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REGULATING ACCESS TO LIQUOR THROUGH A LIQUOR CARD SYSTEM AND SUPERVISED RETAIL OUTLETS: EVIDENCE FROM A PUBLIC OPINION SURVEY

Dr. K. Kishore
Department of Commerce, Voorhees College, Vellore, Tamil Nadu, India

ABSTRACT

Liquor retailing in Tamil Nadu presents a persistent policy dilemma: the trade contributes substantially to state revenue while simultaneously imposing severe social costs on families and communities. This study examines public receptiveness to an alternative regulatory model, namely the issue of "liquor cards" to consumers and the routing of liquor sales through supervised retail channels. Primary data were collected through a structured questionnaire from 123 adult respondents (mean age 37.8 years; 31.7 per cent self-reported drinkers) and analysed using SPSS. The findings reveal a sharp attitudinal divide. Respondents overwhelmingly agree that liquor consumption harms the family (78.8 per cent agreement; mean 4.27 on a five-point scale) and a majority acknowledge its contribution to government revenue (59.2 per cent agreement), yet they reject the notion that drinking is a "life-style" (64.7 per cent disagreement). Perceived feasibility of a liquor card system is low overall (mean 4.09 on a ten-point scale), and a majority reject eligibility criteria based on income (57.1 per cent) or occupation (72.5 per cent). However, drinkers, the population the scheme would actually govern, are significantly more receptive than non-drinkers: they rate feasibility higher (5.81 vs 3.32; $p < 0.001$) and 58 per cent of them accept an income-linked card as against 16 per cent of non-drinkers. The paper argues that these results support a carefully designed, harm-reduction-oriented liquor card system combined with supervised retail outlets, provided eligibility is de-linked from intrusive income and occupation tests, and offers concrete design recommendations for government consideration.

Keywords: liquor card, alcohol policy, TASMAC, harm reduction, regulated retail, consumer survey, Tamil Nadu

1. Introduction

Alcohol consumption in India has risen steadily with income growth and changing social norms (Prasad, 2009), and alcohol policy in the country oscillates between two poles: prohibition, attempted at various times in several states, and open commercial sale under state monopoly or licensing. Tamil Nadu follows the latter model through the Tamil Nadu State Marketing Corporation (TASMAC), which holds the monopoly over the wholesale and retail vending of Indian-Made Foreign Liquor in the state. The arrangement yields significant excise and sales revenue for the exchequer, but it coexists with widely reported social harms, including household financial distress, domestic conflict, road accidents and health burdens borne disproportionately by low-income families (Benegal, 2005; World Health Organization, 2018).

Neither pole has proved satisfactory. Prohibition experiments have historically driven consumption underground, encouraging illicit brewing, spurious liquor tragedies and enforcement corruption (Subramanian et al., 2005), while unrestricted retail maximises availability and, with it, the social costs of

excessive consumption (Babor et al., 2010; Room et al., 2005). Between these extremes lies a third family of policy instruments: rationed or identified access. Under such systems, purchasers are registered, purchases are recorded, and quantity or frequency limits can be applied to individual buyers. Internationally, government-controlled retail monopolies such as Systembolaget in Sweden and provincial liquor boards in Canada operate on a related philosophy of controlled, de-marketed availability (Norström et al., 2010; Stockwell et al., 2018), and Kerala has experimented domestically with app-based virtual queue management for liquor purchase during the COVID-19 period, demonstrating that technology-mediated, identity-linked, quantity-capped purchase management is administratively practicable in the Indian context (Deccan Herald, 2020).

This paper investigates public receptiveness to one such instrument for Tamil Nadu: a "liquor card" issued to consumers, which would serve as a purchase authorisation and record-keeping device, together with the relocation of retail sale from stand-alone liquor shops into supervised counters within organised retail formats such as supermarkets. The study is empirical in orientation. Rather than assuming public support, it measures attitudes towards liquor consumption, tests the acceptability of alternative eligibility criteria for a card, and quantifies the perceived feasibility of the scheme among both drinkers and non-drinkers.

2. Objectives of the Study

To measure public attitudes towards liquor consumption on three dimensions: its status as a life-style, its contribution to government revenue, and its effect on the family.

To assess the perceived feasibility of issuing liquor cards to consumers.

To test the acceptability of income-based and occupation-based eligibility criteria for such cards.

To compare the responses of drinkers and non-drinkers and draw out the policy implications of any differences.

To recommend a workable design for a liquor card system and supervised retail outlets on the strength of the evidence.

3. Methodology

Primary data were collected through a structured questionnaire administered to adult respondents. The instrument captured (i) drinking status; (ii) age; (iii) attitudes towards liquor consumption measured on five-point Likert scales (1 = Strongly Disagree to 5 = Strongly Agree); (iv) acceptance of income-based and occupation-based liquor cards (Yes / No / No Idea); (v) perceived feasibility of issuing liquor cards on a ten-point scale (1 = not at all possible, 10 = fully possible); and (vi) open-ended suggestions. A total of 123 valid responses were obtained. Respondents ranged in age from 21 to 67 years (mean 37.8, SD 10.1). The sample was drawn largely from the educated salaried class, with teachers and faculty members constituting 67 per cent of respondents, followed by company employees (15 per cent), students, business persons and others. Data were coded and analysed in SPSS. Descriptive statistics, one-sample t-tests against the scale midpoint, independent-samples t-tests (drinkers vs non-drinkers) and chi-square tests of association were employed.

Two limitations of the sampling design deserve mention at the outset. First, the sample is a convenience sample skewed towards the academic community and is not statistically representative of the general

population of Tamil Nadu. Second, at 123 responses the sample supports exploratory inference only. These limitations are revisited in Section 7.

4. Analysis and Results

4.1 Profile of respondents

Of the 123 respondents, 39 (31.7 per cent) reported the habit of drinking alcohol and 84 (68.3 per cent) did not. Drinking prevalence varied across age groups, being highest in the 41–50 year bracket (51.9 per cent) and lowest among respondents above 50 (6.7 per cent).

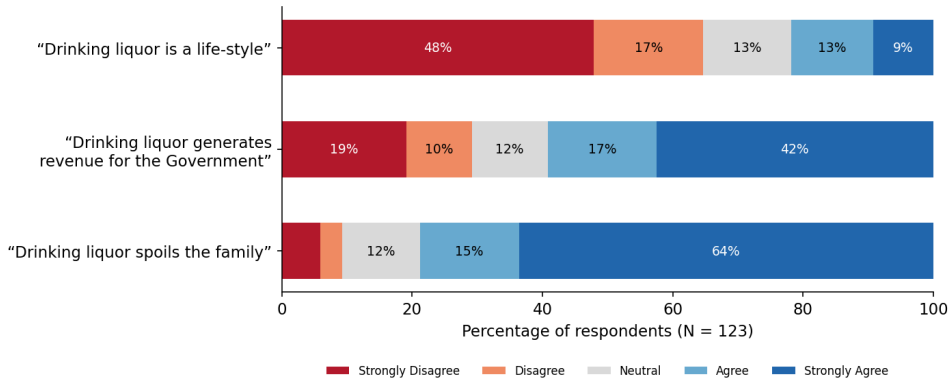
4.2 Attitudes towards liquor consumption

Table 1 and Figure 1 summarise responses to the three attitude statements. The pattern is unambiguous. Respondents reject the proposition that drinking liquor is a life-style (mean 2.18; 64.7 per cent disagreement; one-sample t against the neutral midpoint of 3: $t = -6.40$, $p < 0.001$). They acknowledge, on balance, that liquor generates revenue for the government (mean 3.53; 59.2 per cent agreement; $t = 3.72$, $p < 0.001$). Most strikingly, they agree overwhelmingly that drinking liquor spoils the family (mean 4.27; 78.8 per cent agreement; $t = 11.83$, $p < 0.001$). The public, in short, sees the trade as fiscally useful but socially destructive, and declines to normalise consumption as a matter of personal style.

Table 1. Attitude statements: descriptive statistics and one-sample t-tests (test value = 3)

Statement	n	Mean	SD	% Agree (4–5)	t	p
Drinking liquor is a life-style	119	2.18	1.39	21.8	−6.40	< 0.001
Liquor generates revenue for the Government	120	3.53	1.57	59.2	3.72	< 0.001
Drinking liquor spoils the family	118	4.27	1.17	78.8	11.83	< 0.001

Figure 1. Public attitudes towards liquor consumption

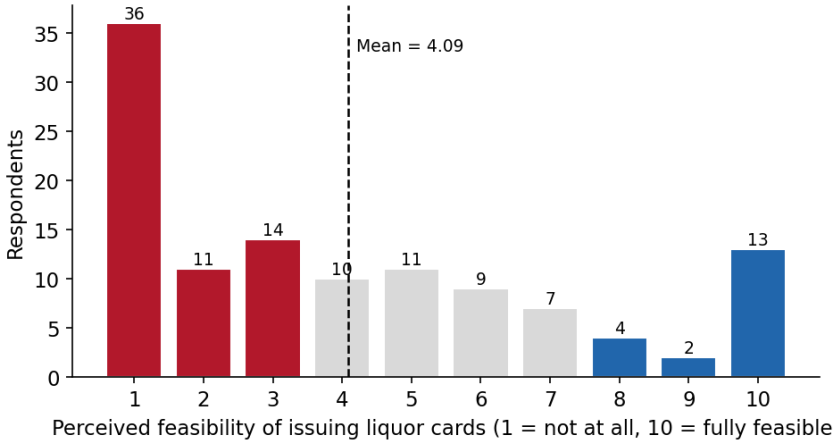


4.3 Perceived feasibility of a liquor card system

Respondents rated the feasibility of issuing liquor cards to drinkers at a mean of 4.09 on the ten-point scale (SD 3.04; median 3), significantly below the scale midpoint of 5.5 ($t = -5.03$, $p < 0.001$). As Figure 2

shows, the distribution is bimodal: 52.1 per cent of respondents cluster at the lowest ratings (1–3), while a smaller but non-trivial group of 16.2 per cent rate feasibility highly (8–10). Public opinion on the scheme is therefore not uniformly negative; it is polarised.

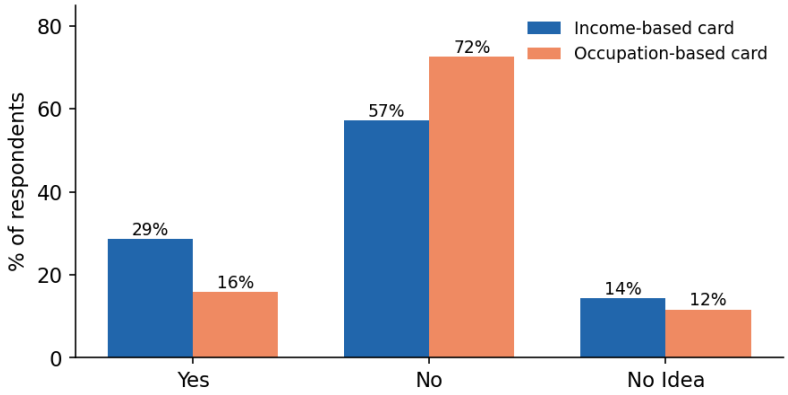
Figure 2. Perceived feasibility of a liquor card system (n = 117)



4.4 Acceptability of eligibility criteria

The survey tested two candidate bases for card eligibility. Both were rejected by a majority of respondents, but not equally. An income-based card was refused by 57.1 per cent and accepted by 28.6 per cent, while an occupation-based card fared worse, refused by 72.5 per cent and accepted by only 15.8 per cent (Figure 3). The open-ended responses explain the resistance: respondents observed that daily-wage earners and students would not disclose income truthfully, that addicts purchase liquor irrespective of earnings, and that occupational classification bears no logical relationship to the right to purchase. The rejection, in other words, is directed at the intrusive and impractical eligibility tests, not necessarily at the idea of identified purchase as such.

Figure 3. Acceptance of eligibility criteria for liquor cards



4.5 Drinkers versus non-drinkers

The most policy-relevant finding of the study emerges when the sample is split by drinking status (Table 2, Figure 4). Drinkers rate the feasibility of liquor cards significantly higher than non-drinkers (5.81 vs 3.32; $t = 4.01$, $p < 0.001$), and their acceptance of an income-linked card is nearly four times that of non-drinkers

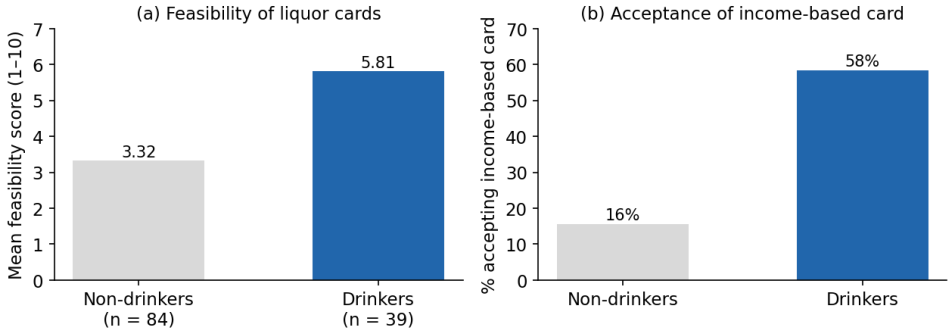
(58 per cent vs 16 per cent; $\chi^2 = 22.75$, $p < 0.001$). A parallel association holds for occupation-based cards ($\chi^2 = 19.99$, $p < 0.001$). Drinkers are also markedly more willing to describe drinking as a life-style (3.27 vs 1.70; $p < 0.001$) and more emphatic about its revenue contribution (4.08 vs 3.29; $p = 0.006$), while still substantially agreeing that it harms the family (3.92 vs 4.43; $p = 0.032$).

The implication is important. Aggregate scepticism towards the scheme is driven principally by non-drinkers, for whom the card is an abstraction with no personal consequence. The constituency the card would actually regulate is considerably more receptive to it. A regulatory instrument that is acceptable to a majority of its regulated population, and that responds to a harm acknowledged by nearly four-fifths of the general public, rests on firmer ground than the headline feasibility score alone would suggest.

Table 2. Comparison of drinkers (n = 39) and non-drinkers (n = 84)

Variable	Drinkers	Non-drinkers	t / χ^2	p
Feasibility of liquor cards (1–10)	5.81	3.32	t = 4.01	< 0.001
Drinking is a life-style (1–5)	3.27	1.70	t = 6.47	< 0.001
Generates revenue for Government (1–5)	4.08	3.29	t = 2.82	0.006
Spoils the family (1–5)	3.92	4.43	t = −2.19	0.032
Accept income-based card (% Yes)	58.3	15.7	$\chi^2 = 22.75$	< 0.001
Accept occupation-based card (% Yes)	37.8	6.0	$\chi^2 = 19.99$	< 0.001

Figure 4. Drinkers are significantly more receptive to a liquor card system



4.6 Voices from the field

The open-ended responses enrich the quantitative picture. Several respondents pressed for outright prohibition, reflecting the strong "spoils the family" sentiment. Others engaged constructively with the design of the card: one proposed graded quantity quotas by age bracket; another suggested linking issuance to health status and limiting purchase frequency; a third compared the card to a driving licence, an identity instrument for a regulated activity. Sceptics raised two practical objections that any implementation must answer: income cannot be verified for informal-sector workers, and determined addicts will bypass any formal channel, feeding a black market. These objections inform the recommendations that follow.

5. Discussion

Three findings anchor the discussion. First, there is near-consensus that the present arrangement imposes grave family-level harms, and a simultaneous majority acknowledgement that the trade funds the state. The

public thus recognises precisely the dilemma that motivates a middle-path policy: the state can neither responsibly maximise sales nor realistically prohibit them. Second, blanket public endorsement of a liquor card does not currently exist; the headline feasibility score is low and majorities reject income and occupation tests. Third, and decisively, the resistance is concentrated among non-drinkers and directed at intrusive eligibility criteria, while the regulated population itself is majority-receptive.

Read together, these results counsel neither abandonment of the idea nor its naive adoption. They counsel redesign. A card conceived as a rationing-by-income device will fail the acceptability test and the administrative-practicability test alike. A card conceived instead as a universal, age-verified purchase identity, analogous to a driving licence rather than a ration card, with quantity ceilings applied uniformly and purchase records enabling protection of the vulnerable, avoids the specific features respondents rejected while delivering the harm-reduction functions respondents implicitly demand when 79 per cent affirm that liquor spoils the family.

The proposal to route sales through supervised counters in supermarkets and organised retail complements the card. It must be acknowledged candidly that the survey instrument did not directly test public opinion on supermarket sale, and the recommendation on this point therefore draws on the logic of the findings and on international regulatory practice (Norström et al., 2010) rather than on a direct survey estimate; a follow-up study should measure it explicitly. The case for it is nonetheless coherent: stand-alone liquor shops concentrate public drinking and nuisance around their premises, whereas a supervised counter inside a general retail environment normalises neither loitering nor on-the-spot consumption, facilitates card-based verification through existing point-of-sale infrastructure, improves surveillance and audit trails, and dismantles the stigmatised, male-dominated micro-environment of the conventional outlet that many families experience as threatening.

6. Recommendations to the Government

Introduce a universal, age-verified liquor card, not an income- or occupation-based one. Eligibility should rest solely on legal drinking age and identity verification (Aadhaar-seeded, with appropriate data-protection safeguards). The survey shows decisively that income and occupation tests will be rejected by the public and are unverifiable for informal-sector workers.

Use the card for quantity ceilings and purchase records, applied uniformly. Uniform per-card weekly or monthly purchase ceilings avoid the discriminatory character respondents objected to, while still capping the heavy consumption that drives family harm. Graded quotas by age, as suggested by a respondent, may be examined in a pilot.

Pilot supervised liquor counters within supermarkets and organised retail. Begin with a limited number of municipal areas, with sales permitted only against card swipe, no consumption on premises, restricted display and no point-of-sale promotion, on the model of controlled-availability retail monopolies abroad.

Phase out stand-alone outlets in proportion to supervised-counter rollout, so that total availability does not increase; the object is substitution of channel, not expansion of access.

Build in family-protection and welfare linkages. Purchase records should enable, with due process, interventions in cases of documented family distress, and the card platform should carry de-addiction

helpline information and enable voluntary self-exclusion, a feature consistent with respondents' suggestion of family consent mechanisms.

Attack the substitution risk directly. Respondents rightly warned of black-market leakage. Enforcement against illicit brewing must be strengthened in step with the card rollout, and pricing under the card system must remain close enough to current retail prices that the informal market gains no decisive cost advantage.

Communicate the scheme as harm reduction, not as a drinker's entitlement. Public messaging should foreground the family-protection rationale that commands 79 per cent agreement, to secure the consent of the non-drinking majority whose scepticism the survey records.

Commission a representative follow-up study covering rural populations, women and informal-sector workers, and directly measuring attitudes to supermarket-based sale, before state-wide rollout.

7. Limitations of the Study

The study is based on a convenience sample of 123 respondents dominated by the academic and salaried community, and its findings cannot be generalised to the population of Tamil Nadu. Women's perspectives, central to the family-harm dimension, are not separately analysed for want of a gender variable in the instrument. Attitudes to supermarket-based sale were not directly measured. Self-reported drinking status is subject to social-desirability bias, which likely understates true prevalence relative to population estimates such as those of the National Family Health Survey (International Institute for Population Sciences & ICF, 2021). These constraints qualify, but do not overturn, the central attitudinal contrasts reported, all of which are statistically significant at conventional levels.

8. Conclusion

The survey documents a public that condemns the social consequences of liquor, concedes its fiscal utility, and is divided on the instrument proposed to reconcile the two. Beneath the division lies a usable consensus: the harms are real and concentrated on the family, intrusive eligibility tests are unacceptable, and the population the scheme would govern is prepared to accept identified, regulated purchase. A universal age-verified liquor card with uniform quantity ceilings, dispensed through supervised counters in organised retail and framed publicly as family protection, is the design most consistent with this evidence. The government would be well advised to pilot such a scheme, measure its effects on consumption, family welfare, revenue and the illicit market, and let the results, rather than the poles of prohibition and promotion, determine the future of liquor policy in the state.

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