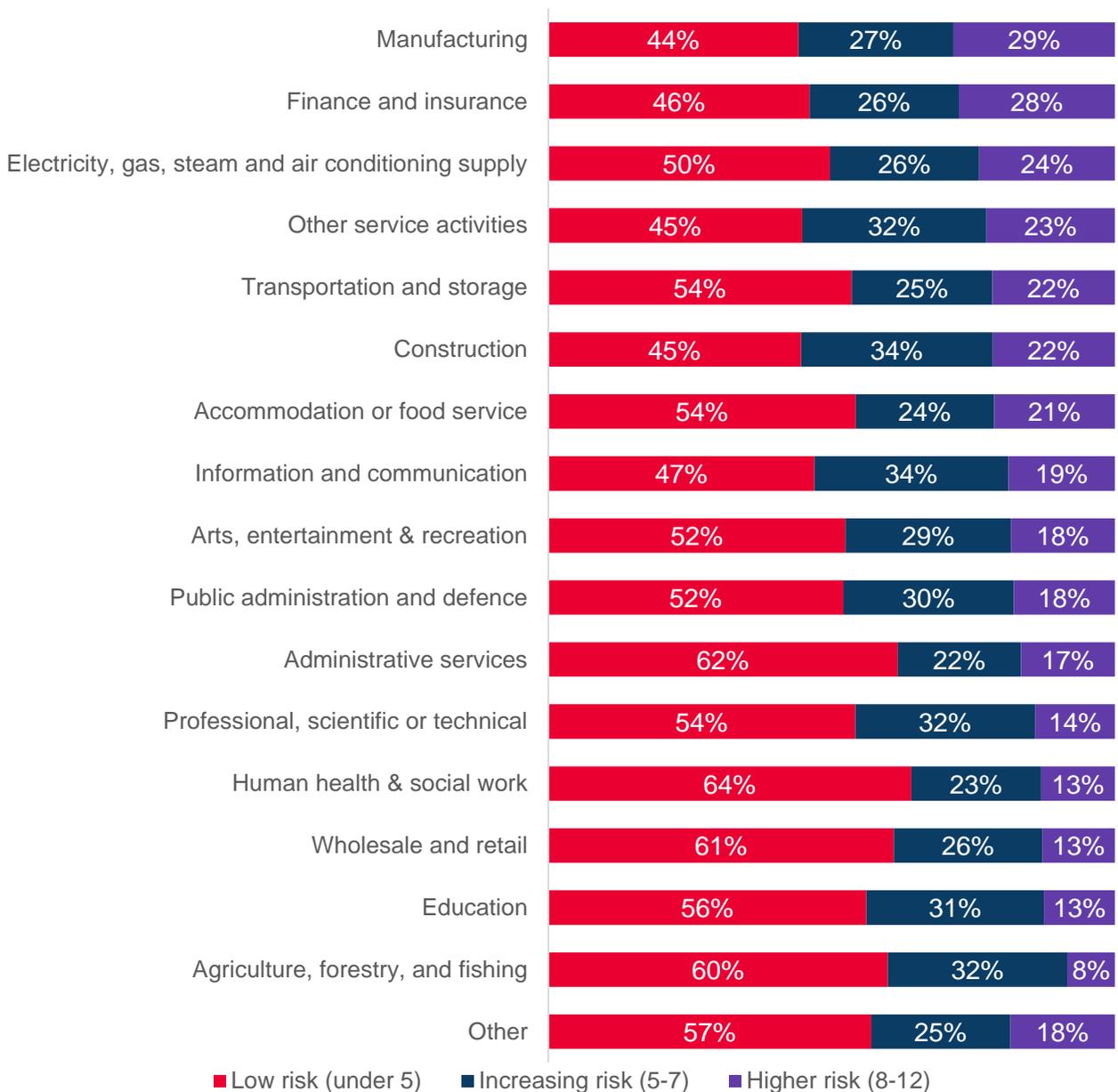
Base: all adults aged 18-85 (9,046)

⁸ Redundancy status was asked in a separate question. In this chart, those who were made redundant would predominantly be included in 'unemployed'

Drinking among different industries

Workers in certain industries tend to drink more than others, as shown in Figure 25. The industries with the highest proportion of higher risk drinkers include manufacturing (29%), finance and insurance (28%) and electricity, gas, steam and air conditioning supply (24%). On the other side, the industries with the lowest proportion include agriculture, forestry and fishing (8%), education (13%), wholesale and retail (8%) and human health and social work (13%). Figure 19 shows AUDIT-C category among all industries surveyed.

Figure 25: AUDIT-C category among workers by industry



Base: all adults aged 18-85 (9,046). Chart is ranked by proportion who are higher risk

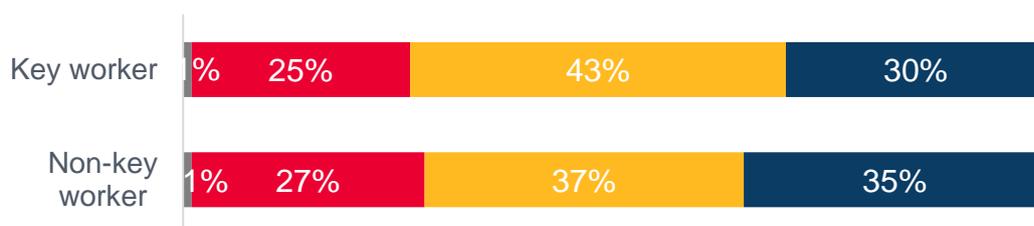
Industries with workers who tend to drink more are often those with a higher proportion of men than women in the workforce. Manufacturing, for example, has a 75/25 gender split among survey respondents towards men while electricity, gas, steam and air conditioning supply has a similar balance. Similarly, those industries with lower numbers of higher risk drinkers are more women-dominated, such as health and social work and education. With men more likely to be higher risk drinkers than women, it may be that differences among industries in the survey results are just reflecting the gender balance of these jobs.

During the pandemic, jobs that were essential to keeping the country running (including shop workers and delivery drivers, as well as medical roles) were referred to as key workers. Two-fifths (40%) of those surveyed who are in work are key workers.

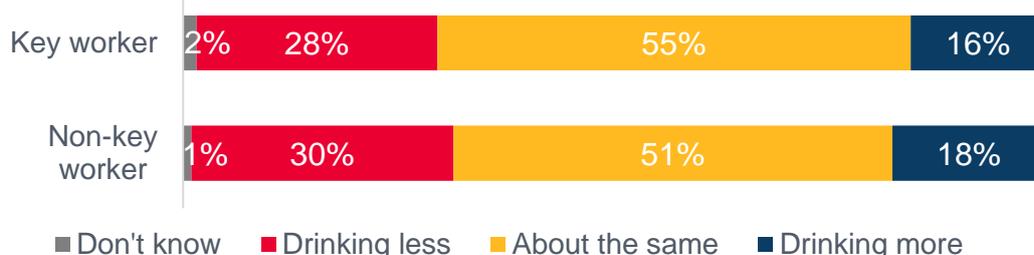
Demographically, key workers are more likely to be women (43% of female workers compared with 38% of male) and middle aged (43% are 35-54 years old). Key workers are no more or less likely to be a higher risk drinker currently than non-key workers. However, earlier in lockdown they were less likely to have started drinking more than normal than non-key workers: 30% of key workers drank more than normal between March and May compared with 35% of non-key workers (Figure 26). There were no differences in amount of alcohol consumed in the later part of lockdown.

Figure 26: Alcohol consumption during lockdown by key worker status

Earlier in lockdown



Later in lockdown



Base: all drinkers who work (1,716 key workers, 2,456 non-key workers)

Drinking by work situation

Of those surveyed, the majority (73%) had not been furloughed while 15% had been previously furloughed but had since returned to work. A minority (7%) are currently furloughed while a similar proportion (5%) are on flexible furlough (i.e. working fewer hours than usual and furloughed for the remainder of their working hours).

There are noticeably no differences in alcohol risk by furlough status with those who are furloughed drinking just as much as those who are not. Furthermore, there are no differences in drinking habits during lockdown, with those furloughed just as likely to have been drinking more both earlier and later in lockdown than those who were not.

Among the self-employed, over a third (36%) had already claimed support from the first government grant dispensed through the Self-Employment Income Support Scheme (SEISS), and 26% were in the process of claiming or intended to claim support from the second grant. Almost two-fifths (37%) are not eligible for the SEISS while 17% felt that their business has not been negatively impacted by Coronavirus and so did not need to claim.

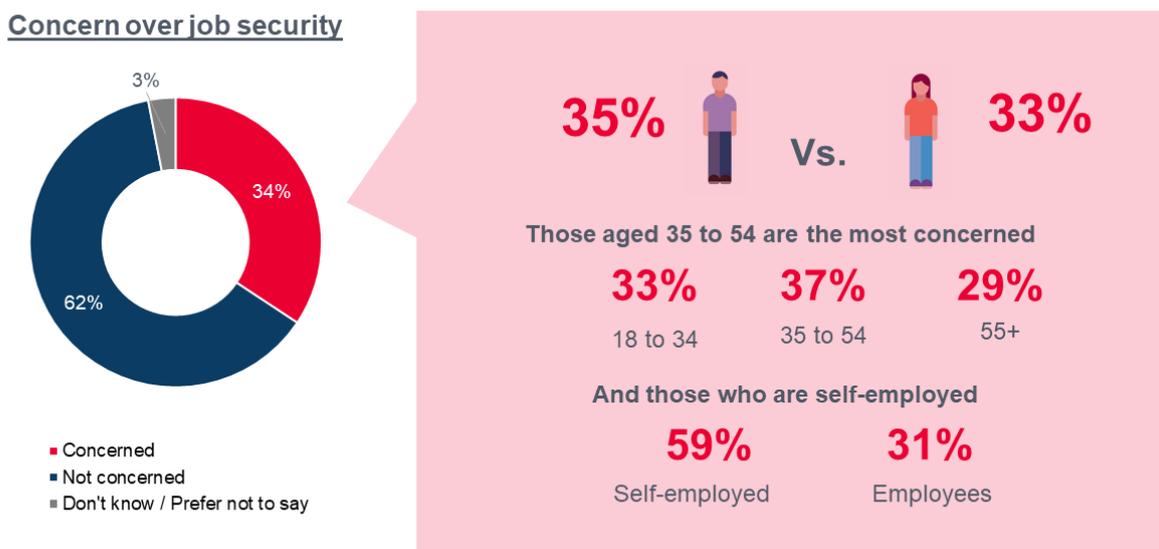
When looking at weekly consumption, those who have been made redundant are not drinking significantly more or less than those who have not been. A quarter (23%) of those made redundant or in consultation are currently drinking at an increasing or higher risk level (15+ units a week), while a similar proportion of workers who have not been made redundant are doing the same (21%).

By AUDIT-C score, half (49%) of those who have been made redundant or are in the consultancy process are increasing or higher risk drinkers (AUDIT-C scores 5-12). This is significantly higher than the proportion among workers to whom redundancy does not apply (40%).

Around a third (34%) of workers report being concerned about their job or business security, with men more concerned than women (35% compared with 33%). As shown in Figure 27, those aged 35 to 54 (37%) are significantly more likely to be feeling concerned than other age groups. Unsurprisingly, a majority of those who are currently furloughed are concerned about their job security (62% compared with 24% who have not been furloughed).

Those who are self-employed are far more worried about their business security. A majority (59%) report being concerned, with 27% very concerned and again certain demographics are more likely to be concerned. Three-quarters (75%) of self-employed adults aged 35-44 are concerned.

Figure 27: Concern over job security - demographics



Base: all in work (4,815)

There are no differences in AUDIT-C score by concern over job or business security, however, with those concerned drinking just as much as those not concerned. By AUDIT-C score, 45% of those concerned are increasing or higher risk drinkers, the same proportion as among those who are not concerned (45%). However, those concerned about their job security were more likely to report drinking more during lockdown than those who are not concerned. As shown in Figure 28 and Figure 29, 36% of those concerned were drinking more than normal in the earlier part of lockdown and 20% were drinking more than normal in the later part, compared with 31% and 15% of those not concerned. This suggests that concern over job security may have been a factor in drinkers consuming more alcohol during lockdown.

Figure 28: Whether respondents were drinking more or less earlier in lockdown – by concern over job/business security

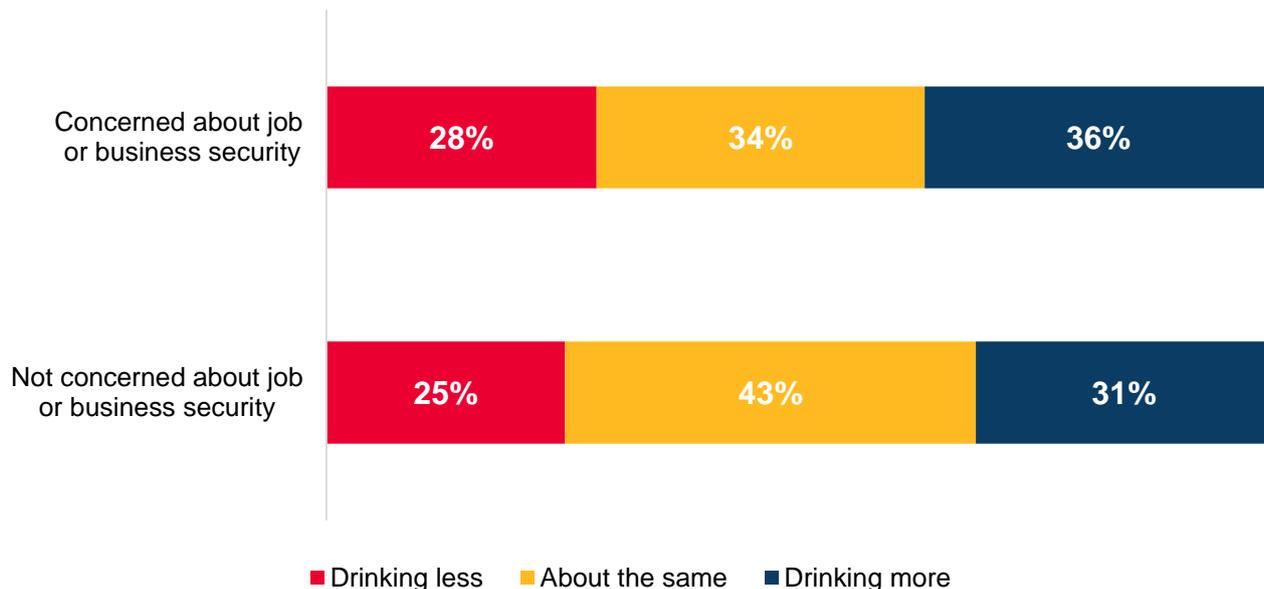
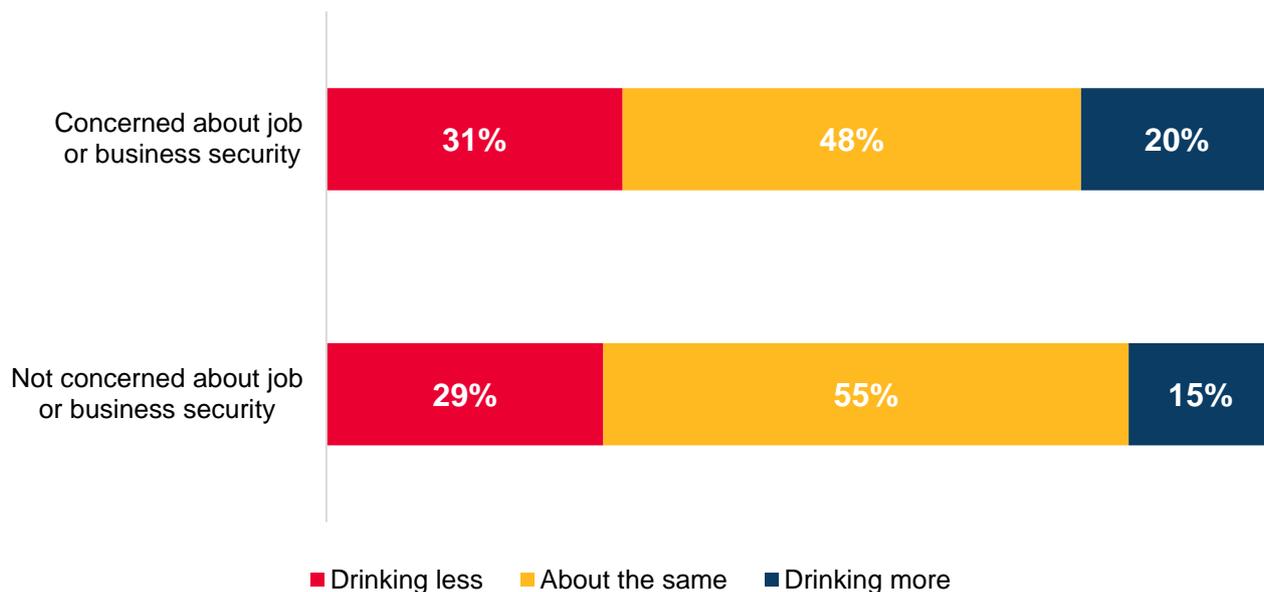


Figure 29: Whether respondents were drinking more or less later in lockdown – by concern over job/business security



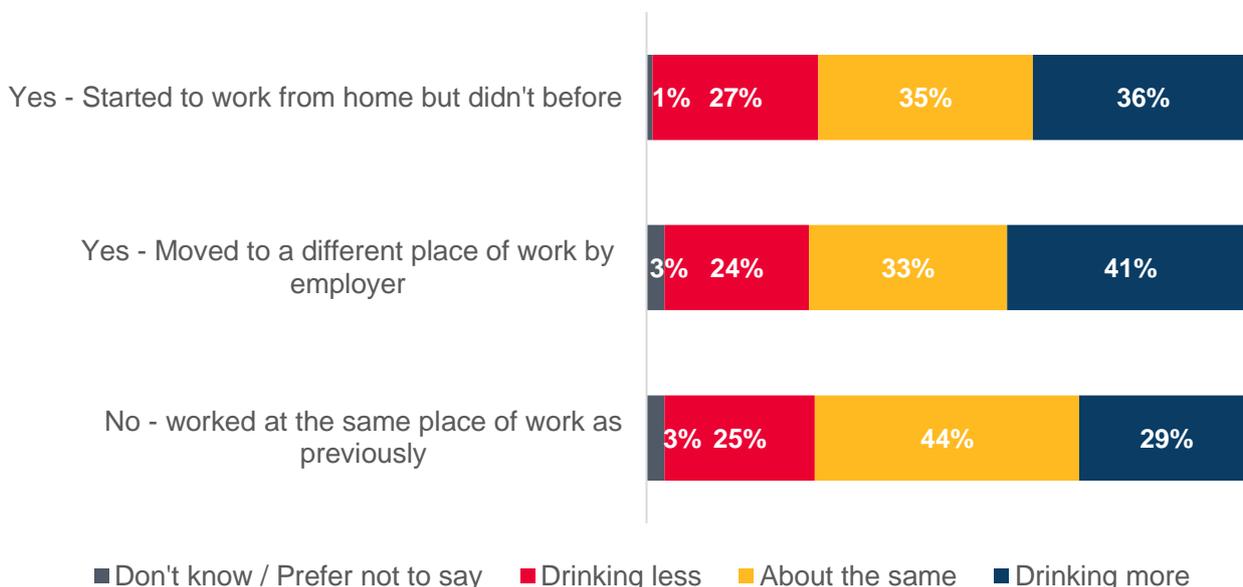
Base: all drinkers in work (4,166)

Working from home

Home workers are significantly more likely to have been drinking more in both the earlier (34% compared with 30% of those at their usual workplace) and later part of lockdown (19% compared with 14%). This suggests that spending more time at home during lockdown may have encouraged some people to drink more.

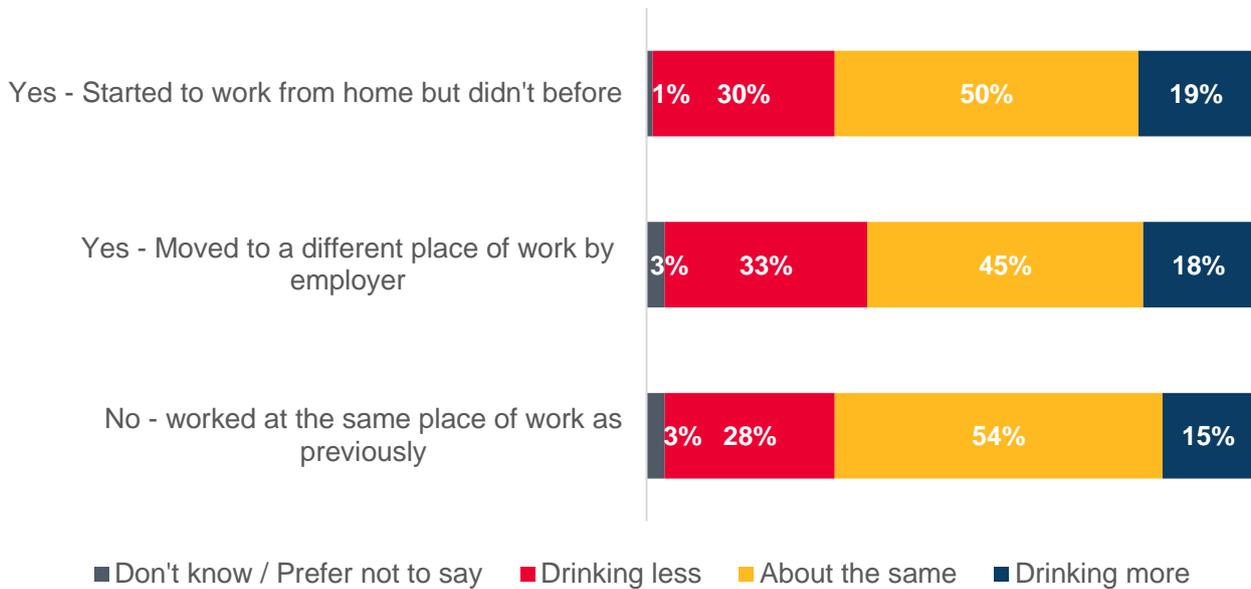
Those who were working from home for the first time were more likely to have been drinking more in lockdown. Over a third (36%) of those who were working from home when they hadn't before were drinking more than normal earlier in lockdown; this compared with just 29% who worked at the same place of work as before lockdown (Figure 30). Whilst reduced, this difference is sustained later in lockdown (Figure 31). Further, 14% of those working from home when they hadn't been previously drank more throughout lockdown, compared with 11% of those who didn't change their work location. This does suggest that working from home led to an increase in alcohol consumption, although there are no differences by AUDIT-C score with higher risk drinkers just as likely to have started working from home for the first time as other risk groups.

Figure 30: Alcohol consumption earlier in lockdown – by whether workplace changed



Base: all working home from home but not before (1,863), moved to a different place of work (188), same place of work (2,253)

Figure 31: Alcohol consumption later in lockdown – by whether workplace changed

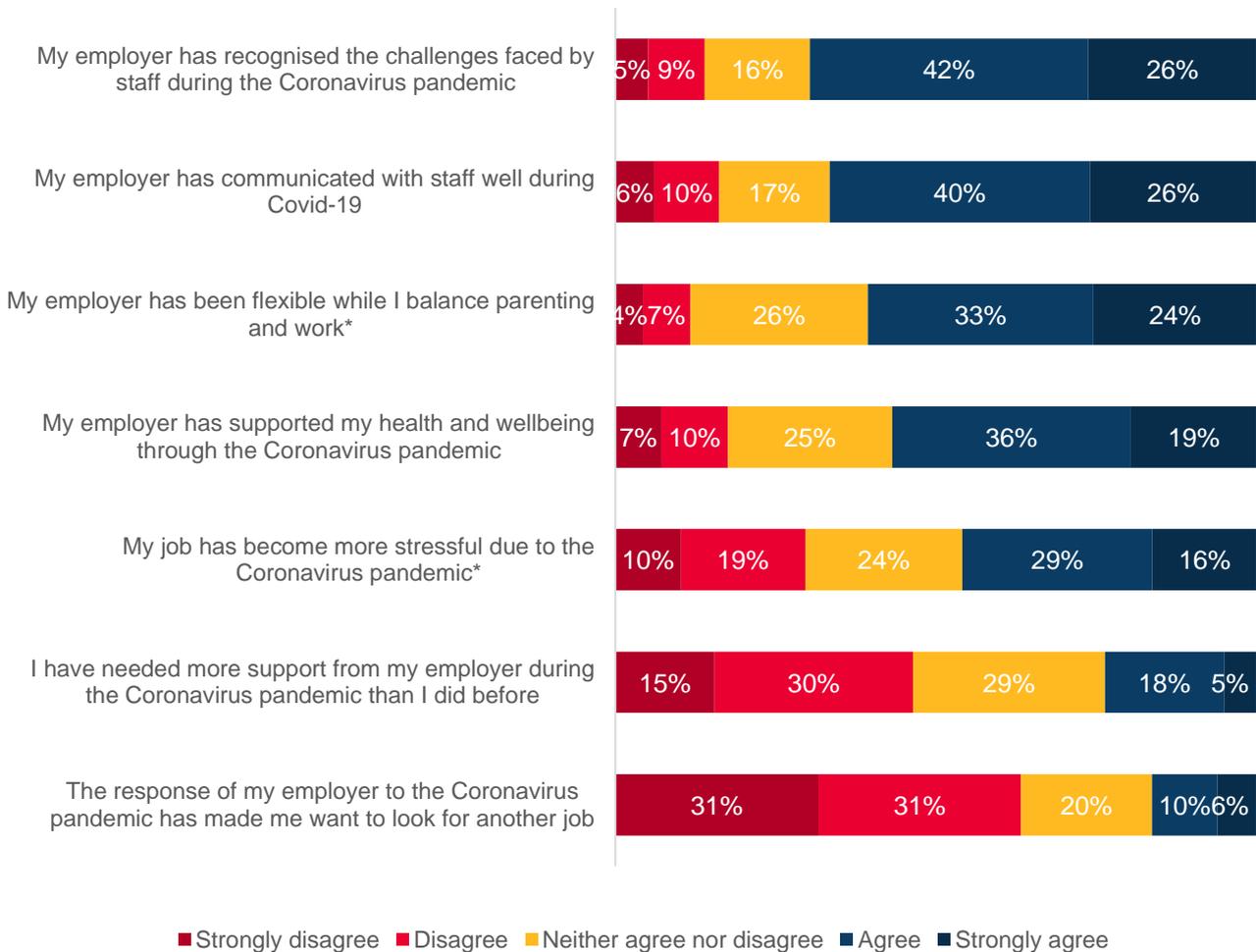


Base: all working home from home but not before (1,863), moved to a different place of work (188), same place of work (2,253)

Employers and Coronavirus

Generally, working respondents feel positively about how their employer has handled Coronavirus (Figure 32). Over two-thirds (68%) agree that their employer has recognised the challenges that staff have faced during the Coronavirus pandemic while a similar proportion (65%) agree that their employer has communicated with staff well. Only a few (16%) feel that their employer’s response has made them want to look for another job.

Figure 32: Agreement statements regarding how employers have handled the Coronavirus pandemic (‘Don’t know’ responses not shown)



Base: all in work (“My employer has recognised the challenges faced by staff during the Coronavirus pandemic”: 4,815), all employed parents (“My employer has been flexible while I balance parenting and work”: 1,322), all employed (All other statements: 4,241)

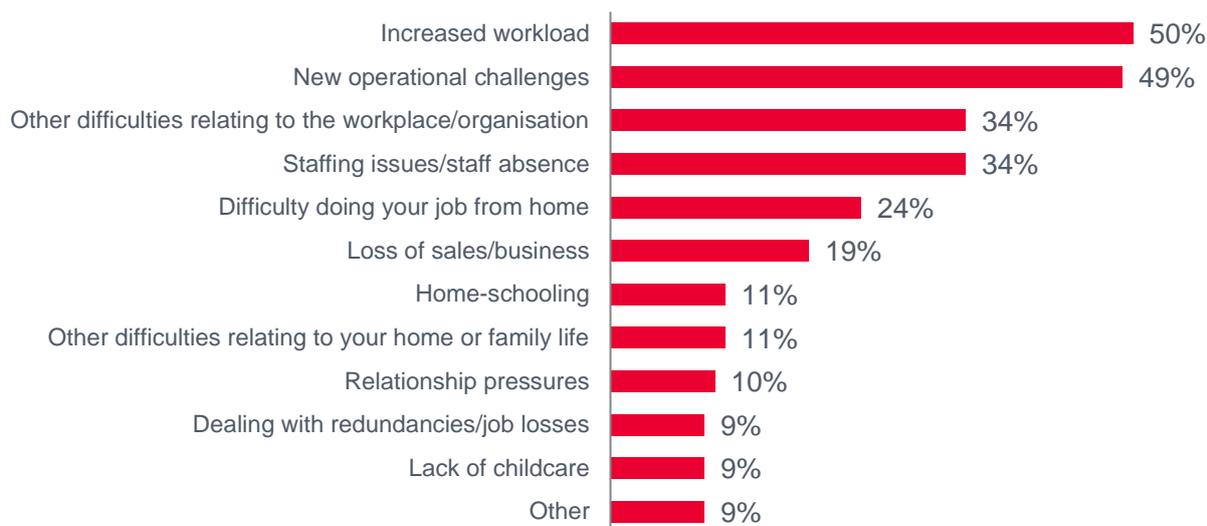
Around a quarter (23%) have needed more support from their employer during the pandemic than they did before. This is more common among women (26% compared with 20%), and younger staff, with 27% of those aged 18-34 agreeing compared with 22% of those aged 35-54 and 14% of those aged 55 and above. Most working parents (58%) agree that their employer has helped them balance parenting and work.

For 45% of those in work, the Coronavirus pandemic has made their job more stressful. Those in industries heavily involved in the response are more likely to agree with this: two-thirds (66%) of those in human health and social work agree, as do 55% of those in education. Key workers (56%) are also, unsurprisingly, more likely to agree that their job is now more stressful than non-key workers (38%).

The results suggest that work stress was a factor in increased drinking during lockdown. Among all working adults, 51% of those who reported drinking more earlier in lockdown felt that their job was more stressful due to the Coronavirus pandemic. This is significantly more than those who drank about the same amount (42%) or less than normal (45%). Similarly those who drank more than normal during the later part of lockdown are also more likely to have found their jobs more stressful: half (51%) of those who drank more than normal agreed compared with 44% of those who drank about the same amount and 46% of those who drank less.

When asked what is behind the increased stress, the two most common answers given are an increased workload (50%) and new operational challenges such as implementing processes to limit the spread of Coronavirus (49%) (Figure 33). Less common causes included staffing issues and absences (34%) and finding it difficult to do their job from home (24%). Increasing or higher risk drinkers (AUDIT-C scores 5-12) are more likely to say that their stress was caused by finding it more difficult to do their job from home (28%) than low risk drinkers and those who drank more throughout lockdown are more likely to report this as well (32%). This further supports the suggestion that the adjustment to working from home is a factor behind increased lockdown drinking.

Figure 33: Reasons for finding work more stressful



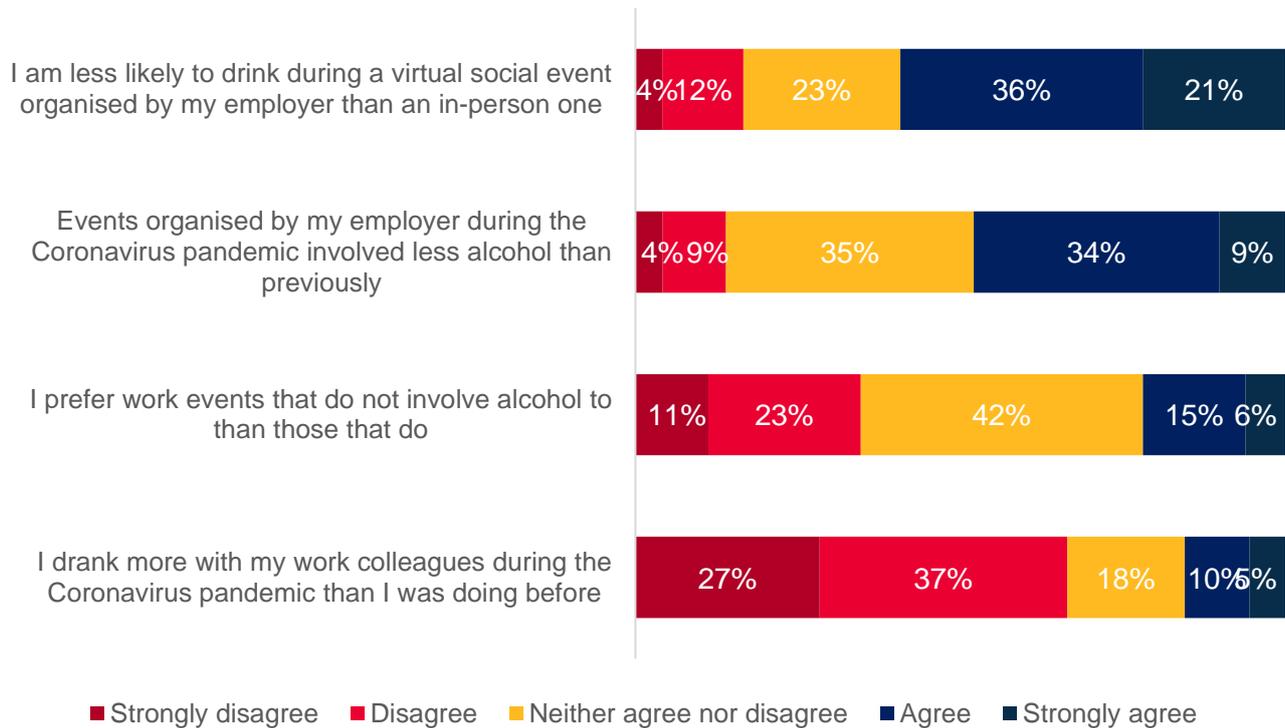
Base: all who have found work more stressful (2,194)

Around two-fifths (38%) of employees have had employer-organised social events, either in person or digitally, since the start of the lockdown. For 31%, these social events involved alcohol whilst for 63% they did not; although only 3% said *all* of their employer-organised events involved alcohol. Younger respondents are more likely to say that their social events involved alcohol: two-fifths (41%) of those aged 18 to 34 had alcohol whilst only 18% of those aged 55 and above said the same. Certain industries are also more likely to have alcohol at social events: 48% of those employed in information and communications had alcohol during at least some events as did 39% of those employed in finance and insurance and professional scientific or technical services.

Virtual social events tend to involve less alcohol than in person ones. The majority (57%) of those whose employer organised social events involving alcohol agree that they are less likely to drink during a virtual social event (Figure 34). Two-fifths (43%) also agree that social events during the Coronavirus pandemic involved less alcohol than previously and only a handful felt they drank more with their colleagues during lockdown than previously (15%).

A third (34%) *disagree* that they prefer work events not involving alcohol to those that do and higher risk drinkers are more likely to disagree (47%). More, however, did not have a preference either way (42%).

Figure 34: Attitudes towards alcohol at work social events



'Don't know' responses not shown

Base: All drinkers where employer organised social events involving alcohol (444)

Health and Wellbeing

Key findings

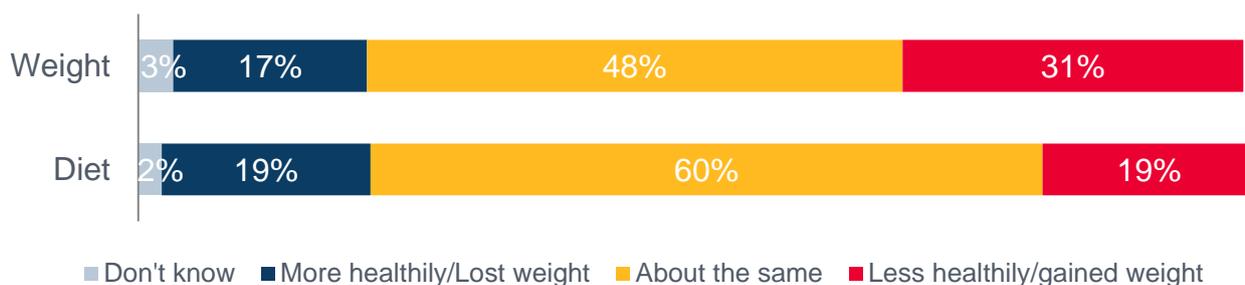
- Alcohol consumption during lockdown is linked to other unhealthy behaviours: respondents who drank more were more likely to report eating more unhealthily, smoking more and gaining weight.
- The pandemic also impacted mental health, with one-sixth (17%) negatively affected to a large or very large extent. Those negatively affected are also more likely to have been drinking more throughout lockdown (28%).
- Two-fifths (39%) have spoken to someone about health issues since the start of lockdown. The most common source of support is friends or family (22%) followed by a GP (17%) or other health professional (9%). Those who drank more in lockdown are more likely to have spoken to someone about health issues.
- Only a minority (5%) of those who contacted a GP or health professional discussed alcohol consumption with them, but those who reported drinking more during lockdown are more likely to have done so (11%).
- A third (33%) have used a website or app to monitor their health, but few (3%) have used one to manage their alcohol consumption. A substantial proportion of drinkers are open to the idea however, with 31% willing to use one.

This section discusses other aspects of health and wellbeing during lockdown, including diet, smoking, mental health and seeking support.

Physical health

Most (60%) adults continued to eat as they were before lockdown, however one in five (19%) report that they have eaten more healthily and the same proportion (19%) have eaten less healthily compared to normal (Figure 35). Around half (48%) have maintained the same weight as before, however three in ten (31%) report that they have gained weight.

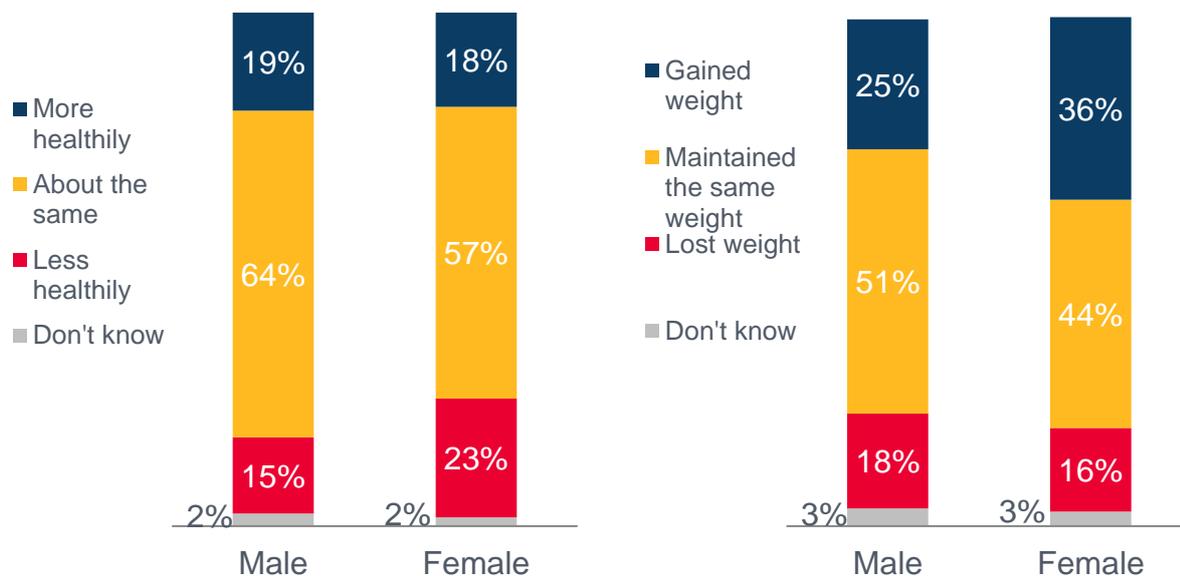
Figure 35: Diet and weight during lockdown compared to normal



Base: All adults (n=9,046)

Figure 36 shows results by gender. Women are more likely to have eaten less healthily (23% vs 15%) and to have gained weight (36% vs 25%) during lockdown than men.

Figure 36: Diet and weight during lockdown compared to normal by gender



Base: all men (4,397); all women (4,659)

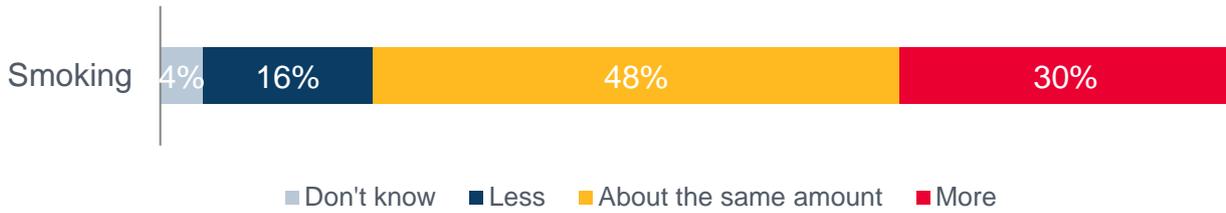
As with drinking more than normal, those who are concerned for their job or business security are more likely to have eaten less healthily (24% compared with 20%) and to have gained weight (37% compared with 32%).

There is also a relationship between stress and these health behaviours. Those who find work more stressful are more likely than those who do not to eat less healthily (25% compared with 18%) and to have gained weight (38% compared with 29%). Further, those who have experienced a large or moderate negative impact on their mental health are more likely than those who have experienced a small or no impact to eat less healthily (28% compared with 14%) and to have gained weight (40% compared with 25%).

The same pattern is apparent for those who agree that their life has been greatly affected by the Coronavirus pandemic. Compared with those who disagree, they are more likely to eat less healthily (22% compared with 14%) and to have gained weight (35% compared with 24%).

One in seven (14%) report that they smoke. Of these, three in ten (30%) report that they have smoked more than normal during lockdown (Figure 37).

Figure 37: Smoking during lockdown compared to normal



Base: All smokers (n=1,271)

Stress has also had an impact on this behaviour. Those smokers who find work more stressful are more likely to smoke more (39%) as are those who have experienced a large negative impact on their mental health (46%).

Mental health

General impact on mental health

Around one in six (17%) feel that the pandemic has negatively impacted their mental health and wellbeing to a large or very large extent, and one in five (21%) have been negatively impacted to a moderate extent (Figure 38).

Figure 38: Negative impact on mental health and wellbeing since Coronavirus



Base: All adults (n=9,046)

Half (51%) of those who agree that their life has been greatly affected by Coronavirus feel the pandemic has negatively impacted their mental health or wellbeing to a large or moderate extent, significantly more than those who disagree their life has been greatly affected by Coronavirus (18%).

Certain demographics are more likely to report a negative impact on their mental health as a result of the lockdown. These include:

- Women (80% compared with 67% of men).
- Younger age groups: those aged 18 to 34 (23%) are more likely to have experienced a very large or large impact than those aged 35 to 54 (19%) or 55+ (9%).
- Parents of under 18s (81% compared with 72% of those without children under 18).

Higher risk drinkers are more likely than low risk drinkers to have experienced a large or moderate impact on their mental health and wellbeing (40% compared with 36%).

However, the greatest differences are shown when comparing drinking behaviours during lockdown

Both earlier and later in lockdown, those whose mental health was negatively impacted to a great or moderate extent were drinking more than those whose mental health was not impacted much or not impacted at all. Of the former, over a third (35%) drank more earlier in lockdown and a fifth (20%) drank more later in lockdown; significantly higher than the latter group (21% earlier; 12% later). However, those whose mental health was negatively impacted are also more likely to report that they drank less than normal *later* in lockdown (31% vs 28%). The patterns therefore changed for this group during lockdown: whilst they were more likely to drink more early on, they were also more likely to cut back as lockdown went on.

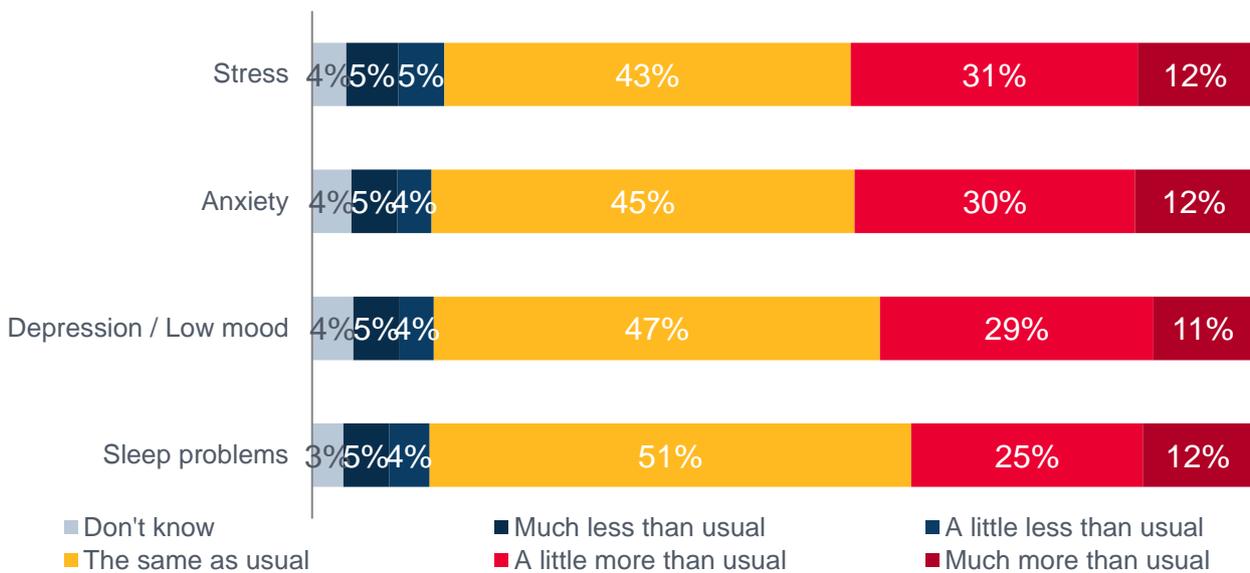
Changes to work situation during the pandemic are also associated with a negative impact on mental health and wellbeing. Those currently furloughed are more likely than those not furloughed to experience a very large or large negative impact on their mental health (22% compared with 16%), and also more likely to have experienced a moderate impact (30% compared with 22%). The same is true for those who have either been made redundant or in consultancy with nearly two in five (38%) having experienced a very large or large negative impact on their mental health and wellbeing compared with one in six (16%) who are not affected by redundancy.

Those finding work more stressful are also more likely to have experienced a large or moderate negative impact on their mental health (53% compared with 26% of those who have not found work more stressful). Further, those who disagree that their employer has supported their health and wellbeing are more likely to have experienced a large or moderate impact on their mental health than those who agree their employer has been supportive (57% compared with 37%).

Specific mental health problems

When considering mental health problems individually, sizeable proportions have been experiencing them more than usual since the Coronavirus pandemic. Two in five adults report experiencing more stress (43%), more anxiety (42%) and depression (40%) (Figure 39). Over a third (36%) report experiencing more sleep problems than usual.

Figure 39: Experience of mental health problems compared to normal



Base: All adults (n=9,046)

Across all four mental health problems, women are more likely to have experienced them more than usual when compared with men, as are parents of under 18s when compared with those who do not have children under 18. Those aged 18 to 34 and those aged 35 to 54 are more likely to have experienced each problem more than usual than those aged 55 or over.

When comparing risk levels (based on AUDIT-C), there are no differences in proportions experiencing more stress or anxiety. However, over two in five (43%) higher risk drinkers have experienced depression more than usual and two in five (39%) have experienced more sleep problems, both significantly more than low risk adults (39% and 35% respectively).

As seen with overall impact on mental health, those who drank more than normal during lockdown are more likely than those who drank the same amount or less than normal to experience each of the mental health problems more than usual. It is also the case that those who drank less than normal in lockdown experienced each of the mental health problems more than those who drank the same amount as normal. This suggests that whilst more turn to alcohol when experiencing mental health problems, some cut back.

For those who were furloughed, there is no difference in experiencing more stress or anxiety when compared with those who have not been furloughed. However, half (51%) of those who are currently furloughed have experienced more depression or low mood than usual compared with two in five (41%) of those who are not furloughed, and those who are furloughed are more likely to have experienced more sleep problems than normal (47% compared with 38%).

Whilst furlough has had more of a specific impact on depression and sleep problems, redundancy and concern for job or business security are more likely to impact all four of the mental health problems reported. For all four, over half of those who have been made redundant or in consultation have been experiencing them more than normal (56% depression/low mood, 56% stress, 54% anxiety and 51% sleep problems) whereas around two in five or less of those who are not affected by redundancy experienced the same problems more than usual (39% depression/low mood, 42% stress, 42% anxiety and 36% sleep problems). Similarly, those who are concerned for their job or business security are more likely to have experienced each of the mental health problems more than those who are not concerned. Over half have experienced more anxiety (57% compared with 39%), stress (57% compared with 43%) or depression (53% compared with 35%) and just under half have experienced more sleep problems (47% compared with 34%).

Those who started to work from home because of the pandemic are also more likely to have experienced each of the mental health problems when compared with those who had no change to their work location. Half experienced more stress (51% compared with 45%) or anxiety (49% compared with 42%). Over two in five experienced more sleep problems (44% compared with 35%) or depression/low mood (43% compared with 40%).

There is also indication that more stress at work is associated with experiencing more mental health problems, as well as not feeling supported by employers.

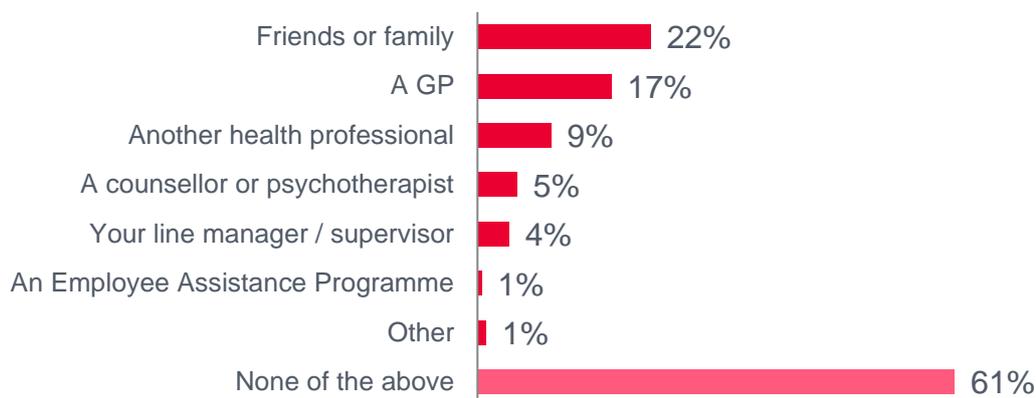
There is a more marked difference between those finding work more stressful for each of the mental health problems when compared with those who disagree that work is more stressful. Over two thirds (68%) experienced more stress than usual compared with less than three in ten (28%) of those not finding work more stressful and three in five (60%) experienced more anxiety than usual compared with three in ten (30%). Around half of those finding work more stressful have experienced more depression/low mood (53%) or sleep problems (49%), significantly more than those who have not found work more stressful (29% and 29%). Whilst differences are smaller, the same pattern is seen for those who do not feel their employer supported their health and wellbeing with those not feeling supported more likely to have experienced each of the mental health problems when compared with those who do feel that their employer supported them (57% compared with 47% stress, 54% compared with 39% depression/low mood, 53% compared with 45% anxiety, 48% compared with 39% sleep problems).

One in six (16%) reported that they were taking medication for stress, anxiety or depression before the Coronavirus pandemic, and 4% reported they started taking medication since the pandemic.

Seeking support

Since the start of lockdown, two in five (39%) adults have spoken to someone about physical or mental health issues (Figure 40). One in five (22%) spoke to friends or family, around one in six (17%) spoke to a GP and just under one in ten (9%) spoke to another health professional.

Figure 40: If spoken to anyone about physical or mental health issues since lockdown



Base: All adults (n=9,046)

Women were more likely than men to talk to anyone (45% compared with 32%). There is also a relationship with age, with younger age groups more likely to have spoken to someone than older age groups. Over two in five (45%) of those aged 18 to 34 spoke to someone compared with 40% of those aged 35 to 54 and 32% of those aged 55 or over. There is no difference in proportions speaking to a GP or other healthcare professional, but those aged 18 to 34 are more likely to have spoken to friends or family (30% compared with 23% and 15%) or a counsellor or psychotherapist (8% compared with 6% and 2%).

There is no difference by AUDIT-C categories in having spoken to someone about physical or mental health issues. However, there are differences when considering those who drank more than normal either earlier or later in lockdown.

Certain groups are more likely to have spoken to someone than others. These include:

- Those who drank more than normal earlier in lockdown (45% compared with 35% who drank the same and 40% who drank less). In particular, they were more likely than both groups to have spoken to friends or family (27% compared with 19% and 23%) or to their line manager or supervisor (6% compared with 4% and 4%).
- Those who drank more than normal later in lockdown (47% compared with 35% who drank the same and 42% who drank less).
- Those whose work has become more stressful (49% compared with 31% whose work has not). This group are particularly likely to have spoken to their line manager or supervisor (11%).

Those who have been furloughed, including flexible furlough, are more likely to have spoken to someone than those who have not been furloughed (46% compared with 40%) and are particularly more likely to have spoken to a counsellor or psychotherapist (9% compared with 5%). Similarly, those who have been made redundant or are in consultancy are more likely to have spoken to someone than those who have not, with over half (52%) having spoken to someone compared with less than two in five (38%). They are especially more likely to have spoken to friends or family (28% compared with 22%) and to have spoken to a counsellor or psychotherapist (12% compared with 5%).

There are also differences between those who are concerned for their job or business security and those who are not. Over a quarter (27%) have spoken to friends or family, almost one in five (18%) have spoken to a GP and one in fourteen (7%) have spoken to a counsellor or psychotherapist, all significantly higher than those who are not concerned (24%, 15% and 5%). Those who agree work is more stressful are also more likely to have spoken to someone than those who disagree (49% compared with 31%) and this is the case across sources of support.

Encouragingly, those who have experienced a large or moderate negative impact on their mental health are more likely to have spoken to someone about their physical or mental health issues. Almost three in five (58%) have spoken to someone compared with just over a quarter (27%) of those who have experienced a small or no impact. Whilst they are most likely to have spoken to friends or family (38%), a quarter (24%) have spoken to a GP and one in eight (12%) spoke to another health professional.

Accessing support

Those who spoke to friends or family were most likely to do so in person (81%) and half (48%) spoke to them on the phone. By contrast, of those that spoke to a GP, the vast majority (84%) spoke to them on the phone and a quarter (26%) spoke to a GP in person. Similarly, those who spoke to another health professional were most likely to speak to them over the phone (61%) however half (50%) spoke to them in person.

For those that accessed support remotely, more than two in five (44%) agreed that accessing support remotely was a positive experience and half (50%) would access support remotely in the same way in the future. For those who accessed support from their GP remotely, two thirds (68%) agreed that the support they received remotely was helpful.

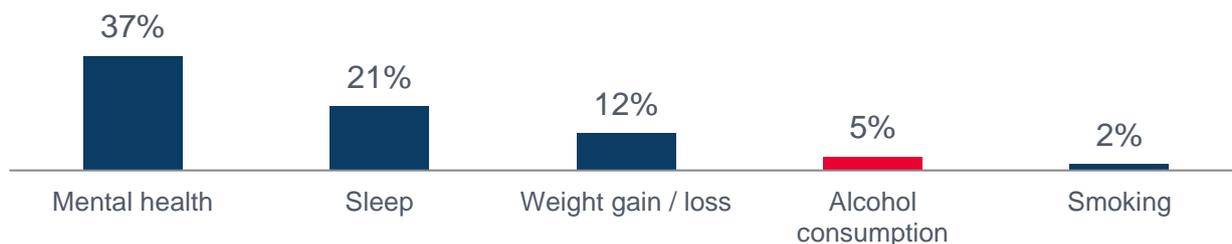
Of those who did not access support remotely from a health professional, most (69%) did not need to speak to anyone about their health. However, more than one in seven (13%) did not want to put pressure on the health service at this time. Smaller proportions were unable to do so remotely (4%) or accessed support in person (3%).

For those unable to access support remotely, three in ten (29%) couldn't get through to the service remotely due to waiting times, and around a quarter didn't want to overload the health service during the pandemic (26%) or decided to wait until they could access support in person (23%).

Issues discussed

Among those who accessed support from a GP or health professional, over a third (37%) discussed mental health (Figure 41). One in twenty (5%) discussed alcohol consumption.

Figure 41: Topics discussed with GP or health professional



Base: All who accessed support from a GP or health professional (n=1,921)

Higher risk drinkers were more likely to have discussed alcohol consumption when accessing support from a GP or health professional than increasing risk drinkers and low risk adults (14% compared with 6% and 2%). However, there were no differences in discussion of other topics listed.

Those who were drinking more than usual either earlier or later in lockdown are more likely to have discussed alcohol consumption, than those who were drinking about the same or less than normal for the same time periods. One in nine (11%) of those drinking more earlier in lockdown discussed their consumption with their GP. Unlike when considering AUDIT-C risk category, those who were drinking more than normal during lockdown were more likely to have discussed mental health with their GP. More than two in five (44%) of those who were drinking more earlier in lockdown discussed mental health compared with

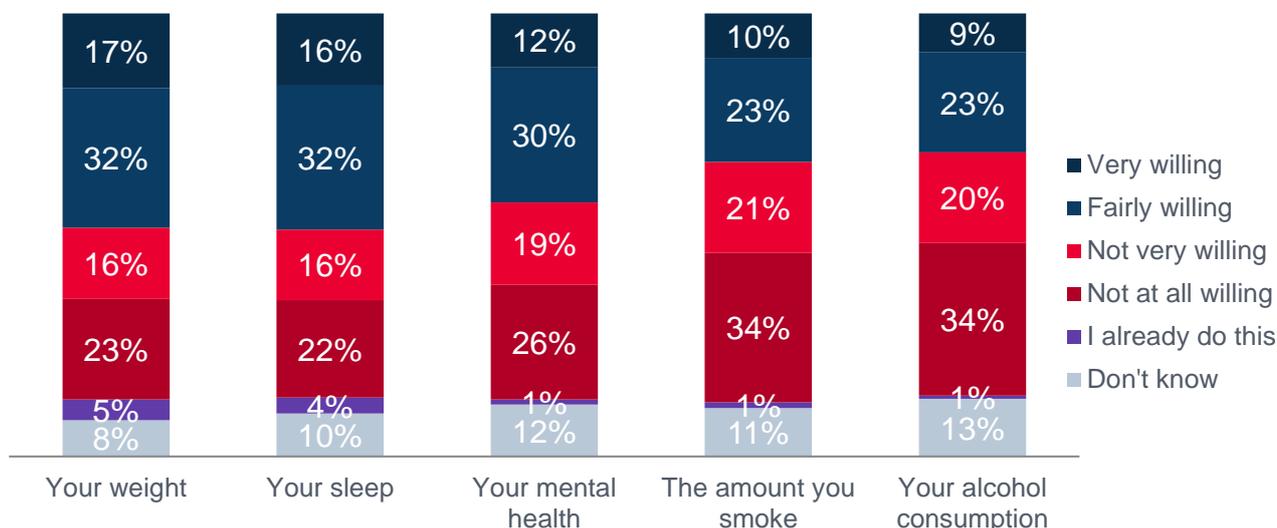
three in ten (31%) of those who were drinking the same amount and over a third (36%) of those who were drinking less than normal. Similarly, close to half (47%) of those who were drinking more than normal later in lockdown discussed mental health compared with less than a third (32%) of those who were drinking the same amount as normal and almost two in five (38%) of those who were drinking less than normal. Half (50%) of those who drank more than normal throughout lockdown discussed mental health with their GP.

Websites and apps for health behaviours

Two thirds (66%) of adults have not used a website or app to monitor or manage any of the health behaviours listed. Close to a quarter (23%) have used one for weight management, and over one in six (15%) have used one for sleep. A small proportion (3%) have used one for alcohol consumption.

Whilst previous usage of websites or apps to monitor or manage alcohol consumption is low, three in ten (31%) drinkers report that they would be willing to use one (Figure 42). In the context of doing the same for sleep (49%), weight (48%) and mental health (43%) there is less willingness to monitor alcohol consumption specifically.

Figure 42: Willingness to use website or app to monitor or manage



Base: All adults (n=8,826); Alcohol consumption base: All drinkers (n=7,664); Smoking base: All smokers (n=1,227)

Two in five (42%) higher risk drinkers would be willing to use a website or app to monitor or manage their alcohol consumption, significantly higher than increasing risk drinkers (36%) and low risk drinkers (25%).

There is also a greater willingness to use a website or app for alcohol consumption amongst those who drank more than normal throughout lockdown with over two in five (46%) willing to do so.

Calorie Labelling

Key findings

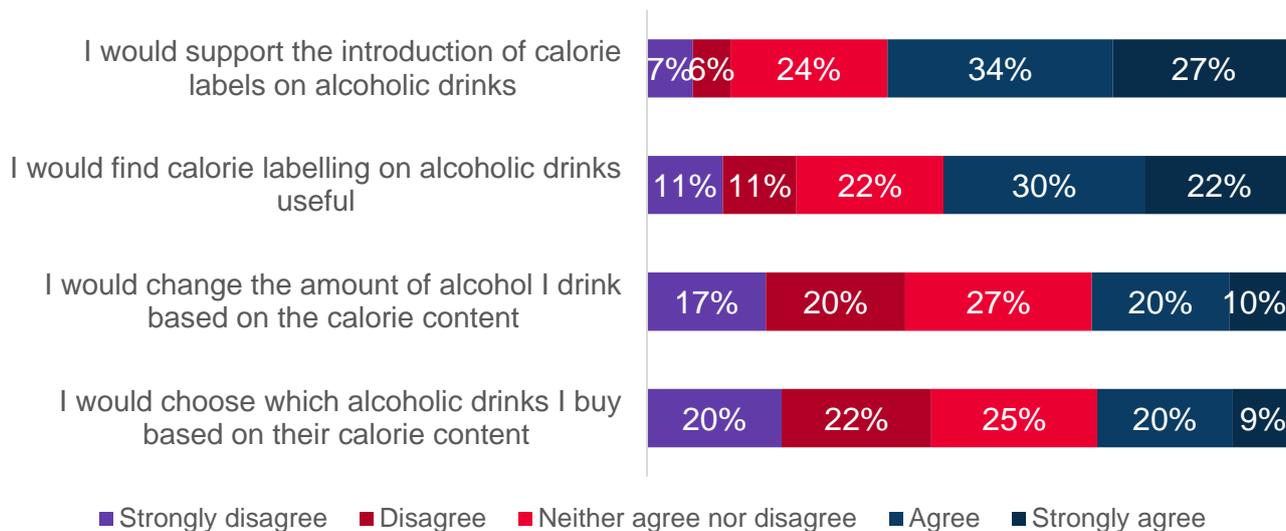
- The majority (70%) say they know how many calories are in the drinks they purchase and that they support the introduction of calorie labelling on drinks (61%).
 - Just under a third (30%) would change the amount they drink based on calorie content and a similar proportion (29%) say that they would choose drinks based on calorie content.
 - Women are more likely to find calorie labelling useful than men (58% compared with 47%) and are more likely to say that it will affect their choice of drink (35% compared with 23%). Younger respondents are also more likely to find it useful (59%) and to report that it would have an effect on the amount they drink (39%) and the type of alcohol they buy (36%).
-

Another area explored in the 2020 Monitor survey is attitudes towards calorie labelling on alcoholic drinks. Most drinkers (70%) feel they are aware of how many calories are in the alcoholic drinks that they consume. Certain demographics tend to pay more attention to calories, with women more likely to be aware than men (75% compared with 65%) and awareness increasing with age (65% of 18-34s; 71% of 35 to 54s; 73% of 55+). Those who drink more are also more likely to be aware: three-quarters (75%) of higher risk drinkers are aware compared with 67% of low-risk drinkers.

Three-fifths (61%) support the introduction of calorie labels on alcoholic drinks (Figure 43). This includes a majority of all AUDIT-C categories, with higher risk drinkers just as likely to support it as lower risk drinkers (59% compared with 61%). Women are more in favour than men (65% compared with 57%) and those who were drinking more in lockdown are also more likely to agree: 68% of those who were drinking more than usual earlier in lockdown agree compared with 57% of those drinking about the same and 63% of those drinking less.

Although over half (53%) agree that they would find calorie labelling on alcoholic drinks useful, fewer (30%) say they would change the amount of alcohol they drink based on calorie content and only 29% say that calorie labelling would affect their choice of alcoholic drink. This suggests that although calorie labelling might be helpful for drinkers, it may not have a significant impact on the type or amount of alcohol they consume.

Figure 43: Attitudes towards calorie labelling



Base: all drinkers (7,834)

Women are more likely to find calorie labelling useful (58% compared with 47% of men) and are also more likely to say that it would affect their choice of drink (35% compared with 23% of men) and how much they drink (35% compared with 24% of men). The results suggest that calorie labelling is more likely to be effective among younger drinkers. Those aged 18-34 are significantly more likely to agree that they would find it useful (59% compared with 45% of 55+) and that it would affect their choice of drink (36% compared with 21% of 55+) and the amount they consume (39% compared with 20% of 55+). Younger age groups are also more likely to support the introduction of calorie labelling (65% of 18-35s).

Increasing risk drinkers are the most likely to benefit from calorie labelling being introduced. This group are more likely to find it useful (56%) than other drinkers and are more likely to say that it would affect their choice (31%) of drink and the amount that they consume (34%).

Conclusions

The Coronavirus pandemic has changed British society and its repercussions will be felt for years to come. As such, we can expect that any results from the 2020 Drinkaware Monitor will need to be situated in the unique historical context in which the research was undertaken. The nationwide lockdown that was enacted in March 2020 was unprecedented in British history and it is unsurprising that once it was announced many turned to food and alcohol. It is noteworthy however that while a quarter (26%) reported drinking more earlier in lockdown a similar proportion (27%) reported drinking less, opting for healthier lifestyle habits.

For those who did drink more, the reasons for doing so are multiple and complicated and no single reason will encapsulate the experience for every individual. For many, it seems that the lockdown was a specific moment in time when it was felt that the usual rules did not apply. As such, it is unsurprising that alcohol consumption, as well as other unhealthy lifestyle habits increased but the concern is that when restrictions eased this became the 'new normal' for respondents who found it hard to return to pre-lockdown habits. It is concerning that, with Coronavirus still prevalent in the UK at the time of writing, the main reasons given for drinking more are unlikely to change soon and respondents who found themselves drinking more due to having more time available and less structure to their week may well continue to drink more as the economic and social consequences of the virus are felt. Future lockdowns therefore run the risk of cementing these behavioural changes, for higher risk drinkers in particular. Further research to monitor how drinking habits change as the pandemic continues will be essential in tracking how attitudes and behaviour and mitigating the unintended health consequences of measures taken to protect the UK from Coronavirus.