

Alcohol Regulation in India

For Prelims: Methanol, Ethanol, National Health Mission, Seventh Schedule, National Action Plan for Drug Demand Reduction, National Mental Health Policy (2014), National Action Plan and Monitoring Framework for Prevention and Control of Noncommunicable Diseases, Excise Act, 1944, National Suicide Prevention Strategy (NSPS) 2022.

For Mains: Issue of Alcohol Consumption in India, Alcohol Regulation in India- related Provisions and Challenges, Effect Liquor Consumption on the Human Body.

Source: TH

Why in News?

India is witnessing a steady rise in **alcohol** consumption, which, despite its well-documented links to **health risks**, **violence**, **crime**, **suicides**, and financial distress, remains unregulated by a unified national strategy, prompting urgent calls for a comprehensive **National Alcohol Control Policy and Programme**.

What are the Key Driving Factors for Alcohol Consumption in India?

- Alcohol Prevalence in India: As per the NFHS-5, 14.6% of people aged 10-75 (16 crore) consume alcohol in India with 23% of men and 1% of women.
 - India ranks among the highest globally in heavy episodic drinking, with 2.6 million DALYs (Disability-Adjusted Life Years) and a societal cost of Rs 6.24 trillion (2021).
 - **High-use States**: Chhattisgarh, Tripura, Punjab, Arunachal Pradesh, Goa; **High disorder prevalence** (>10%): Tripura, Andhra Pradesh, Punjab, Chhattisgarh, Arunachal Pradesh.
- Key Driving Factors:
 - Biopsychosocial Determinants: Alcohol use is driven by genetic predisposition, as it activates the <u>brain's reward system</u>, making it addictive like nicotine or cocaine.
 - Psychologically, it is used to cope with stress, anxiety, or to seek euphoria.
 - Socially, factors like urban lifestyle, peer pressure, and glamorized media portrayals have normalised its use.
 - Commercial Determinants: Alcohol use is promoted through <u>surrogate advertising</u>, influencer marketing, and OTT content.
 - Product innovations like pre-mixed drinks and flavoured spirits attract youth.
 - Easy availability via retail outlets, online delivery, and attractive packaging enhances visibility. Low-cost Indian Made Indian Liquor (IMIL) targets the rural poor, while rising urban incomes increase affordability.
 - Policy Gaps: Regulatory loopholes, State dependence on excise revenue, and lack of a unified national policy enable harmful alcohol consumption to persist unchecked.

What are the Key Regulations Related to Alcohol Usage in India?

- State Level: Alcohol regulation falls under the State List of the Seventh Schedule of the Constitution, giving States exclusive authority over its production, sale, and distribution, resulting in wide inter-State legal variations.
 - States like Bihar, Gujarat, Nagaland, and Mizoram enforce prohibition, while others have experimented with bans.
 - Some states exploring for online alcohol delivery via platforms like Swiggy and Zomato contradicts access restrictions.
 - Legal drinking age varies from 18 to 25 years; pricing regulations exist in only 19 States/UTs.
- National Level: It includes:
 - National Action Plan for Drug Demand Reduction (NAPDDR) 2021-22 under Nasha Mukta Bharat Abhiyan addresses alcohol regulation.
 - National Mental Health Policy (2014) links alcohol to mental illness.
 - National Health Policy (2017) and National Suicide Prevention Strategy (NSPS)
 2022 recommend control measures.
 - <u>National Action Plan and Monitoring Framework for Prevention and Control</u> of <u>Noncommunicable Diseases (NMAP) 2017-2022</u> advocates for a national alcohol policy.
 - Excise Act, 1944 regulates the production and distribution of alcohol, including penalties for illegal manufacturing.
 - Article 47 (DPSP) provides that the State shall endeavour to prohibit the consumption of intoxicating drinks and drugs injurious to health and to improve public health and nutrition.

What are the Key Challenges to Alcohol Regulation in India?

- Fragmented & Inconsistent Policies: Alcohol being a State subject leads to divergent policies, with no unified national framework, causing inconsistent regulation, conflicting approaches, and weak coordination across States and Ministries.
 - Also, poor monitoring enables illicit liquor trade, underage drinking, and noncompliance with licensing and pricing norms, especially in rural and peri-urban areas.
- Revenue Dependency of States: High revenue dependency on alcohol excise duty, which
 is outside the GST ambit, incentivizes States to prioritize liquor sales over stricter
 regulation or prohibition. This creates a conflict between fiscal interests and public
 health objectives, hindering effective alcohol control policies.
- Regulatory Gaps & Evasion: Surrogate advertising, celebrity endorsements, and digital influencers exploit loopholes in advertising laws, while online delivery increases access despite restrictions.
- Political-Bureaucratic Nexus: Political protection and bureaucratic complicity in the illegal liquor trade, aided by corruption and bribery, weaken enforcement and allow bootleggers to operate with impunity.
- Low Public Awareness and Health Literacy: Limited awareness of alcohol's link to mental illness, NCDs, cancer, and socioeconomic harms (like poverty and domestic violence) hampers public demand for regulation and behaviour change.

What measures Should Be Taken to Effectively Address India's Alcohol Crisis?

- Affordability: Raise excise duties to discourage excessive consumption while ensuring safeguards against a shift to illicit liquor, especially among the poor.
- Allocation: Earmark alcohol tax revenues specifically for public health, de-addiction, and rehabilitation programmes, with transparent utilisation to prevent diversion and undue corporate influence.
- Accessibility: Limit physical and digital access by restricting alcohol sales in residential areas, malls, food courts, and curbing online delivery through platforms like Swiggy, Zomato, and Blinkit to denormalize casual consumption.
- Advertisement: Ban surrogate and influencer-led promotions, and regulate algorithm-driven amplification of alcohol-related content across social media and

- OTT platforms.
- Attractiveness: Enforce plain packaging, prominent health warnings, and ban in-store promotional displays to reduce alcohol's glamorized and aspirational appeal.
- Awareness: Launch nationwide public awareness campaigns, drawing from tobacco control successes, to highlight links between alcohol and cancer, mental illness, domestic violence, and poverty, especially targeting youth and vulnerable communities.
- Artificial Intelligence (AI): Use AI tools to detect and curb digital misinformation, promotional content, and underage targeting, while also aiding in monitoring policy violations and enforcement.
- National Level Policy: A National Alcohol Control Policy and Programme must be formulated to ensure a coordinated, public health-oriented approach that prioritises people over profit, prevention over revenue, and long-term societal well-being over short-term fiscal gains.

Conclusion

India's growing alcohol crisis demands urgent, coordinated action beyond fragmented State policies. A comprehensive National Alcohol Control Policy, rooted in public health and social equity, is essential to curb rising consumption and related harms. Prioritising prevention, awareness, and regulation over revenue interests will ensure long-term well-being and sustainable governance.

Drishti Mains Ouestion:

Q. India's rising alcohol consumption poses major public health and governance challenges. Discuss the need for a National Alcohol Control Policy and suggest key measures to address it.

UPSC Civil Services Examination, Previous Year Question (PYQ)

Prelims:

- Q. Bisphenol A (BPA), a cause of concern, is a structural/key component in the manufacture of which of the following kinds of plastics? (2021)
- (a) Low-density polyethylene
- (b) Polycarbonate
- (c) Polyethylene terephthalate
- (d) Polyvinyl chloride

Answer: (b)

- Q. 'Triclosan', considered harmful when exposed to high levels for a long time, is most likely present in which of the following? (2021)
- (a) Food preservatives
- (b) Fruit-ripening substances
- (c) Reused plastic containers
- (d) Toiletries

Answer: (d)

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