#### SUPPLEMENTARY MATERIALS

### **Demographics for drinkers**

	Age			Sex		Country		SES		Relationship
Mean	31.4	Male		599	Total	49	Lower	328	Single	449
SD	13.2	Fe ıa	le	248	UK	347	Mid	176	Relationship	408
Range	18-90	Other	•	12	US	223	Higher	250		
Dej		Anxiety			PTSD		Depression & Anxiety			
41			27			3		35		

## Demographic analysis for study dropouts

Although a majority of the dropout subjects (n=1,515) who entered the study provided no data (n=981), we performed a demographic analysis on dropout subjects who provided this information (n=481) to assess if those who completed the survey differed in demographic factors from those who did not. The mean age of dropout subjects was  $26.58 \pm 11.11$  years [CI: 25.5927.58] (range= 18-80 years), significantly younger than the mean age of individuals who completed the survey (U= 3.69, [CI: 1.15-3.54] p < .0001). Further, more males (n=387) than females (n=87) or other genders (n=7) dropped out of the study prior to completion ( $X^2 = 61.23$ , p < .0001).

#### **Sub-sample analysis by country**

United Kingdom (UK)

In the UK, the change in problem drinking severity (AUDIT-C) was  $1.05 \pm 1.46$  [CI: 0.911.19] (range: 0-8), and the mean change in the amount consumed was  $5.93 \pm 11.75$  [CI: 4.82-7.05], units per week (range: 0-120). Current problem drinking severity (full AUDIT) was  $4.09 \pm 4.94$  [CI: 3.62-4.56] (range: 0-27). Of the subjects who reported they consume alcohol (n=434), the change in severity from pre-quarantine to quarantine was a decrease of  $-0.16 \pm 2.15$ ,

[CI: 0.3-0.06] (range -8-6) but not significantly so (U= -1.38, [CI: 0.01-0.89 ] p= .19). The units of alcohol consumed per week was significantly increased during the quarantine period (11.25  $\pm$  17.73 units, [CI: 9.36-13.13] range= 1-120) compared to November (10.94  $\pm$  14.17 units, [CI: 9.44-12.45] range = 0-150), U= 3.0, [CI: 0-0.7] p= .003. Further, 60 (14%) subjects reported abstention from alcohol consumption during the quarantine period. More subjects reported a decrease (n= 151, 43%) or an increase (n= 130, 39%) as opposed to no change (n= 61, 18%) of weekly alcohol consumption from November to the quarantine period ( $X^2$ = 7.2, p = .007). The Oxford COVID-19 Government Response Tracker [24] indicated that the lockdown stringency index in the UK during data collection (05/12/2020 to 05/28/2020) was 88.89, with 15,684 confirmed cases and 488 deaths.

United States (US)

In the US, change in problem drinking severity (AUDIT-C) was  $1.01 \pm 1.55$  units [CI: 0.85-1.17] (range: 0-8), and the mean change in the amount consumed was  $3 \pm 5.51$  [CI: 2.39-4] units per week (range: 0-34). The current problem drinking severity (full AUDIT) was  $3.48 \pm 4.95$  [CI: 34] (range: 0-32). Of the subjects who reported they consume alcohol (n= 353), the change in severity from pre-quarantine to quarantine was a decrease of  $-0.11 \pm 2.42$  [CI: -0.43-0.21], range -8-8 (U= -0.66, [CI: 0.05-0.9] p= .51), but not significantly so. The units of alcohol consumed per week increased between the quarantine period ( $7.39 \pm 11.45$  units, [CI: 5.88-8.9] range= 0.80) and November ( $0.93 \pm 9.78$  units, [CI: 0.97-0.98] range= 0.96), but not significantly so (U= 0.97-0.98). Further, 0.97-0.980 subjects reported abstention from alcohol consumption during the quarantine period. More subjects reported a decrease (n= 0.97, 0.97-0.98) or an increase (n= 0.97, 0.97-0.98) as opposed to no change (n= 0.97-0.98). The Oxford COVID-19 Government Response Tracker [0.97-0.97-0.9

### Canada

In Canada, change in problem drinking severity (AUDIT-C) was 0.67 ± 1.45 [CI: 0.31-1.03]

(range: 0-8), and the mean change in the amount consumed was  $3.03 \pm 7.45$  [CI: 1.17-4.89] units per week (range: 0-49). The current problem drinking severity (full AUDIT) was  $2.78 \pm 4.24$  [CI: 1.7-3.85] (range: 0-24). Of the subjects who reported they consume alcohol (n= 35), the change in severity from pre-quarantine to quarantine was an increase of  $0.16 \pm 2.2$ , [CI: -0.620.95](range= -8-5), but not significantly so (U= .77, [CI: 0.03-0.98] p= .44). The units of alcohol consumed per week was decreased during the quarantine period ( $8.03 \pm 14.22$  units, [CI: ] range= 0-50) and November ( $6.71 \pm 9.49$  units, [CI: 3.46-9.97] range = 0-25), although not significantly so (U= 0.17, [CI: 0.59-1.0] p= .86). Further, 4 (12%) subjects reported abstention from alcohol consumption during the quarantine period. More subjects reported an increase (n= 16, 46%) as opposed to a decrease (n= 10, 29%) or no change (n= 9, 26%) of weekly alcohol consumption from November to the quarantine period, although not significantly so ( $X^2$ = 0.03, p= .85). The Oxford COVID-19 Government Response Tracker [24] indicated that the lockdown stringency index in Canada during data collection (05/12/2020 to 05/28/2020) was 70.83, with 69.981 confirmed cases and 4.993 deaths.

## Sub-sample analysis by gender

### Males

For the males in our sample (n=1,000), the change in problem drinking severity (AUDIT-C) was in  $0.91 \pm 1.53$  [CI: 0.82-1.01] (range: 0-8) and the mean change in the amount consumed was  $3.88 \pm 8.84$  [CI: 3.33-4.42] units per week (range: 0-120). The current problem drinking severity (full AUDIT) was  $2.99 \pm 4.61$  [CI: 2.71-3.28] (range: 0-32), with 403 males included that do not consume alcohol. Of males who reported they consume alcohol (n= 597), the change in severity from pre-quarantine to quarantine was a decrease of  $-0.4 \pm 2.4$ , [CI: -0.5--0.21] range -8-8 (U= 3.57, [CI: 0.0-0.03] p< .0001). The units of alcohol consumed per week was significantly decreased during the quarantine period ( $8.52 \pm 14$  units, [CI: 7.33-9.71] range= 0-120) compared to November ( $9.23 \pm 12.62$  units, [CI: 8.21-10.24] range = 0-120), U= -5.2, [CI: 0.0-0.13] p< .0001. Further, 128 (20%) males reported abstention from alcohol consumption during the quarantine period. More males reported a decrease (n= 278, 47%) or an increase (n= 204, 34%) as opposed to no change (n= 115, 19%) of weekly alcohol consumption from November to the quarantine period ( $X^2$ = 15.94, p< .0001).

#### Females

For females in our sample (n=342), the change in problem drinking severity (AUDIT-C) was  $0.81 \pm 1.1$  [CI: 0.69-0.92] (range: 0-8) and the mean change in the amount consumed was  $2.82 \pm 4.6$  [CI: 2.31-3.32] units per week (range: 0-38). The current problem drinking severity (full AUDIT) was  $3.14 \pm 4.47$  [CI: 3.13-4] (range: 0-21), with 95 females included that do not consume alcohol. Of females who reported they consume alcohol (n= 247), the change in severity from pre-quarantine to quarantine was an increase of  $0.12 \pm 1.6$ , [CI: -0.08-0.32] range -0.80, although not significantly so (U= -0.17, [CI: 0.01-0.93] -0.93] -0.94. The units of alcohol consumed per week was decreased during the quarantine period ( $-0.94 \pm 10.62$  units, [CI: -0.94] range -0.940) compared to November ( $-0.94 \pm 1.94$ 0). Further,  $-0.94 \pm 1.94$ 1 ( $-0.94 \pm 1.94$ 1) females reported abstention from alcohol consumption during the quarantine period. More females reported a decrease ( $-0.94 \pm 1.94$ 1) or an increase ( $-0.94 \pm 1.94$ 1) as opposed to no change ( $-0.94 \pm 1.94$ 1) of weekly alcohol consumption from November to the quarantine period ( $-0.94 \pm 1.94$ 2).

# Sub-sample analysis by age

In terms of overall current drinking severity during quarantine, older individuals (5.9  $\pm$  4.82, [CI: 5.44-6.36], range 1-28) showed significantly more problem drinking behaviours than younger individuals (4.74  $\pm$  4.46, [CI: 4.32-5.17], range 1-32); (U= 4.94, [CI: 0.00-0.00], p< .0001). The older individuals ( $\geq$  25.1 years) in the sample (n=432) also showed a significant increase in drinking severity from November (4.02  $\pm$  2.13, [CI: 3.82-4.23], range 1-13) to quarantine (4.18  $\pm$  2.35, [CI: 4-4.23], range 1-13); (U= 2.07, [CI: 0.05-0.98], p= .04). Further, the mean number of units of alcohol consumed between November (9.93  $\pm$  14.24, [CI: 8.58-11.27], range 0-150) and the quarantine period (10.91  $\pm$  16.96, [CI: 9.31-12.52], range 0-120) was significantly increased (U= 2.75, [CI: 0.01-0.84], p= .006).