



How does social class shape women's alcohol stockpiling during COVID-19?: A qualitative study in South Australia during the 2020 lockdown



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1. Introduction

A pervasive response to a disaster or crisis is stockpiling, colloquially known as hoarding or panic buying (Chen, Rajabifard et al., 2020). In the early phases of the COVID-19 pandemic (March 2020), stockpiling was more extreme and widespread in Australia than most of the 54 countries analysed in one study (Keane & Neal, 2021), with researchers arguing that consumer panic underpinning stockpiling was spreading faster than the virus itself (Arafat, Kar et al., 2020; Arafat, Kar et al., 2020; Depoux, Martin et al., 2020). Indeed, stockpiling is directly correlated with the introduction of government lockdowns, with people stockpiling foods and other necessary items directly after news of imminent lockdowns (Prentice, Chen, & Stantic, 2020). The phenomenon of stockpiling alcohol represents an intention to consume as well as concern about potential unavailability of product for purchase. Stockpiling behaviour can thus be read as an important indicator of attitudes toward alcohol and its place in midlife women's lives during times of crisis.

With the view of achieving an enhanced understanding of the role of alcohol in midlife women's lives, the present paper is an exploration of how midlife women talked about purchasing and stockpiling alcohol during 2020 lockdown conditions in South Australia. While some knowledge exists on this topic broadly, women's specific desires and

opportunity to stockpile alcohol remains unclear. We have previously shown that women in midlife consumed more alcohol while living in lockdown conditions in order to deal with the short-term 'crisis' and in response to the fear, uncertainty and loneliness created by the pandemic (Huppertz et al., 2022; Lunnay et al., 2021; Ward et al., 2022). This previous analysis did not however, explore how women from different social classes managed their alcohol consumption nor whether their alcohol purchasing behaviour during COVID-19 varied by social class; although patterns observed within our early analysis suggested it did vary. The analysis presented here adds complexity and nuance to our previous work by exploring how women in different social classes responded to life during COVID-19 as it pertained to purchasing, consumption and stockpiling alcohol.

Purchasing behaviour obviously connotes issues of affordability and access that makes economic status intuitively relevant. Additionally, the sociology of consumption suggests that stockpiling of socially symbolic products like alcohol can be thought of as a mode of consumption that in contemporary society supersedes Marx's mode of production as primarily stratifying social classes in Australia (Corrigan, 1997). Thus, for our classed analysis, we extend beyond economic capital and engage Bourdieu's relational model of social class that includes non-economic socially determined aspects of opportunity like social and cultural resources

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(Bourdieu, 1984). When combined, these forms of capital position or classify actors into more or less privileged positions (Bourdieu, 1989). Exploring the relationship between class position as a form of privilege, and thus of status or authority, and stockpiling alcohol is appropriate because of the moral undertones of both. As such, a classed dimension gives a much more complex understanding of the social conditions and sensibilities that surround stockpiling during COVID-19 than has previously been available. Such an understanding is necessary because when the two phenomena (drinking alcohol and stockpiling) collide there is potential for the disrepute of those less privileged for enacting the same behaviour as those more privileged but who have the authority to escape criticism. This is concerning because we know that the stigma attached to the behaviours of already marginalised groups can be further damaging during the pandemic (Zinn, 2021). Giving prominence to the classed factors that shape alcohol stockpiling has the potential to uncover misrepresentations of alcohol stockpiling among marginalised groups of women. Furthermore, we suspect that classed expressions of stockpiling behaviour are also symbolic expressions of the pre-pandemic value of alcohol and so this work enhances our overall understandings of the role of alcohol in Australian women's lives and for a demographic that is now amongst Australia's heaviest drinkers (Livingston & Callinan, 2019). It responds to the gap in scholarship on alcohol behaviours during 'midlife', which has been less-researched than have early or late periods in life (Lachman, Teshale et al., 2014). Additionally, the increased gendered caring responsibilities absorbed by women during COVID-19 lockdowns are seen as contributing to increased alcohol consumption in some midlife women (Rehm, Kilian et al., 2020; Wenham, Smith et al., 2020; Smith, Davies et al., 2021). From our previous research, we understood that women have a logic for continued alcohol consumption despite known risks (Author 2021). Certainly, existing research confirms that women are more likely than men to increase their alcohol consumption when dealing with conflicting work and family responsibilities (Kuntsche & Kuntsche, 2021a, 2021b). That said, we know middle-aged people in general are less likely than their younger or older counterparts to consider their drinking as 'health damaging' (Blazer & Wu, 2009). Before we describe our study, we first provide an overview of the literature on stockpiling and on women's alcohol consumption during the pandemic as context. We take care to point out where social class seems to have given contours to stockpiling behaviour so we can use these as areas for extension addressed in this paper.

1.1. Stockpiling during COVID-19

There have been numerous studies of 'stockpiling' and panic buying products in response to both the COVID-19 pandemic and the different lockdowns that have been instigated to curb viral transmission (Prentice, Chen, & Stantic, 2020; Sim, Chua et al., 2020; Keane & Neal, 2021), although very few studies specifically focus on stockpiling alcohol, despite lots of hand wringing in the media and images/videos of long queues at alcohol outlets. Stockpiling may be regarded as a human response to perceived scarcity of resources (Keane & Neal, 2021), an emotional response to fear (Arafat, Kar et al., 2020) or a 'fear of missing out' (Prentice, Quach, & Thaichon, 2022), and is evidenced as building private stocks or placing orders for more than currently needed (Sterman & Dogan, 2015). Although potentially 'rational' behaviour in response to fear or distress during COVID-19 (Rajkumar, 2020; Taylor, 2021), stockpiling can also be seen as a negative social behaviour because it might lead to shortages of products for others (Micalizzi, Zambrotta et al., 2021). Various literature reported the negative stereotype of 'stockpiling' documented in the media (Arafat, Kar et al., 2020; Arafat, Kar et al., 2020; Atlani-Duault, Ward et al., 2020; Depoux, Martin et al., 2020; Kumar & Nayar, 2020).

Most of the studies in COVID-19 times have focused on stockpiling food and non-perishable household items such as toilet paper (Wang, An et al., 2020; Benker, 2021; Fischer, Twardawski et al., 2021; Micalizzi, Zambrotta et al., 2021), although one paper explored 'Doomsday

Prepping' which involves amassing enough food and non-food items to outlast a major catastrophe (Smith & Thomas, 2021). Most of these studies show increased food purchasing to cover expected lockdown lengths, but not the morally charged 'panic buying' that filled social media during the early stages of the pandemic. Indeed, Benker (2021) argued for the term 'extra procurement' instead of 'stockpiling' because of the negative connotations of stockpiling, which has been linked to individualistic and stigmatised behaviours (Duan, Bu et al., 2020; Kumar & Nayar, 2020). In Benker's study (2021), families she interviewed did not stockpile food, purchasing only enough to cover the time they were expecting to be in lockdown. It also recognised that supermarkets would remain open, negating the need to stockpile. No low-income families, however, were included in this study so it is difficult to understand if and how such behaviours and emotions differed by social class which is the focus of our paper. Whilst income on its own does not define social class, emerging findings suggest that higher income people are more likely to engage in stockpiling (Yoshizaki, de Brito Junior et al., 2020). But, social-class based stigma is also evident during COVID-19, with the spread of COVID-19 being unfairly levelled at people on with lower levels of economic, social or cultural capital (Bhattacharya, Banerjee et al., 2020; Duan, Bu et al., 2020; Lasco, 2020). In numerous studies unrelated to COVID-19, people in the middle and upper classes have been shown to moralise or even deride people in the working classes (Lawler, 2005; Skeggs, 2005; Tyler, 2008).

Research in a number of countries has found that COVID-19 lockdowns were associated with increased alcohol purchasing and consumption (Anderson, Llopis et al., 2020; Callinan, Mojica-Perez et al., 2021; Daly & Robinson, 2021; Koopmann, Georgiadou et al., 2021; Lee, Dodge et al., 2021; Sugarman & Greenfield, 2021) and within Australia, among midlife women in particular (Neill, Meyer et al., 2020; Callinan, Mojica-Perez et al., 2021; Callinan, Smit, et al., 2021). An Australian study of drinking practices during COVID-19 found changes in how people consumed alcohol and specifically, increases in the frequency of consumption including extensions in the time available to people for consuming alcohol (Caluzzi et al., 2022). People who bulk-bought their alcohol compared to those who reported not doing so demonstrated an increased consumption of almost 0.5 drinks per day across the same time-period (Callinan, Mojica-Perez et al., 2021; Callinan, Smit, et al., 2021). However, the extent to which 'stockpiling' occurs with the view to reserve alcohol in case it becomes less available, or with specific intentions to consume more, has not been elucidated. Prior to the COVID-19 pandemic, approximately 60% of alcohol consumption in Australia was consumed within the home and this rate was 75% for people aged over 55 years (Callinan, Mojica-Perez et al., 2021). Governments used stay-at-home lockdown measures to reduce the transmission of COVID-19, which resulted in people spending more time at home and being socially isolated at times of stress. Researchers in Australia have sought to understand the impact of these lockdowns on alcohol consumption within the home (Callinan, Mojica-Perez et al., 2021; Callinan, Smit, et al., 2021), particularly for women in 'midlife' (45–64 years), whose consumption during the pandemic was prevalent (Callinan, Mojica-Perez et al., 2021) and for whom home-drinking was a norm before COVID-19 (Australian Institute of Health and Welfare (AIHW) 2020).

1.2. Opportunities and reasons for stockpiling alcohol during COVID-19

In most countries, COVID-19 lockdowns involved people being confined to their homes for reasons other than 'essential services', but purchasing alcohol was still possible. For example, supermarkets in the UK which sold alcohol were open, and alcohol 'bottle-shops' in Australia were deemed essential and remained open. All of these providers increased marketing of their home delivery services (Colbert, Wilkinson et al., 2020), arguably making alcohol more accessible for individuals with the means to pay. In the US, there was a 34% increase in alcohol sales in April–June 2020 compared to April–June 2019, an increase from

7.1 to 9.5 Billion USD (Lee, Dodge et al., 2021). In the UK, alcohol consumption increased during lockdowns particularly for 55–74 year-olds (Rao, Mueller et al., 2021), with research indicating that this was linked to both social isolation and stress (Daly & Robinson, 2021; Kim, Majid et al., 2020). In contrast to these studies, which relied on self-reported alcohol consumption, another study found little evidence of increased alcohol purchasing (measured in terms of grams of alcohol purchased per household per day, pre- and post-COVID-19 lockdowns) once account was taken of the reduction in purchasing from on-licensed premises such as pubs and restaurants, which were closed during lockdowns (Anderson, Llopis et al., 2020). Of interest to this paper are the social class differential(s) in off-site alcohol purchasing, whereby purchasing by middle and upper class people increased by between 30 and 40%, whereas for working-class people purchase only increased by 20% (Anderson, Llopis et al., 2020). Although the authors did not consider social class in-depth, a differential impact of lockdowns on alcohol purchasing by social class seems apparent and points to the need for further investigation.

It is important to note that stockpiled purchases may not necessarily result in increased consumption during lockdown, but rather excess might simply be a 'reserve'. However, our quantitative study of stockpiling of alcohol conducted at two timepoints during COVID-19 (May and July 2020) examined stockpiling in Australia and the UK (Authors 2021) and found Australian women increased their stockpiling as the pandemic progressed. The study also found women in the UK consumed and stockpiled alcohol, with depression specifically associated with increased stockpiling. Among Australian women who increased alcohol consumption during COVID-19 there was a seven-fold increase in stockpiling. Moreover, those study participants reporting more stockpiling also reported increased intake as the COVID-19 lockdown conditions eased. Whilst our earlier study provides some statistical confirmation of alcohol purchasing behaviour and links to increased consumption during COVID-19, nuanced understanding of the reasons for this behaviour, and importantly, how these reasons vary with social class, and open the potential for social disparities to be exacerbated, remains under-explored. As the pandemic continues, alcohol purchasing behaviour during lockdown and the links to increased consumption warrant attention given the harmful effects of alcohol. Even short-term increases in alcohol consumption to 'get through' a difficult period such as a COVID-19 lockdown exacerbates long-term/cumulative health risks (Sarich, Canfell et al., 2021). There are various challenges for public health messages to impact alcohol consumption during COVID-19. Addressed in our analysis here is the possibility for classed differences in women's alcohol stockpiling practices by explicating Bourdieu's (1984) model of social class, and offer inroads for tailored responses and we explicate our research approach next.

2. Methods and data analysis

The data presented in this paper are derived from semi-structured, open-ended interviews with 40 South Australian women aged 45–64 years. We interviewed each woman twice. The first interviews were conducted during 2018–2019 (pre-COVID-19) and explored why women consume alcohol, what alcohol provides in their lives and barriers/enablers to modifying consumption. Women were re-interviewed in early to mid-2020 (during-COVID-19). The data reported here are from the second interviews, a period during COVID-19 lockdown conditions exclusively. On this occasion we asked women specifically about their alcohol purchasing considerations during COVID-19. All interviews were undertaken by researcher BL a woman in her late thirties. During COVID-19, interviews averaged 30–45 min and occurred via telephone due to social distancing rules – there were no issues with rapport development given interviews were an extension from the first interviews conducted by the same interviewer.

We recruited a diverse sample of South Australian women through Facebook posts, a newspaper advertisement and local media coverage.

We asked women to convey their interest to participate in an interview by filling in a brief Qualtrics survey which crudely measured education, socioeconomic status, and self-rated alcohol consumption. We sought variation across these categories. We recruited mostly self-perceived 'light' and 'moderate drinkers' and used 'extreme' case sampling to locate some 'occasional' and 'heavy' drinkers for variation, with an even mix of 'drinkers' across each social class group. Prior to re-interview, social class was assessed using a survey that captured data on income and assets (economic capital), social prestige (social capital), and participation in cultural activities (cultural capital), based on Bourdieu's model of social class explained in *Distinction: A social critique of the judgment of taste* (1984). The social class survey was originally developed by Savage et al. (2013) for the BBC's Great British Class Survey and explored in more detail in Savage (2015) to identify social class divisions in the UK. The survey has since been validated by Sheppard and Biddle (2017) to identify social classes within Australia, which is the version we applied in our study. The three social class groups were: working-class (n = 14; low levels of economic, social and cultural capital); middle-class (n = 17; medium levels of economic, social and cultural capital); and affluent-class (n = 19; high levels of economic, social and cultural).

2.1. Interview content and process

We asked participants whether social distancing during COVID-19 changed the way they socialised, their feelings of connectedness with others and their alcohol consumption. In terms of alcohol consumption, we specifically asked all participants: "If you consume alcohol, have you done anything to ensure access to alcohol during this period of COVID-19 lockdown (living during distancing measures and possible self-isolation)? What has this involved? Interview prompts included questions such as: Where have you purchased alcohol? In what quantity? Do you have concerns about availability of alcohol ongoing? What will you do/how will you feel if alcohol no longer is available?".

Interviews were audio-recorded, transcribed verbatim and de-identified. The process of data analysis is documented in full elsewhere (reference redacted for review). In short, we followed a three-step progressive method to code transcripts - including a pre-coding, conceptual and thematic categorisation and theoretical categorisation. We used a combination of manual and computer-assisted inductive and deductive processes (Meyer & Ward, 2014). Examples of the concepts comprising the coding framework include moral panic or social anxiety, risk reduction motivations, perceived risk associated with the (un)availability of alcohol. Matrix coding queries using the social class attributes of each participant and conceptual categories (examples are above) determined the number of times a concept was mentioned within a social class group, and the number of cases where a transcript contained excerpts that reflected a concept within the coding frame. This highlighted class-based patterns and directed researcher's to coded excerpts for closer reading and interpretation, and for nuances by social class in women's participation in, perceptions of and motivations for alcohol stockpiling. For interpretive validity, two researchers (PW and BL) conferenced to compare their interpretations, and to extrapolate meaning relative to the context of COVID-19 restrictions in South Australia at the time.

The study had ethical approval from Flinders University Human Research Ethics Committee. Informed verbal consent was sought before each interview commenced.

3. Results

We found three different sets of stockpiling practices, each of which mapped on to a different social class group: working-class, middle-class and affluent-class women. In the sub-sections that follow, we sequentially describe class-specific perceptions of the place of and perceived need for alcohol stockpiling in times of COVID-19 crisis. In brief, working class women by and large did not stockpile alcohol. Women in middle-class positions did stockpile. Women in affluent-positions described not

needing to, and even, resisting stockpiling noting that various women within this group had sizable stores of alcohol prior to the pandemic unfolding.

4. Working-class women

Working-class women tended not to stockpile alcohol because quite simply they could not afford to do so. For example, Joy simply could not answer our question about stockpiling behaviour because she could not afford to purchase more alcohol than usual, and usually alcohol was only purchased with funds remaining after paying bills. Lesley could not comprehend reasons for stockpiling alcohol and was resigned to having a limited amount of alcohol in her house. Once her available alcohol had been consumed, she would have no choice about purchasing more:

"I didn't go out and buy more or stockpile. It's not something I can afford to do ... when this supply is gone, it's gone. I heard a reporter was saying how alcohol is the new toilet paper. That brought a giggle to me because it was incredulous. Like, really? People are going out and buying, stockpiling alcohol at this time of financial uncertainty, people are actually spending their money on alcohol?" (Lesley, Working-class)

However, other working-class women described the need to have enough alcohol in the house to 'get through' the lockdowns. Despite not being able to afford alcohol they would find some way to buy it out of necessity. For example, although at the time of interview Irene was on medication for mental health which also helped to reduce the alcohol she consumed to cope with stressors, she was clear that she would stockpile if she needed to:

"So I'd be drinking daily if I wasn't on the medication and I would be stockpiling ... Damn straight ... I'd hide it if I had to." (Irene, Working-class)

Irene's comment about "hiding the alcohol" given negative commentary about stockpiling in the media at the time, is perhaps a response to the perception that stockpiling is stigmatised. People who stockpiled any product (toilet paper, flour, pasta, hand sanitiser) during COVID-19 lockdowns were generally regarded as 'selfish', and even though Irene recognised this during the interview, her reliance on alcohol to cope with stress perhaps meant that she would need to hide the alcohol rather than avoid stockpiling.

Other working-class women noted public perceptions that stockpiling alcohol might reflect an inappropriate use of funds in times of financial uncertainty. Women who appeared to rely more heavily on alcohol to cope indicated attempts to 'stock-up', but in limited amounts due to limited funds. Consequently, various women acknowledged they would have to ration their stocks by moderating consumption levels to make the 'stash' last longer. In this vein, Danielle said:

"I'm concerned that [alcohol] may be one of those things that we're just not allowed to have access to. I don't know how far it will go, so I have actually stocked up on a bit [on alcohol] because I am a daily drinker ... if I can't get a hold of it, obviously I'll have to drink less to make my stash last longer, but if I can still get hold of it, nothing will change for me" (Danielle, Working-class)

Later in this interview, Danielle talked about what might happen if alcohol was simply not available to purchase during an 'extreme lockdown' and if her 'stash' had been consumed:

"I would have to deal with that if it and when it happened, and I feel that as long as I knew it was coming, I would be able to reduce the amount that I drink to get to that point where I'm no longer drinking anything. I would be pretty upset if, all of a sudden, it came with a jolt and I wasn't able to get it ... I have been a daily drinker for so long ... I haven't really put a lot of thought into that ... maybe I'm in denial" (Danielle, Working-class)

5. Middle-class women

In general, middle-class women talked much more than working-class women about 'stocking up' on alcohol or keeping the 'stocks high' in preparation for lockdowns. This was rarely about turning their alcohol stocks from low to high, but more about keeping them high enough to get them through the lockdowns. Hariette talked about how, pre COVID-19, she would often go to the bottle shops on her way home from work, in order to keep her alcohol stocks replenished, but during COVID-19 she changed that behaviour. During COVID-19 she developed the habit of shopping for alcohol less frequently, but buying more alcohol on each occasion:

"I will go and buy a dozen [bottles of wine] ... I probably bought more [per purchase during COVID-19] but I'm not going to the shops as much, so I am not driving past them. Before I was out on the road all the time, so now I just stock up." (Hariette, Middle-class)

Hariette's pattern of shopping less frequently fits with the COVID-19 public health management directive to socially distance and reduce human-to-human contact and therefore viral spread, albeit she purchased more alcohol than normal at each shop. Given that prior to COVID-19 women in this class would purchase alcohol every couple of days, there was no need to stockpile alcohol because they could constantly replenish their supplies. This option was less feasible during COVID-19. Consequently, what appears to be stockpiling, may simply reflect alternative but largely equivalent (in terms of overall alcohol quantity) replacement behaviours.

One woman in this group, Michelle, talked about not fearing alcohol shortages during lockdowns, perhaps because unlike toilet paper shortages the shelves never looked sparse, or perhaps because she has the financial ability to stockpile. During the interview, she also talked about abstaining from alcohol during January ('Dry January'), highlighting that for her, reduced alcohol consumption was possible, which might also help to account for her lack of 'fear' around alcohol shortages during lockdowns:

"In January, we didn't drink at all ... [so] if it's not there, if we can get it, we'll get it and we'll stockpile ... when I say stockpile, I mean a dozen bottles of wine, not dozens ... but if it suddenly should stop tomorrow, so be it. Mind you, I did buy a bottle of gin as well" (Michelle, Middle-class)

Michelle revealed that her primary worry was whether her usual, favourite wine would still be available. Concerns about this led her to different bottle shops in order to stockpile that specific wine brand. Michelle conveyed a 'matter of fact' approach when considering the implications of alcohol becoming less available, despite having sufficient financial resources to purchase enough wine, but then talked about buying a bottle of gin – despite saying that if alcohol should stop, "so be it". There is a sense of irony in Michelle's 'matter of factness' but also her comment about buying a bottle of gin, commensurate with the luxury she is afforded in buying extra alcohol as a fall back 'just in case' she needed it.

Some middle-class women were less concerned about the potential stigma from alcohol stockpiling than working-class women. Their peer's stockpiling behaviour was not spoken about by middle-class women from a moral judgement perspective. Indeed, one woman in the middle-class group expressed remorse she had not stockpiled more at the outset. Women in this group talked about having a good stock already; not hoarding, but enough 'wine in the rack', albeit remaining conscious of levels 'getting low'. A few women used the idiom "tons of" to refer to how much wine they had in their wine racks and cellars. For example:

"We haven't [stockpiled] because we've got ton of wine. If it did come to the crunch rather than running around looking for it, we'd just go without I think" (Lois, Middle-class).

Like many other middle-class women we interviewed, Lois stated that

she would be able to “go without” alcohol if she ran out, signifying both a sense of agency and a lack of need. The accuracy of this assertion was not tested as Lois reported having “tons” of alcohol. Both Sarah and Sandy indicated that their alcohol reserves alleviated any need to stockpile:

“We haven’t gone out and bought or got anyone to purchase us alcohol or anything. We keep a small supply in the house and we’ll still have our nightly drink but nothing really has changed there.” (Sandy, Middle-class)

“We have not panic bought at all ... we’ve got a cellar full of bits and pieces but we haven’t done the race to the shop to get extra. And in fact, my husband said the other day, “Oh, well, if that happens, I guess we get healthy for a while.” So it wouldn’t hurt either of us to have a break at all ... we definitely do rely on it more than we need to ... it’s become a habit ... it’s just part of everyday life now which is a bad thing.” (Sarah, Middle-class).

From the excerpt above, it is clear that Sandy seems comfortable that they still have their “nightly drink” and that they have enough to allow that to occur, even though she regards it as a “small supply”. Sarah talked about a “cellar full of bits and pieces”, which is suggestive of a larger supply of alcohol and she talks about her and her husband relying on alcohol “more than we need to”. This was communicated as “a bad thing”, perhaps as acknowledgment of the moral quandary that surrounds hoarding, or perhaps this speaks to the significance of the role of alcohol in her life.

6. Affluent-class women

Affluent-class women talked most about *not* stockpiling. This either reflected a lack of concern about current supplies at home or reflected the low priority given to alcohol in their lives. Behaviour of these women during lockdown did not focus on consumption but, instead, lockdown behaviours included hobbies such as cooking and exercise. Such behaviours provided alternatives to alcohol consumption in order to pass time or achieve distraction. For example, Gail spoke about her gratitude for the natural environment nearby where she lived, and indicated a level of mindful acceptance of the COVID-19 restrictions:

“We live in a wonderful country, in a great spot. I mean look at where we live ... I mean just going out into nature, going down to ocean. It’s just beautiful ... So you’re not locked up in a little apartment and everything’s grey ... we are really fortunate here. So sometimes you just have to re-focus and look at the positive things” (Gail, Affluent-class).

Gail acknowledged that women in ‘lower’ social classes may ‘need’ to stockpile alcohol in order to “cope with their anxieties” during COVID-19, indicating a realisation that not all environments were equally supportive of a positive frame of reference toward alcohol purchasing and consumption.

Most women in the affluent-class talked about having highly stocked cellars, pantries and fridges and referred to other female contemporaries as having plenty of stocks. For some, this stockpile was the source of mirth and comments and this is obvious in the excerpt below where stockpiling of “mixers” (because they have plenty of alcoholic spirits) is joked about as being the “real” challenge:

“I’ve done a lot of travel in the last couple of years. I seem to have a very vast array of duty free in my bar ... I have got so much there ... the only thing I’ve really thought about more, is actually having mixers to go with those ... [tonic] water and the Coke No Sugar ... I couldn’t bloody find that anywhere the other day. I have tried to stock up on those a bit, thinking, if I get stuck in my house for three weeks, I’ve got about 6 months’ worth of alcohol, I’ll be fine, but I’m not drinking it straight” (Nadia, Affluent-class).

Whilst all women in this group talked about already being “stocked

up” with alcohol and therefore not ‘needing’ to go out and purchase, most women then went on to talk about *not* stockpiling and some described this using laborious connotations like requiring “discipline” and “work”. In this way, they expressed an explicit and conscious decision to *not* stockpile, apparently without the introspection that this was made possible because many had pantries or cellars already full of alcohol. Affluent-class women talked about stockpiling alcohol during COVID-19 lockdowns in the form of going to a bottle shop to purchase large amounts of alcohol in one transaction as being immoral and to be avoided. Again, this was reflected in the discourse participants used to describe their stockpiling avoidance, and in some cases, their descriptions of stockpiling as disreputable. For most of these women it was acceptable to have an abundance of alcohol at home (i.e. a pre-existing “stockpile”) and to even joke about this. For example, Alex was talking about the ‘stockpiling movement’ in negative ways and how she did not want to be part of it, or indeed to be seen to be a part of it. She actively tried to be “disciplined” and steer clear of ‘stockpiling’ albeit citing products other than alcohol which perhaps have differing moral connotations to alcohol, because she saw this as the behaviour of ‘selfish’ people. After talking about her decisions to not be seen as a ‘stockpiler’, Alex said:

“I mean I always have a good stock of wine in the cupboard regardless, but I’ve also been very disciplined not to stockpile food, toilet paper. I ... absolutely ... don’t get into that [stockpiling]. You don’t need to do that, we’ve got plenty of food and feel really reassured that every time I go to the supermarket there’s plenty of fresh fruit and veg and proteins” (Alex, Affluent-class).

Kimberly was ‘shocked’ that people stockpiled alcohol and that bottle shops were deemed ‘essential services’ during lockdowns. She said:

“I’m absolutely astounded that alcohol, bottle-shops were deemed as essential, that may stay open. I was really shocked about that. And then I was shocked to see that people actually went down to those shops to stock up on alcohol. It wouldn’t have even crossed my mind. But I guess that’s where I don’t understand the dependence on some people’s social structures with alcohol as well ... Then they go ‘can’t live without it’.” (Kimberly, Affluent-class).

Unlike working-class woman Lesley who we earlier described as speaking about being “incredulous” that people were stockpiling alcohol, Kimberly’s reasons for being “astounded” were about not understanding how “some people” can “be dependent” on alcohol and how the “social structures” mean that they “can’t live without it”. Lesley’s reasoning was financial – she could not understand how people had enough money to stockpile alcohol or, even with money, would prioritise alcohol in times of such financial uncertainty.

The only person in the affluent-class groups who did stockpile alcohol was Gillian and she described her husband’s alcohol reliance as the key reason for “hoarding”:

“I already did the hoarding. I know it’s really bad, because I’m annoyed at people doing toilet paper hoarding, but I said to my husband, “I’m not being stuck in this house with you in isolation and you don’t have access to alcohol.” So I let him go and get some cheap bottles of wine for emergencies so we put some in the cupboard ... and then his normal alcohol. Normally he would buy a couple a day and just keep them in the fridge, but because he had a problem with alcohol ... we don’t like to have too much in the house because then he’ll just drink it ... but for now in the COVID, we’ve got two lots of twelve [bottles of wine] and our cheap casks in the cupboard. So, whilst that’s hoarding, that’s hoarding wine” (Gillian, Affluent-class)

This quote sets Gillian apart from the other women in the affluent class because she talked about actually going out and stockpiling, and in response to her husband’s alcohol dependency rather than her own consumption.

7. Discussion

Overall, our data speak to class-based differences in the reasons for and the perceptions of the place of women's alcohol stockpiling in times of crisis, with the range of responses varying between practical considerations, amusement about their own practices, and even pity and contempt toward others. Although social media portrays the stockpiling of alcohol as one dimensional and in some cases, discriminate toward particular already stigmatised groups of women, the accounts from women interviewed for our study confirm that alcohol stockpiling is much more nuanced. This is pertinent when stockpiling is translated as an intention to consume, and in confluence with increased prevalence of alcohol consumption during COVID-19 among midlife women. As reported herein, our study participants did actively stockpile alcohol to 'get them through' the lockdowns, with our data indicating that this occurred mostly among middle-class women, and to a lesser extent, working-class women, many participants did not stockpile alcohol and with reasons discernible by social class. This classed understanding is crucial to mediating potential alcohol-related 'collateral damage' stemming from COVID-19 lockdowns, whereby women in lower class positions face further marginalisation resulting from stigma during COVID-19.

Our findings also offer clues for how to segment by social class public health responses to alcohol consumption and stockpiling as the pandemic crisis continues albeit with changes over time. A classed approach is pertinent given the shifting nature of the crisis - between a viral crisis focus on reducing the spread of SARS-CoV-2 and the crisis that is manifest in economic upheaval, political tension and social violence. This is particularly the case if we interpret alcohol stockpiling as a 'red flag' for which groups might require attention in order to mitigate long-term alcohol-related harms and reduce social inequities in health outcomes that result in even momentary increases in consumption (such as during lockdowns). We might think about this as reducing 'social polarisation' through responses to alcohol related behaviours during COVID-19. While women in the working- and middle-class groups can less afford to stockpile alcohol and did not report being part of online purchasing or wine clubs and the like that women in more affluent positions described (i.e. private, hidden means of stockpiling alcohol), they rely on more visible purchasing and thus experience increased exposure to moral reprehension. Our analysis shines a light on how social class divisions in stockpiling, and responses to it, reflect and augment problems of social class inequality. This is both relevant and concerning given [Crompton's \(2008\)](#) suggestion that inequality in its many forms is most prominent during times of economic and social change, such as a pandemic.

From our previous analysis, we know the women who participated in our study do not consume alcohol in a vacuum, ignorant of social cues and symbolic contexts (Anon). Our analysis does point to the propensity for public perceptions to shape broad sweeping understandings about who is stockpiling in order to shape public responses to the 'problem' of stockpiling, and therefore who is responsible for strain to the system during COVID-19 lockdowns. Although some affluent-class women reported not stockpiling, they also reported having large reserves of alcohol in 'pantries' and 'cellars' negating the need to buy more, and they spoke about the conscious and explicit need to avoid being seen as 'stockpilers'.

During interviews, affluent-class women talked of panic buying in negative ways, although they often found it difficult to accurately describe the reasons for their responses, sometimes finding it difficult to identify words to communicate their displeasure. In response to this more visceral feeling of discomfort, they tended to say derogatory things about 'panic buyers' and 'hoarders' and openly did not want to be tarred with the same brush. [Lawler \(2005\)](#) argues that working-class people are judged as 'disgusting', not because of their occupation, income or education, but due to how their behaviours are perceived by people in middle and affluent classes. Our data suggest that stockpiling as a behaviour may be no exception to this, given working-class women were the only class group who seemed conscious of moral judgements about their alcohol stockpiling, even though the behaviour extended, in one

form or another, across all social classes – creatively framed as 'replenishing' or 're-stocking'. It is well documented that social stigma, notwithstanding COVID-19, is experienced by women in lower-classes, who are unfairly blamed and shamed for undertaking the very same behaviours exhibited by women in higher social-classes ([Graham, 2012](#)). As our analysis presented here shows, working-class women have low resources for stockpiling purchases, contrary to the perceptions of women in higher social class positions. Our classed analysis of the reasons and practices of alcohol purchasing, stocking-up, re-stocking and stockpiling, when seen through a confluence of social class factors that shape consumption including access to literal wealth but also to social networks and cultural knowledge might help to de-stigmatise both the people and practices involved.

8. Conclusion

Whilst it may seem rational for some people to question or even judge the 'panic buying', hoarding or stockpiling of others we did not find much evidence of widespread stockpiling within the stories of women we interviewed during COVID-19. Nevertheless, our data speak to the negative social connotations regarding the term stockpiling, and efforts to either separate oneself from the term or to speak in negative ways about the 'others' who do it. Our explication of [Bourdieu's \(1984\)](#) model of social class applied to interpret women's alcohol stockpiling findings demonstrates that different and complex classed sets of stockpiling practices are enacted, legitimated and possible for different social class groups. This includes differences in the social and symbolically meaningful ways women talked about alcohol 'stocks' and 'stockpilers', with implications for the marginalisation of women in lower social class positions who have limited agency to challenge misperceptions.

Whilst our study captures women from varying self-rated drinking levels, our interview questions focussed on perceptions of stockpiling and motivations for purchasing behaviour and as such, we were unable to make links with certainty between stockpiling alcohol and dependency. We are conscious that the perceptions of stockpiling expressed by women with alcohol dependency might be different than those expressed by women who drink occasionally. Surely dependency also limits women's agency over stockpiling irrespective of class conditions. We also suggest there is scope for further research in terms of agency and stockpiling given the significant increase in alcohol marketing during COVID-19 toward women that has occurred in Australia since the pandemic emerged¹ particularly marketing following tactics described as 'predatory'. We are unable to comment herein as we did not ask women about their perceptions of alcohol advertising or marketing nor how this might link to alcohol stockpiling. We are conscious that one could interpret class-based alcohol purchasing behavior as simply a supply and demand calculation, and urge readers to also reflect also on the cultural and social value of alcohol consumption and stockpiling behaviours, particularly amongst women with the capital to participate in the system of commodified consumption.

Ethics

The study received full research ethics committee approval from the Social and Behavioural Research Ethics Committee at Flinders University, South Australia.

Declaration of competing interest

The authors have no Conflicts of Interest to declare. The funder of the study (Australian Research Council) have no part to play in the study or its dissemination.

¹ <https://movendi.ngo/news/2020/05/14/australia-big-alcohol-marketing-onslaught-exposed/>.

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