

An investigation into the self-reported changes in alcohol consumption and tobacco smoking behaviour in a nationally representative population after total alcohol and tobacco sale restrictions were implemented during South Africa's COVID-19 lockdowns

Towards the end of March 2020, the South African government started implementing national lockdowns to slow down and contain the spread of COVID-19 across the country. These national lockdowns included travel bans within and across the provinces, closures of schools, universities, non-essential businesses (tourism, restaurants, sporting events, concerts), as well as social contacts among other restrictions. The SA government also introduced total alcohol and tobacco sale restrictions until the end of August 2020, when controlled and coordinated sales were permitted Monday to Thursday.

In South Africa, 33% of adults consume alcohol with 43% of these binge drinking. Excessive alcohol consumption is associated with the burden of infectious diseases, non-communicable diseases, injury and trauma, and poor maternal and child health. Alcohol and tobacco sale restrictions were implemented to limit social gatherings as well as relieve hospitals of alcohol-related trauma cases. Furthermore, tobacco restrictions were also implemented to prevent the spread of COVID-19 via cigarette sharing and reduce the number of severe cases of COVID-19 among tobacco users

Therefore, we aimed to investigate the self-reported changes in alcohol consumption and tobacco smoking behaviour in a nationally representative population 14 months after total alcohol and tobacco sale restrictions

before the Omicron COVID-19 wave 4 and while SA was in a low-level lockdown.

We aimed to answer the following research questions: What were the self-reported changes in alcohol consumption and tobacco smoking behaviour among South African adults 14 months after COVID-19 alcohol and tobacco sale restrictions? Furthermore, what were the changes in alcohol consumption and tobacco smoking behaviour which were related to educational level, employment, and wealth status among other factors? Our results are discussed in the context and differences between SA and Europe to draw parallels between the two.

What the study found

Among those that drank alcohol (33.2%), 31.4% were classified as having a drinking problem that could be hazardous or harmful and 18.9% had severe alcohol use disorder during the COVID-19 lockdowns.

Twenty-two percent (22.0%) of those that reported alcohol consumption reported that the COVID-19 pandemic lockdowns changed their alcohol consumption habits, with 38.1% reporting a decreased intake or quitting altogether.

Among the one in five respondents (19.2%) who had ever smoked, most reported smoking at the time of the survey (82.6%) with many classified as light smokers (87.8%; ≤10 cigarettes/day).

Almost a third (27.2%) of those smoking reported that the COVID-19 pandemic lockdowns had changed their use of tobacco products or vaping, with 60.0% reporting a reduction/quitting tobacco use. Given that sales were restricted this indicates that people could still get hold of tobacco products.

Heavy smoking was associated with older age (p = 0.02), those classified as wealthy (p < 0.001), those who started or increased tobacco smoking during the pandemic lockdowns (p = 0.01), and residential provinces (p = 0.04).

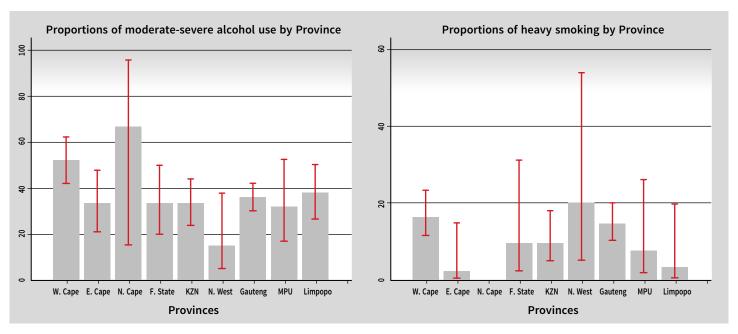


Figure 1. Proportions of moderate-severe alcohol use and heavy smoking by province

Conclusion and implications

Despite restrictions on the sale of alcohol and tobacco in SA between 27 March and August 17, 2020, during the COVID-19 pandemic, a similar proportion of respondents reported the use of both substances 14 months after sale restrictions were lifted.

The overall decline in alcohol consumption and tobacco use might suggest that the regulatory restrictive strategies on sales had some effect on the reported changes but may be inadequate, especially during times when individuals are likely to experience high-stress levels.

Therefore, encouraging and promoting people to adopt positive healthy lifestyles such as physical activities and reducing alcohol consumption, and quitting smoking might have a long-lasting effect than restrictions on sales.

The results of this study should encourage the government to carry out targeted health promotion and education toward reduction in alcohol consumption and smoking cessation.

These targeted health promotions and education campaigns (which can be universal) can be provided through the media on platforms such as national television channels, radios, and social media (Twitter, Instagram, and Facebook).

Reference:

The Effects of COVID-19 Pandemic Lockdowns on Alcohol Consumption and Tobacco Smoking Behaviour in South Africa: A National Survey

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