

RESET Alcohol  
A Global Alcohol Policy Initiative

ADIC  
Alcohol and Drug Information Centre

Vital  
Strategies

# Public Opinion Poll Results on Alcohol Consumption in Sri Lanka





# Executive Summary

Sri Lanka has a significant burden of alcohol-related harms, with alcohol consumption responsible for thousands of deaths from noncommunicable diseases and injuries each year. Vital Strategies' RESET Alcohol initiative supports countries to implement cost-effective policies to reset the alcohol environment, cut harms and raise revenues for positive social change.

To support the development of evidence-based alcohol policies in Sri Lanka, RESET Alcohol and ADIC, Sri Lanka (Alcohol and Drug Information Centre) conducted a public opinion poll to gather insights on people's knowledge about alcohol, attitudes toward its consumption and support for policy action to reduce consumption. This research brief summarizes findings from the poll.

Key highlights include the following.

- Alcohol is widely recognized as a problem in Sri Lanka: 97% of adults surveyed said that alcohol consumption is a problem in the country, and 79% consider it a major problem. People who do not drink alcohol were more likely to consider it to be a major problem than people who drink alcohol (86% versus 61%), and women were more likely than men to consider it a major problem (84% versus 76%). This suggests a widespread need and public mandate for addressing alcohol in Sri Lanka.
- The largest concerns about alcohol consumption were its link to domestic violence and household financial strain. Despite alcohol causing more than 4,000 deaths per 100,000 people in Sri Lanka each year due to noncommunicable diseases and injuries, only a minority worried about its role in causing road traffic crashes (16%), with even fewer noting its connection to cancer (15%), heart/kidney issues (13%), premature death (5%), and fatal falls (5%). These results indicate that alcohol's health harms are less visible than other associated harms.
- Sri Lankans want stronger alcohol policies: 64% of those surveyed believe the current laws do not provide sufficient protection against alcohol-related harms. Even though direct alcohol advertising is banned in Sri Lanka, 39% reported being exposed to alcohol advertising.
- Sri Lankan adults want the government to take action against alcohol. An overwhelming 93% deem governmental involvement crucial in tackling alcohol-related challenges. However, 60% perceive the alcohol industry as an obstacle to getting adequate alcohol laws passed.
- The majority of Sri Lankan adults favour smart pricing policies: 73% favour measures that raise alcohol prices and 75% endorse alcohol taxation.

Overall, these survey findings indicate a clear call for significant changes in alcohol policies to prioritize public health and well-being.

# Background

Alcohol consumption is an underlying cause and contributing factor to a number of diseases and injuries, leading to 3 million deaths globally each year.<sup>1</sup> Global alcohol consumption is projected to increase, spurred by an industry that glamorizes drinking and invests heavily in promoting products and countering evidence-based health policies.<sup>2,3</sup>

Sri Lanka has a significant burden of alcohol-related harm, with alcohol consumption responsible for 4,201 deaths per 100,000 people each year from noncommunicable diseases and injuries, including liver cirrhosis (2,880 deaths per 100,000), road traffic crashes (675 per 100,000) and cancers (646 per 100,000).<sup>4</sup> Alcohol use imposes around LKR 241 billion in economic losses every year, which is equivalent to 1.5% of Sri Lanka's Gross Domestic Product (GDP). In terms of direct costs associated with alcohol consumption, the government and non-government expenditure on health care amounts to 26% and 13% respectively. Furthermore, as indirect costs associated with alcohol consumption, the cost of absenteeism and presenteeism account for 2% each while the cost of decreased labor force is 57%.<sup>5</sup> Hence, alcohol consumption has been established as a significant public health concern that requires urgent multisectoral action.

To address these challenges, the RESET Alcohol initiative supports governments in developing evidence-based alcohol policies that can reset the alcohol environment and reduce the health and social burden of alcohol. This includes smart pricing strategies that use taxes and other pricing policies to make alcohol unaffordable and less accessible, particularly to children and socioeconomically vulnerable populations.

To support evidence-based alcohol policy in Sri Lanka, RESET conducted a public opinion poll to gather insights on people's attitudes and experience with alcohol, as well as their support for government action. The poll was conducted by the Alcohol and Drug Information Centre (ADIC) in five provinces—Western, Southern, Central, Uva and Northern—that are representative of the whole country, using a street-intercept method. The findings presented in this report are based on the responses of 997 adult men and women, ages 18 and older (see Table 1). Full survey methodology details are available upon request.

1. World Health Organization. Global status report on alcohol and health 2018. Geneva: World Health Organization; 2018.
2. Manthey J, Shield KD, Rylett M, Hasan OSM, Probst C, Rehm J. Global alcohol exposure between 1990 and 2017 and forecasts until 2030: a modelling study. *The Lancet*. 2019;393(10190):2493-502.
3. Madden M, McCambridge J. Alcohol marketing versus public health: David and Goliath? *Globalization and Health*. 2021;17(1):45.
4. World Health Organization. Global status report on alcohol and health 2018. Geneva: World Health Organization; 2018.
5. Investment Case for Alcohol Control in Sri Lanka

**Table 1:**  
**Percentage Distribution of the Sample Population by Socio-Demographic Characteristics**

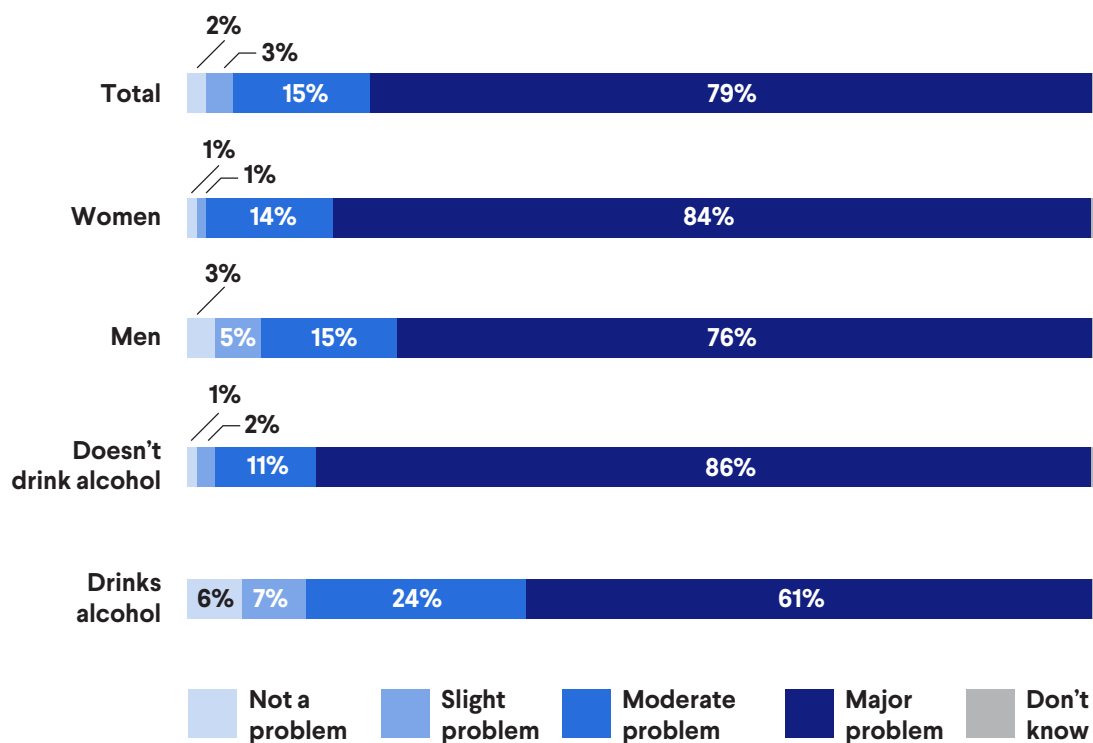
<b>Demographic characteristics</b>	<b>Total (N = 997)</b>
<b>Gender</b>	
Women	35.3
Men	64.7
<b>Current age</b>	
18 to 33 years	38.5
34 to 49 years	29.4
50 to 64 years	21.8
65+	10.3
Mean age (in years)	41.4
<b>Education level</b>	
No formal schooling or primary education	9.9
Studied or passed O/Ls	38.8
Studied or passed A/Ls or higher	51.3
<b>Alcohol consumption in the past 12 months</b>	
Yes	29.1
No	70.9

# Key Findings

## Alcohol is widely recognized as a problem in Sri Lanka.

Nearly all of the adults surveyed said that alcohol consumption is a problem in the country (97%), with 79% considering it to be a major problem (Figure 1). Concern about alcohol consumption was significantly higher among people who do not drink alcohol: In total, 86% of the people who don't drink alcohol, which constitute a majority in Sri Lanka,<sup>6</sup> consider alcohol consumption to be a major problem; 61% of people who drink alcohol reported it to be a major problem (Figure 1). Likewise, while women, who consume alcohol at much lower rates than men,<sup>7</sup> were significantly more likely than men to report that alcohol was a major problem in the country, the vast majority of men also reported alcohol to be a problem. Specifically, 84% of women compared to 76% of men said that alcohol consumption was a major problem in Sri Lanka (Figure 1).

**Figure 1**  
**Perception of Alcohol Consumption as a Problem in Sri Lanka by Gender and Alcohol Consumption**



Note: All participant responses for "Don't know" are 1% when rounded.

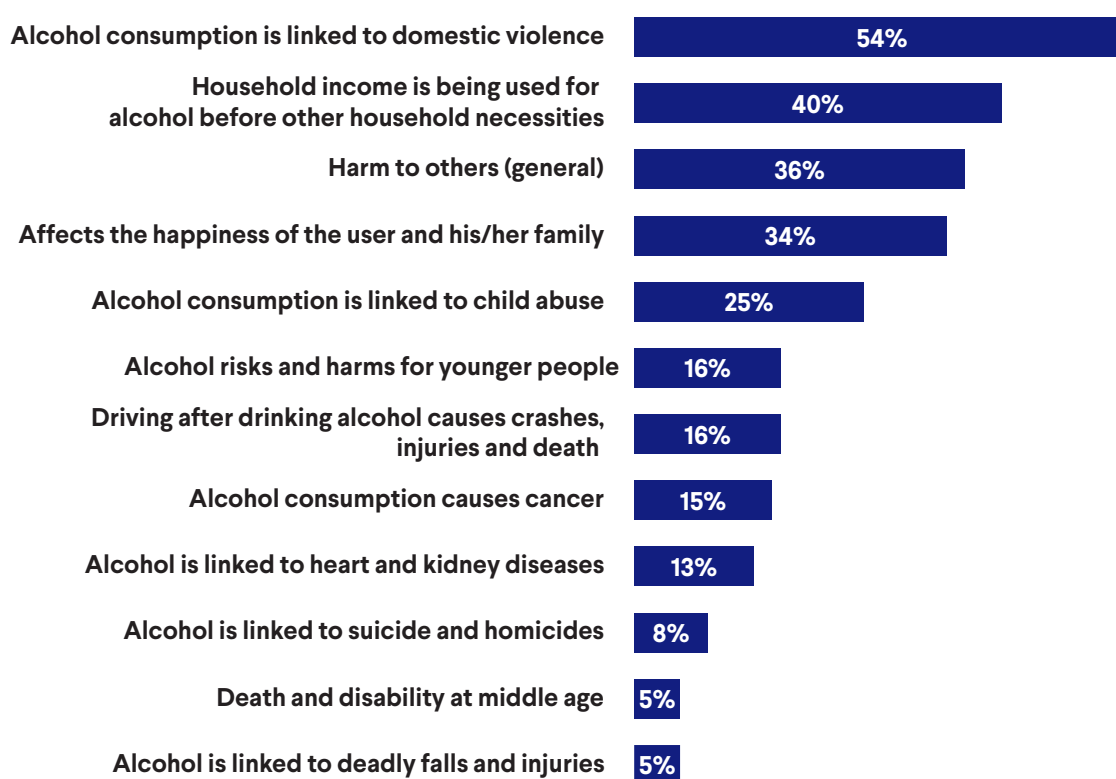
6. Sørensen, J. B., Konradsen, F., Agampodi, T., Sørensen, B. R., Pearson, M., Siribaddana, S., & Rheinländer, T. (2020). A qualitative exploration of rural and semi-urban Sri Lankan men's alcohol consumption. *Global public health*, 15(5), 678-690.

7. Ibid

**The most pressing top-of-mind concerns about alcohol consumption in Sri Lanka are its link to domestic violence and the financial burden on households.**

Participants were most concerned about the link between alcohol consumption and domestic violence (54%) (Figure 2). This was followed by the misuse of household income for alcohol before other necessities (40%) and harm to others (general) (36%). Despite the fact that alcohol consumption in Sri Lanka is responsible for more than 4,000 deaths per 100,000 people each year from noncommunicable diseases and injuries, participants were less likely to report being concerned about alcohol being a risk factor for crashes, injuries and death (16%), cancer (15%), heart and kidney diseases (13%), death and disability at middle age (5%), and deadly falls and injuries (5%). These kinds of top-of-mind or unprompted opinions expressed in surveys provide a useful measure of how people perceive a particular issue. In this case, the observed data suggests that the health costs of alcohol consumption are relatively more hidden compared to the other harms of alcohol consumption.

**Figure 2**  
**Participant Concerns Related to Alcohol Consumption in Sri Lanka**

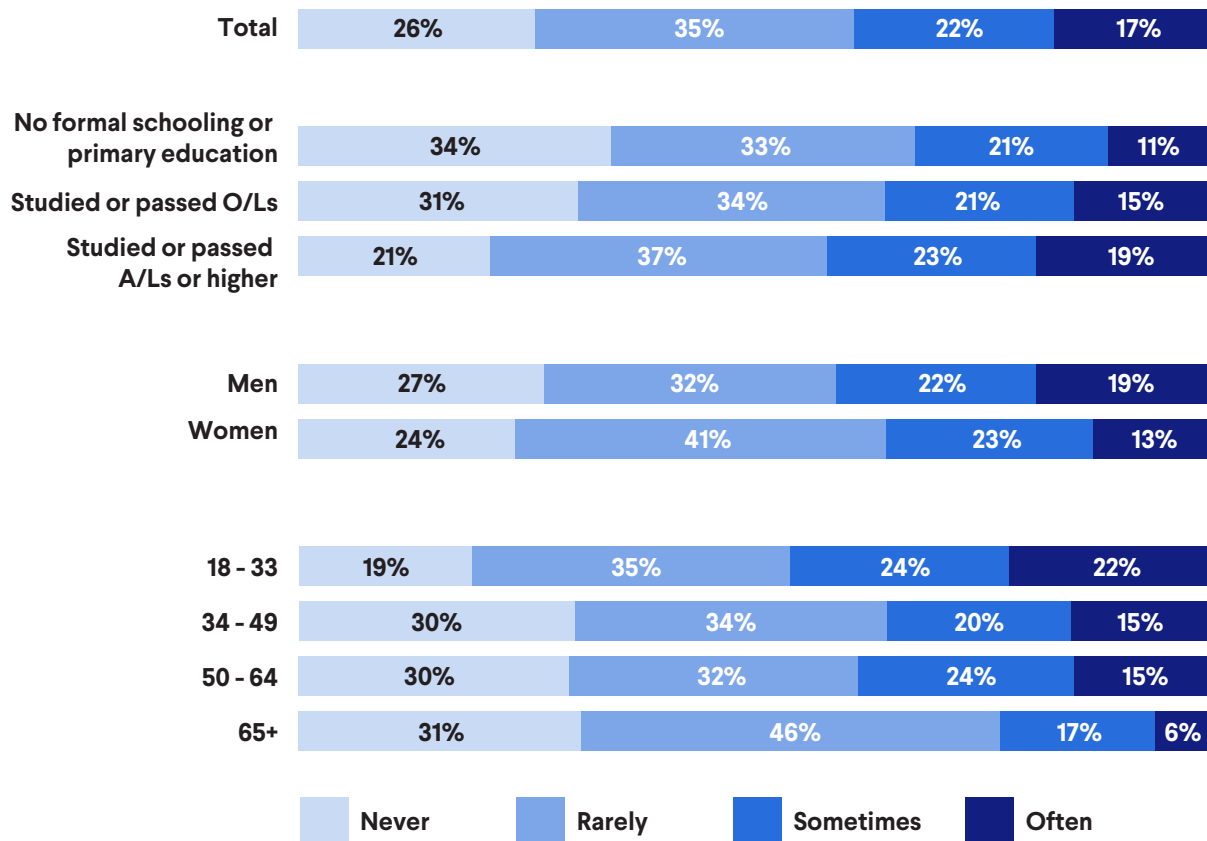


*Note: Percentages do not add up to 100% because participants could select multiple responses.*

## Alcohol consumption continues to be popularized in the media, despite restrictions on advertising.

Alcohol advertising continues to fuel the alcohol problem in Sri Lanka by popularizing and promoting alcohol consumption. Even though direct alcohol advertising is banned in Sri Lanka, 39% of participants reported that they sometimes or often have seen, read or heard advertisements promoting alcohol (Figure 3). Younger adults (22%), men (19%), and those with higher levels of education (19%) were more likely to report often seeing alcohol advertising.

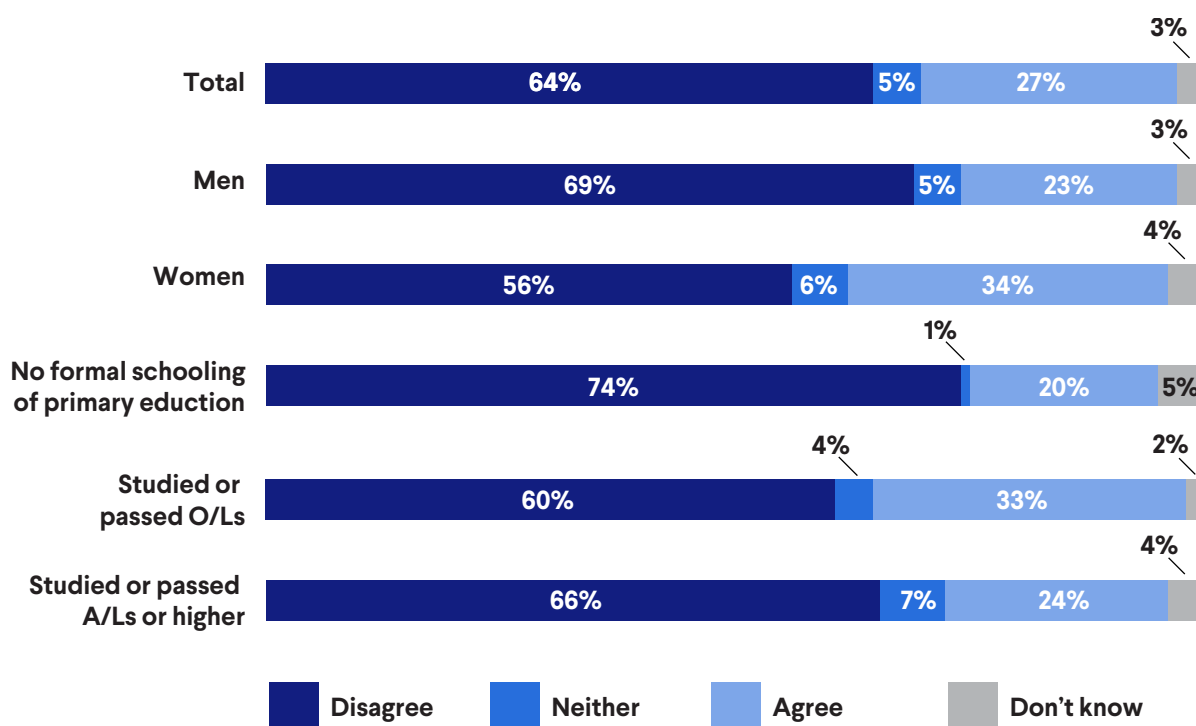
**Figure 3**  
**Exposure to Media Promoting Alcohol Consumption in Sri Lanka by Education Level, Gender, and Age**



## Sri Lankans want stronger alcohol policies and see the alcohol industry as an obstacle to getting them.

Most Sri Lankans question the effectiveness of current alcohol laws, with 64% saying the current laws do not provide sufficient protection against alcohol-related harms (Figure 4). An overwhelming 93% deem government involvement crucial to tackle alcohol-related problems (Figure 5), yet more than half of participants (60%) perceive the alcohol industry as an obstacle to getting adequate alcohol laws passed (Figure 6). Men (69%), who make up a greater proportion of people who drink alcohol,<sup>8</sup> and those with lower education levels (74%), are the most likely to think current alcohol laws are not strong enough (Figure 6). Those with higher education levels (61%) and people who don't drink alcohol (62%) were more likely to say that the alcohol industry is an obstacle to getting strong alcohol legislation passed (Figure 6).

**Figure 4**  
**Agreement or Disagreement That the Sri Lankan Government's Alcohol Laws are Currently Strong Enough to Protect People From Alcohol's Harms by Gender and Education Level**

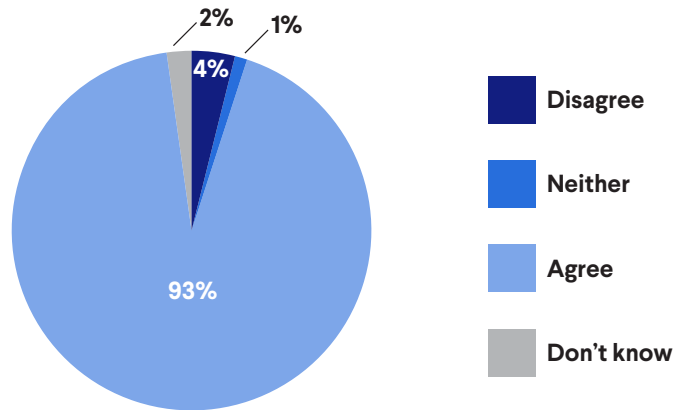


*Note: There was no statistical difference by age or alcohol consumption*

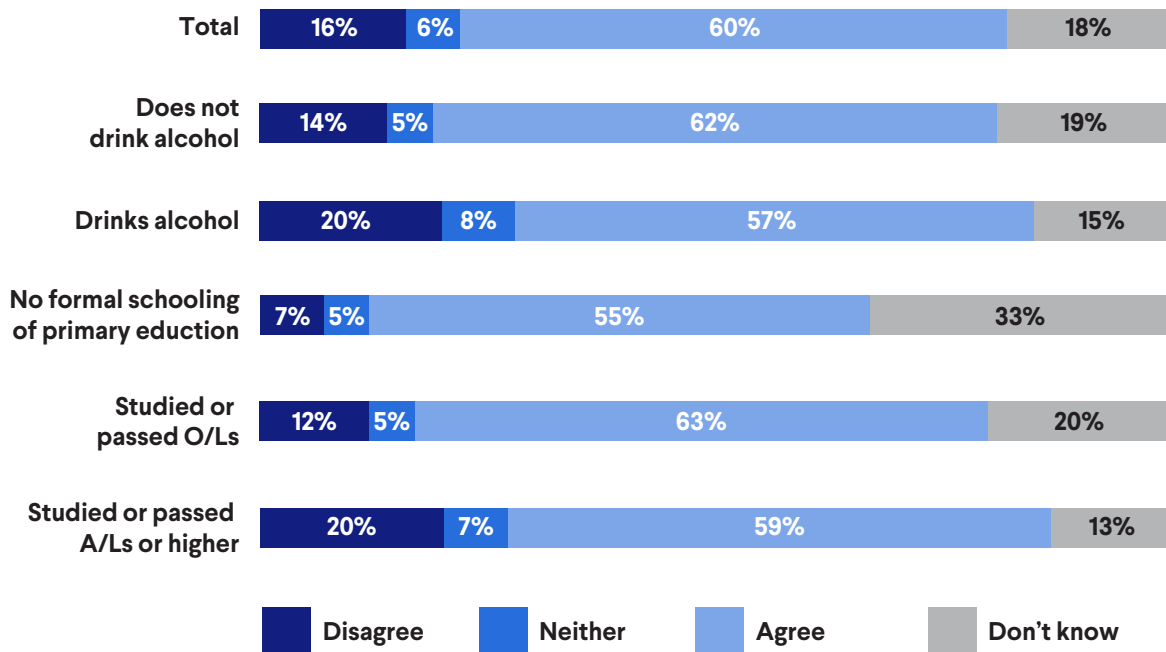
8. Ibid



**Figure 5**  
**Agreement or Disagreement That it is Important for the Government to be Involved in Helping Solve the Problem of Alcohol Consumption in Sri Lanka**



**Figure 6**  
**Agreement or Disagreement That the Alcohol Industry is an Obstacle to Getting Strong Alcohol Laws in Sri Lanka by Alcohol Use and Education Level**

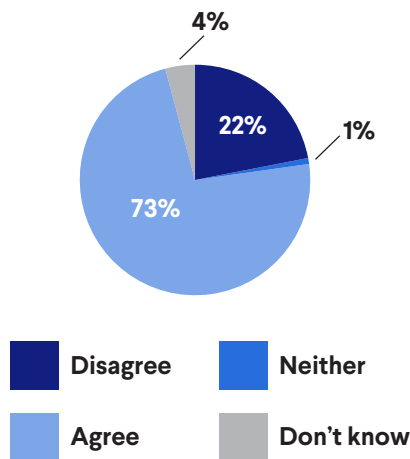


*Note: There was no statistical difference by age or gender*

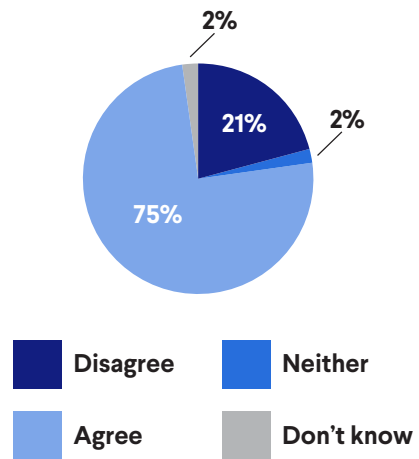
**Sri Lankans support smart pricing policies, including taxation, to reduce alcohol consumption.**

Participants expressed substantial support for alcohol policies aimed at curbing consumption and reducing harms, with 73% favouring measures that raise alcohol prices and 75% endorsing alcohol taxation as an effective strategy (Figures 7 and 8). In addition, 70% of participants would greatly increase their support for taxing alcohol if the revenue were used to improve public programs such as health care for all citizens, primary school education, public health education programs, safer roads, programs to support poor people, and infrastructure development in the country (Figure 9).

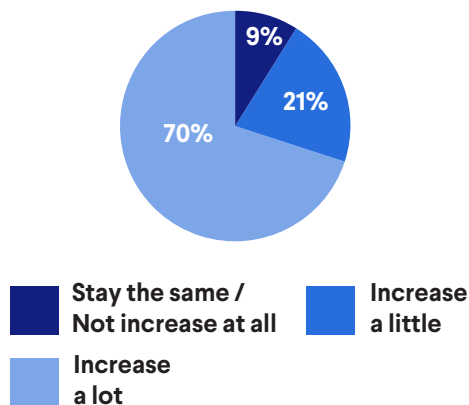
**Figure 7**  
**Agreement or Disagreement That Increasing the Price of Alcohol Would Help Address the Problem of Alcohol Consumption in Sri Lanka**



**Figure 8**  
**Agreement or Disagreement That Taxes on Alcohol Are an Effective Way to Reduce Alcohol Consumption in Sri Lanka**



**Figure 9**  
**Average Increase in Support of Taxing Alcohol if Revenue is Used for ANY Public Program**



# Conclusion

There is widespread concern among people in Sri Lanka about alcohol and a strong demand for government action to reduce alcohol consumption and its associated harms. This concern is widespread: Nearly all people surveyed consider alcohol consumption to be a problem, and a majority consider it to be a major problem. People who do not drink alcohol were more likely to consider alcohol to be a major problem, compared to people who drink alcohol, and women were more likely than men to consider it a major problem. These findings suggest there is a widespread need and public mandate for addressing the problem of alcohol in Sri Lanka.

The majority of Sri Lankans do not believe that current alcohol policies are strong enough to protect people from alcohol's harms. Despite current advertising restrictions, people report that they continue to be exposed to alcohol advertising that popularizes its consumption. They also perceive the alcohol industry as a significant barrier to passing stronger alcohol laws. Hence, the overwhelming majority deems government involvement crucial to tackle alcohol-related challenges and support pricing strategies, such as taxation, designed to reduce alcohol consumption, particularly if revenue is used for public programs. Overall, these findings indicate a clear call for significant enhancements to alcohol policies to prioritize public health and well-being in Sri Lanka.

# Acknowledgements

The survey and report were conducted and prepared by the Alcohol and Drug Information Centre (ADIC), a resource center based in Colombo, Sri Lanka that promotes a reduction in the demand for alcohol, tobacco and other drugs and advocates for effective policy formulation nationally, regionally and internationally; and Vital Strategies, a global public health organization, as part of the RESET Alcohol Initiative. Invaluable contributions were made by other partners in RESET Alcohol: Movendi International and the University of Illinois Chicago Institute for Health Research and Policy (Tobacconomics team).

## **Suggested Citation**

RESET Alcohol initiative. Public Opinion Poll Results on Alcohol Consumption in Sri Lanka. 2023.



# Appendix

Terms	Definitions
<b>Alcohol Consumption</b>	
<b>Person who drinks alcohol</b>	Participant responded "yes" to whether they consumed alcohol within the previous 12 months.
<b>Person who doesn't drink alcohol</b>	Participant responded "no" to whether they consumed alcohol within the previous 12 months.
<b>Education Level</b>	
<b>No formal schooling or primary education</b>	Primary education in Sri Lanka lasts five years, with pupils ages 5-10 going through grades 1-5. Pupils are taught in the four subject fields of the national curriculum: language, mathematics, environment-related activities and religion.
<b>Studied or passed O/Ls</b>	O/L or Ordinary Level is a qualification for the academically rigorous Advanced Level exams. It is usually taken by students during the final two years of senior secondary school (grades 10 and 11). It is the proof of completing secondary education in Sri Lanka and determines eligibility to pursue further studies at the Advanced Level (A/L).
<b>Studied or passed A/Ls or higher</b>	A/L or Advanced Level is a General Certificate of Education (GCE) qualification exam usually taken by students during the final two years of collegiate level (grade 12 and 13) after they have completed GCE Ordinary Level exams. The collegiate level, or GCE Advanced Level, lasts two years and is the prerequisite for entry into tertiary education.

