Using Alcohol to Cope with the COVID-19 Pandemic: Differentials According to Sexual and Gender Identities

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Background

• COVID-19 related stressors have taken a toll on people’s social and emotional health
• Alcohol sales and usage have increased since the pandemic
• Sexual and gender minority (SGM) people have lower than average levels of socioemotional and physical well-being, and greater alcohol use and use of alcohol to cope
• Yet, SGM people are mostly excluded from studies of alcohol use since COVID-19 and/or results are mixed

Data and Methods

Data: The National Couples’ Health and Time Study (NCHAT) partnered individuals, September 2020-April 2021, ages 20-60

Dependent Measures:

• Whether use alcohol to cope, yes/no
• Among individuals who drank in the last 30 days:
  • Regularity of drinking over last 30 days (1-7)
  • Typical number of drinks per day (1-20)

Key Covariates: Sexual/Gender Identities; COVID-19 stress (1-5); COVID-19 disruption (1-4); microaggressions (1-5); supportive climates (1-8); and sociodemographic variables

Analyses: Multivariate, step-wise linear and logistic regression

Findings

• The use of alcohol to cope, regularity of drinking, and number of drinks vary by SGM status
• COVID-19 disruption associated with increased odds of drinking to cope
• COVID-19 stress associated with more drinks per day
• Pandemic-related stress and disruption do not explain these differences, nor do microaggressions and supportive climates

Conclusion

• COVID-19 stress and disruption remain elevated and alcohol consumption remains high
• Several categories of SGM status have particularly high levels of drinking and using alcohol to cope
• Minority stress does not account for SGM differentials in drinking
• Need to continue to monitor SGM people’s and other vulnerable population’s health and well-being and identify factors associated with poor health outcomes

Hypotheses

Minority Stress Theory suggests that:

Hypothesis 1: SGM people have higher post-pandemic levels of alcohol use, and use of alcohol use to cope, than cisgender people

Hypothesis 2: Differentials are in part explained by pandemic-related stress and disruption

Hypothesis 3: SGM-specific stress accounts for differences in alcohol consumption by sexual and gender identity

This research was supported in part by the Center for Family and Demographic Research, Bowling Green State University, which has core funding from the Eunice Kennedy Shriver National Institute of Child Health and Human Development (P2CHD050959)