

Open versus Closed: The Risks Associated with Retail Liquor Stores during COVID-19

Catherine Paradis, Senior Research and Policy Analyst, CCSA

Key Messages

- Risks associated with keeping liquor retail stores open include increased alcohol consumption in the population, a rise in domestic violence and long-term costs for governments.
- Risks associated with closing liquor retail stores include involuntary withdrawal among people with alcohol use disorders, turning to non-beverage forms of alcohol, increased anxiety among individuals using alcohol, stockpiling and reduced profits for governments.
- Many risks are hypothetical and theoretical. The only empirical evidence available to guide the analyses comes from studies of liquor store strikes in Canada, Finland, Norway and Sweden between 1963 and 1985.
- Amid the decision to keep liquor retail stores open and given low alcohol literacy among Canadians, governments should invest in [resources to educate the public about low-risk alcohol consumption](#).
- Governments should plan to provide additional funding to healthcare professionals who perform [brief interventions](#), as well as groups and organizations, and social and health services [that can help](#) address domestic violence and support victims.

As the COVID-19 pandemic deepens in Canada, governments have ordered the mandatory closure of all non-essential services and businesses. The scope of essential or priority services varies among jurisdictions, but the federal government defines an “essential service” as any service, facility or activity that is or will be necessary for the safety or security of the public or a segment of the public (Government of Canada, 2015). Amid the global health emergency, provincial and territorial governments’ identification of liquor stores as essential businesses permitted to stay open has raised questions.* The decision also raised severe concerns among First Nations, with the Montreal Lake Cree Nation and the Federation of Sovereign Indigenous Nations requesting that the provincial governments close all liquor stores.

The concern with controlling the spread of the coronavirus is paramount in all decisions about keeping retail stores open during the pandemic. However, this document will highlight the potential risks associated specifically with **keeping liquor stores open and with closing them**. Many highlighted risks are theoretical or hypothetical. The only empirical evidence available to guide the analysis comes from studies of liquor store strikes in three Canadian provinces (Manitoba, Newfoundland and Nova Scotia) and three Nordic countries (Finland, Norway and Sweden) between 1963 and 1985.

* At time of writing, provincial and private liquor stores are open across all Canadian provinces and territories. Prince Edward Island initially closed its stores, but later reopened some of them. People in Newfoundland cannot buy alcohol in stores, but can buy it by order-for-pickup only (Tait, 2020).



Potential Risks of Keeping Retail Liquor Stores Open

Drinking More Often and in Greater Quantities than Usual

In the face of the COVID-19 pandemic, Canadians shopping habits have changed. Although governments have decided to keep retail liquor stores open, fear of running out of alcohol has led consumers to stockpile alcoholic beverages to a larger extent. Off-premise sales of liquors and wines have increased by approximately 25% in the United States (Gustafson, 2020). The same phenomenon is happening in Canada. In British Columbia, liquor sales have increased by 40% with a particular demand for products sold in large volume (St. John, 2020). In Quebec, a spokesperson for the Société des alcools du Québec reported that since the beginning of the COVID-19 crisis, shops have been as busy as during the holidays and online sales resemble those of Black Friday (Lortie, 2020).

The Canadian drinking culture is one where alcohol consumption serves as a boundary between weekday and weekend, work and leisure; it marks a “time out” (Paradis, Demers, Picard, & Graham, 2009). With the ongoing threat of COVID-19 and the accompanying social-distancing and isolation, these boundaries have become blurred. People are finding it difficult to gauge when work and related activities end and leisure time begins, much like during the holidays. Disrupted routine may be accompanied by loneliness (due in part to not working or working from home) and anxiety about the current situation. More alcohol stockpiled in the home than usual could lead some to drink more alcohol than they typically do. Early reports are indicating this may well be the case for almost two in ten Canadians (Canadian Centre on Substance Use and Addiction, 2020; La Presse Canadienne, 2020) and slightly more among those under 50 years old (Statistics Canada, 2020).

Increased Domestic Violence

Reports from around the world indicate that the COVID-19 pandemic has already resulted in a significant spike in domestic violence during the lockdown (Connolly, Jones, Phillips, Kuo, & Kelly, 2020; Euronews, 2020; Freeman, 2020; Godin, 2020). In China, local police stations saw a threefold increase in reported cases of domestic violence in February compared with the previous year. Local family support centres saw an increase in the severity of domestic violence, as well as eruptions across a broad spectrum of relations and age groups, like between parents and children or among siblings (Vanderklippe, 2020).

In Canada, as of the time of writing, governments have not enforced lockdown procedures. Instead, Canadians have been asked to exercise physical distancing and to self-isolate at home. In some households, a lack of distance can provide more opportunities for conflict. The increased presence of alcohol within these household can worsen difficult dynamics, especially among individuals who exhibit problematic behaviour when intoxicated by alcohol. For instance, alcohol use by men has consistently been shown to be a significant risk marker for partner violence across different settings (Krug, Dahlberg, Mercy, Zwi, & Lozano, 2002). The relationship between alcohol use and intimate partner violence can be explained by the effect alcohol has on intensifying arguments between couples, reducing inhibitions, clouding judgment and impairing an individual's ability to interpret social cues (World Health Organization, 2006). The evidence suggests that women who live with men who use alcohol heavily are at considerably greater risk of physical partner violence, and that men who have been drinking inflict more serious violence at the time of an assault (Krug et al., 2002).

Significant Long-term Costs for Governments

According to the *Canadian Substance Use Costs and Harms* report, the costs of alcohol use in Canada are \$14.6 billion annually (*Canadian Substance Use Costs and Harms* Scientific Working



Group, 2018). These costs are largely attributable to direct health costs (\$4.2 billion), including inpatient hospitalizations for alcohol-related diseases, specialist treatment for alcohol use disorder (AUD) and the costs of physician time associated with the treatment. Direct criminal justice costs amount to \$3.2 billion and include policing, courts and corrections. Keeping liquor stores open during the COVID-19 pandemic further contributes to and potentially increases these costs at a time when there will be an increased demand on public financial resources.

Potential Risks of Closing Retail Liquor Stores

Involuntary Withdrawal among Canadians with Alcohol Use Disorder

Approximately 3.2% of the Canadian population has reported AUD (Pearson, Janz, & Alis, 2012). For those who have been drinking alcohol in excess over a long period, sudden abstinence from it can cause alcohol withdrawal with symptoms such as trembling, insomnia and anxiety, and other physical and mental symptoms. For those experiencing severe alcohol withdrawal (about one out of 20 people with symptoms), there is a risk of developing a condition called delirium tremens, which is a state of temporary confusion that can affect the body's vital signs and create risk of heart attack, stroke or death (Harvard Health Publishing, 2019). Among this group, there is also a risk of turning to non-beverage forms of alcohol, which either contain ethanol, but are not intended for drinking (e.g., mouthwash, hairspray, cleaning products), or contain other intoxicating alcohols (e.g., methanol), that are consumed in lieu of traditional beverage alcohol (Green et al., 2018).

However, studies from Newfoundland and Manitoba indicate that strikes of liquor stores employees and brewery workers, which both were over seven months long, had no effect upon the number of admissions for alcohol disorders to psychiatric facilities or alcohol detoxification units (Ede & Templer, 1976; Harper, Macrae, & Elliott-Harper, 1981). Moreover, the Manitoba strike of liquor store workers, just like the Norwegian and Swedish strikes in the wine and liquor monopolies, were all associated with decreased rates of admission for drunkenness during the period of the strikes (Harper et al., 1981; Mäkelä, Rossow, &

Tryggvesson, 2002; Rossow, 2002). Hence, although in theory sudden reduced availability of alcohol could increase rates of withdrawal, in reality it has been associated with decreased rates of acute intoxication among those who use alcohol heavily, including members of marginalized communities with AUD. However, unlike the closing of retail outlets due to strikes, the current pandemic includes several aggravating factors, such as job and housing uncertainties, anxiety and loneliness.

Unintended positive consequences of liquor store strikes

Studies of the strikes in Sweden (1963) Norway (1978) and Finland (1972, 1985) have shown significant decreases in alcohol-related harms including accidents, crimes, police reports and arrests for drunkenness and domestic disturbances (Mäkelä et al., 2002). In Canada, the strike in Newfoundland also led to a reduced number of arrests for drunkenness in St-Johns (Smart, 1977).

Increased Anxiety among Canadians Who Use Alcohol

Generally, there are four main reasons why people drink: to be social, to create a positive mood, to conform and to cope (Chief Public Health Officer, 2018). Many Canadians rely on alcohol to cope with difficult emotions, challenging life events, boredom and stress. Among the 11.6% of Canadian adults reporting an anxiety disorder or mood disorder (Mental Health Commission of Canada, 2015), about one in four self-medicate or reduce their symptoms with alcohol (Turner, Mota, Bolton, & Sareen, 2018). During the current crisis, limiting access to alcohol might aggravate stress, fear and anxiety among a group of Canadians who are likely to be experiencing these emotions more than usual.



Stockpiling and Panic-Buying

Closing retail liquor stores could cause panic buying and stockpiling among Canadians who use alcohol, even those who usually drink little and within the low-risk alcohol drinking guidelines. For example, when Prince Edward Island decided to close all liquor and cannabis stores on March 19, 2020, the announcement caused panicked buying as people tried to stock up (Mercer, 2020). Besides causing long lineups, where social distancing guidelines are ignored and the risk of spreading COVID-19 is increased, stockpiling could also increase excessive drinking. For many Canadians, having more alcohol than usual in their immediate surroundings could lead to more frequent alcohol consumption and a greater quantity consumed per occasion.

Significant Loss of Short-term Revenue for Governments

In 2016–2017 provincial and territorial governments earned an average of \$411 annually per person over the legal drinking age from the control and sale of alcoholic beverages (Statistics Canada, 2019). Closing liquor stores might cause a significant loss of revenue for governments at a time when there will be increased demands for public-sector spending.

Moving Forward: On the Other Side of COVID-19

In the designation of liquor retail stores as an “essential service,” the COVID-19 pandemic has revealed just how deeply the “alcogenic culture” (Johnston, 2013) is entrenched in society. In Canada and globally, the immediate fear of going without alcohol seems to have taken priority over concerns about developing alcohol use diseases and disorders or experiencing domestic violence. This designation is a stark reminder of the efforts needed and the challenges ahead to implement policies and regulations to reduce death, disease and injuries caused by the harmful use of alcohol.

The real risk that some people might start to consume more alcohol than usual is one of the most immediate concerns related to the decision by governments to keep liquor retail stores open. People might do so to cope with loneliness, stress and anxiety or because of a lack of routine (see [COVID-19, Alcohol and Cannabis Use](#)). What could worsen this risk is low alcohol literacy among Canadians, meaning that some people may start drinking more alcohol without being aware of the health and social risks associated with heavy alcohol use (Hobin et al., 2018). On the other side of COVID-19, there will likely be an increased need [for resources to educate the public about low-risk alcohol consumption](#). Healthcare professionals might need additional [resources for brief interventions](#) to help individuals understand their drinking patterns and change their drinking behaviour.

The decision to keep liquor stores open while advising people to stay home is a potentially dangerous situation for children and partners in violent households. Governments should be ready to provide additional funding to groups and organizations, and social and health services [who can help](#) with domestic violence and give support to victims.

Recommendations

Continuous access to alcohol can be a question of life or death for people with severe alcohol use disorder. For them, retail liquor stores are an “essential service” that is necessary for their safety.

For all other Canadians, governments should increase public education efforts to remind them that alcohol is a luxury commodity that carries a risk of adverse health and social consequences. To reduce harms, those who choose to drink should follow [Canada's Low-Risk Alcohol Drinking Guidelines](#).



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