

*Alcohol-related harm, its impact on the national budget,
and the economic benefits of preventive measures*

- A Study -



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Alcohol-related harm, its impact on the national budget, and the economic benefits of preventive measures: A study

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For ease of reading and clarity, the masculine grammatical form used in this document is intended as gender-neutral and refers equally to persons of all gender identities.

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This study is not only the product of data and analysis, but also a reflection of a shared commitment to prioritizing youth health and safety over commercial interest. We hope it contributes meaningfully to evidence-based policymaking, improved enforcement practices, and sustainable community-level prevention in Serbia and beyond.

Table of abbreviations

CSO	Civil society organisation
CZOR	Centre for youth work
ESS	European Social Survey
ESPAD	European School Survey Project on Alcohol and other Drugs
EU	European Union
FCTC	Framework Convention on Tobacco Control
GAAP	Action Plan for the implementation of the Strategy for the period 2022-2030 – Global Alcohol Action Plan
GDP	Gross Domestic Product
LSGU	Local Self-government Unit
MoTY	Ministry of Tourism and Youth
SORS	Statistical Office of the Republic of Serbia
UN	United Nations
UNICEF	United Nations Children’s Fund
UNODC	United Nations Office on Drugs and Crime
WHO	World Health Organisation

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1. Introduction

The "Youth Health ahead of Profit" project, financially supported by the European Union under the IPA III programme and the IOGT-NTO Movement, focuses on enhancing the protection of young people from the adverse effects of alcohol availability and sales. Given the complexity of the issue, CZOR has convened a team of relevant actors and strategic partners to combine complementary expertise. As the coordinating organisation – drawing on more than two decades in youth rights protection and advocacy – CZOR leads the advocacy efforts and CSO capacity development.

Partners include key institutions and expert organizations. The Association for Consumer Protection in Vojvodina and the Media & Reform Centre Niš serve as supporting partners in their respective areas of expertise: consumer protection, and media visibility and public awareness campaigning. Additionally, the initiative benefits from the support of a broad network of strategic partners: the Office for Combating Drugs, the Institute of Public Health of Vojvodina, the Institute of Economic Sciences, and the IOGT-NTO Movement from Sweden, which provide thematic expertise, institutional credibility, support that enhance the project's policy impact and multisectoral reach.

The focus is on protecting public health, promoting healthy lifestyles, and safeguarding minors from the interests of profit-driven groups—primarily the alcohol industry—whose goals conflict with societal welfare. The study presented here aims to deliver an objective and independent analysis of alcohol consumption among youth, particularly minors, in order to protect them from alcohol use and to develop recommendations for policymakers and stakeholders. Implementation of these recommendations could help reduce alcohol use and mitigate its adverse effects on individuals and society at large.

Beyond the direct health consequences, alcohol consumption negatively impacts economic development potential through added economic burdens of damage control, poorer outcomes in education, employment, productivity, lower living standards, and higher rates of crime, violence, traffic accidents, and reduced overall life satisfaction. Accordingly, by analysing secondary data on consumption prevalence and specificities, the study emphasizes the economic dimensions of alcohol control, institutional efficiency, and possibilities for using economic instruments to modify current behaviour patterns. Specific objectives of the study include:

- Providing insights into key elements of current alcohol use control policies among youth in Serbia;
- Analysing characteristics of the existing institutional framework shaping current youth alcohol protection policies;

- Identifying potential policy instruments to combat excessive alcohol consumption, based on global studies and practices;
- Comparing the accessibility of alcoholic beverages to minors in Serbia and other European countries;
- Assessing youth alcohol consumption trends in Serbia versus other European countries;
- Evaluating the role and current significance of the alcohol industry in Serbia's economy.

The results of the conducted research and the implementation of the recommendations for improving current policies are expected to lead to:

- Strengthening the role of civil society in policy development processes;
- Enhancing the existing strategic approach and aligning control policy measures with EU standards and WHO recommendations;
- Encouraging institutional activity and civic engagement at the local level;
- Establishing more effective cooperation among relevant institutions.

The study is organized into several sections. The first part analyses the harmful effects of alcohol, with a particular focus on the vulnerable youth population. It also examines the economic costs for public health and society, as well as the impact of the alcohol industry on the national economy. The methodological section covers a review of key laws, strategies, and policies, as well as the identification of relevant actors at both national and local levels. The study is also based on empirical data, which enables conclusions drawn from relevant and verifiable facts. In line with its goals, the central section of the research presents the findings of quantitative and qualitative analyses of youth alcohol consumption patterns, along with an assessment of institutional responses and public policies. The conclusions and recommendations emphasize the necessity of prioritizing public health interests over economic ones with a clear message that youth health must be a primary objective of modern society.

2. Methodology and data sources

The study applies a combined methodological approach, integrating desk research with empirical data analysis. This methodological foundation enables a comprehensive understanding of the phenomenon of alcohol consumption among youth in the Republic of Serbia, taking into account both the broader social and economic context and the experiences and attitudes of the involved actors.

In the first phase of research, through analysis of relevant literature and available secondary data, the harmful effects of alcohol consumption on the general population were identified, with particular focus on youth as a vulnerable social group. In addition to health aspects, the economic costs imposed by alcohol abuse on the public health system and society as a whole were analysed. The position of the alcoholic beverage

industry within the national economy was also examined through available indicators. A specific segment of desk research was dedicated to the analysis of the legislative and institutional framework relating to the protection of minors from the harmful effects of alcohol. Within this context, mapping of relevant laws, strategic documents, and policies was conducted, along with the identification of key national and local stakeholders involved in their development and implementation. Secondary data sources used for the desk analysis included:

- the Statistical Office of the Republic of Serbia (RZS);
- the Ministry of Finance of the Republic of Serbia;
- the Ministry of Internal and Foreign Trade of the Republic of Serbia;
- the World Health Organisation (WHO);
- the European School Survey Project on Alcohol and Other Drugs (ESPAD);
- the European Social Survey (ESS).

The empirical segment of the research was based on data from the European Social Survey (ESS) and ESPAD, allowing for a comparative overview of alcohol consumption patterns among youth in Serbia and other European countries. The analysis focused on identifying dominant behavioural patterns, attitudes toward alcohol, and sociodemographic factors influencing the frequency and manner of alcohol consumption. The quantitative segment of the study included analysis of the frequency and volume of alcohol consumption among youth, with emphasis on differences by gender and age group. Data from the ESS enabled precise statistical processing and interpretation of results, providing a reliable foundation for subsequent conclusions and recommendations.

Following completion of desk and quantitative analyses, a qualitative phase was conducted, consisting of 13 semi-structured in-depth interviews with representatives of relevant institutions and organizations. Participants included representatives of government bodies, educational and healthcare institutions, civil society organizations, and other actors actively involved in policy-making for youth. The objective of this phase was to enable deeper insight into institutional practices, identify challenges in the implementation of existing measures, and collect proposals for improving public policies aimed at preventing harmful alcohol use among youth and enhancing the effectiveness of consumption reduction instruments.

3. Legislative and institutional framework for alcohol control

Given the interdisciplinary nature of alcohol use control among youth, this issue is addressed through a wide array of legal acts and public policy documents spanning multiple sectors. On one hand, there are regulations that approach the problem of alcohol consumption from a general and public health perspective—such as the Law on Public Health (2016) and the Law on Healthcare Protection (2019). On the other,

there are legislative provisions and strategic documents that define youth policy priorities specifically targeting young people, such as the Law on Youth (2011) and the National Youth Strategy of the Republic of Serbia for the period 2023–2030. Additionally, several laws and policy documents address advertising, sales, and taxation, reflecting the specificities and negative consequences of alcohol use.

Following comparative practices, the legislative and strategic framework covers the key pillars of alcohol consumption control. Youth, as a particularly vulnerable group, are protected by specific provisions restricting access and consumption, accompanied by tailored indicators that help ensure policy effectiveness.

The issue of alcohol consumption is recognized within the **Law on Public Health** ("Official Gazette RS", No. 15/2016) in the section concerning risk assessment of harmful behaviour patterns, along with other risk factors such as poor nutrition, tobacco use, gambling, and others, as well as in relation to health promotion and disease prevention. The **Law on Healthcare Protection** ("Official Gazette RS", Nos. 25/2019 and 92/2023) designates mandatory treatment of individuals with alcoholism as one of the public health priorities in the Republic of Serbia. In late 2017, the Government of the Republic of Serbia adopted the **Regulation on the National Programme for the Prevention of Harmful Alcohol Use and Alcohol-related Disorders**, aiming to reduce the harmful consequences of alcohol use for both individuals and society as a whole.

This Program identifies youth as a particularly vulnerable group when it comes to alcohol consumption, and cites as one of its goals the support of activities aimed at creating environments where young people grow up protected from the negative consequences of alcohol use. As particularly important activities focused on the protection of children and youth, the Program lists the necessity of educating children and youth, significantly reducing advertising of alcoholic beverages, limiting the availability of alcohol products, developing and supporting the implementation of specialized programs for minors, measures related to preventing drunk driving, treatment for adolescents with alcohol-related problems, strengthening institutional capacities, and addressing alcohol taxation, which directly affects product pricing and affordability. The Program outlines all key elements of an effective alcohol control policy, but the implementation of the proposed activities remains uncertain given the lack of data on the achievement of planned goals in previous years. Additionally, the allocated funds for program implementation in 2018 and 2019—2 million dinars—were symbolic considering the stated objectives. Moreover, the Program's connection with other public policy documents in this area remains largely unclear and does not indicate that it serves as a platform for collaboration among various stakeholders. The impression is that adopting a new, comprehensive program in the form of a national strategy—one that would establish clear and sustainable communication mechanisms with other public policy documents including the Youth Strategy, while defining specific

responsibilities, funding, and coordination methods—could represent a significant step forward in controlling alcohol consumption among youth.

The **Law on Youth** ("Official Gazette RS", Nos. 50/2011 and 116/2022 - second law) identifies the promotion of healthy and safe lifestyles within the specification of budgetary funding priorities for programs and projects of public interest in the field of youth policy at the national level and the level of local self-government units (LSGs). The Law further references the Youth Strategy, which defines measures and indicators for improving youth health. Within the five strategic goals of the **Youth Strategy of the Republic of Serbia for the period 2023–2030** ("Official Gazette RS", No. 9/2023), Special Goal 5 — "Established conditions for a healthy and safe environment and the social well-being of youth" — and Outcome Indicator 1 explicitly list, among other harmful products, the reduction of the proportion of young people who consume alcohol. The Strategy highlights youth alcohol consumption as a concern, specifically referring to the 2019 **ESPAD (European School Survey Project on Alcohol and Other Drugs)** study, which indicates that 87% of respondents aged 15–16 consume alcohol — a figure above the European average of 79% — and particularly emphasizes the problem of alcohol availability to minors. The **Youth Strategy of the Republic of Serbia 2023–2030** sets a goal to reduce the proportion of youth (aged 15 to 30 years) who consume alcohol to 25% by the end of the strategic period. The baseline value was taken from the **2021 Study on the Position and Needs of Youth in the Republic of Serbia**,¹ which found that 70.8% of surveyed youth reported consuming alcohol. Such a target value indicates an ambitious, yet necessary shift toward improving public health and preventing risky behaviour patterns among young people.

The feasibility of achieving this goal is certainly debatable, not only considering the significant gap between the current and desired state, but also recognizing that alcohol consumption increases with age across the analysed age groups (15–19; 20–24; and 25–30). For example, according to the same 2022 study, the proportion of youth aged 15–19 who consume alcohol is nearly **54%**, while in the 20–24 and 25–30 age categories, it amounts to **66.9%** and **76.8%**, respectively. Therefore, achieving this goal requires preventive action targeting youth who will enter the 15+ age group by 2030, as well as corrective measures for those aged 15–24 who will still be part of the target group in 2030 for which the outcome will be assessed.

The Strategy defines measures **5.1** and **5.2**, which relate to supporting the implementation of programs aimed at developing healthy lifestyles and improving

¹ Ministry of Tourism and Youth. (2021). *Research on the position and needs of youth*. <https://mto.gov.rs/tekst/sr/1180/istrazivanje.php>

safety. These measures are outlined in the **Action Plan for the period 2023–2025**,² and have been translated into concrete activities. In this regard, the issue of alcohol consumption—alongside matters concerning mental health and the development of institutional capacities of organizations operating in this field—is directly addressed through the following measures:

- Measure 5.1.1.1. Provision of financial support for youth and parent education programs for prevention at the local level. Responsibility for this measure lies with the Ministry of Tourism and Youth, which will implement the planned activities in partnership with the Ministry of Health, provincial and local authorities, student dormitories, educational institutions, and the civil sector. The source of funding for these activities is donor contributions, and the implementation deadline is the fourth quarter of 2025. The total planned budget for the period 2023–2025 amounts to 3.1, 2.4, and 1.8 million dinars, respectively, per year.
- Measure 5.1.8.3. Improvement of public policies ensuring youth protection from promotion, advertising, and availability. As with the previous measure, responsibility lies with the ministry in charge of youth policy, while partner institutions—alongside the Ministry of Health, local self-government units, civil sector, and educational institutions—also include the Ministry of Economy, the ministry responsible for sports, and international partners. The implementation deadline is the end of 2025, and according to the program budget—Program 1302 (PA 0005)—funding is provided from donor contributions. The total budgeted amounts for implementation are 2.2 million dinars in the first year, and 1.6 million dinars in each of the following two years.

Among other important laws, it is necessary to highlight the **Law on Consumer Protection** ("Official Gazette RS", No. 88/2021), which in Article 23 prohibits the sale of alcoholic beverages to minors, with a relatively modest prescribed fine of 50,000 dinars for legal entities and the potential possibility of banning certain activities for a period of 6 months to one year (Article 188 of the relevant law). Despite the clearly defined legal prohibition, there is a serious problem with its implementation in practice. Namely, while sellers bear legal responsibility if they sell alcohol to individuals under the age of eighteen, they are not legally authorized to verify buyers' identities. The right to officially request and check personal documents lies exclusively with police officers and other authorized bodies with special powers. This situation leads to serious practical limitations, as the seller, although responsible, lacks a legal mechanism to determine the age of the person purchasing the alcoholic beverage.

² Ministry of Tourism and Youth. (2023). *Action plan for youth 2023–2025 for implementing the Youth Strategy in the Republic of Serbia* [Akcionni plan za mlade 2023–2025 za sprovođenje Strategije za mlade u Republici Srbiji]. https://mto.gov.rs/extfile/sr/2540/akcioni_pl_2023-2025_za_mlade_RS_2023-2030_063_cyr.pdf

Data derived from this research indicate that, alongside a relatively mild penal policy in this area, enforcement of the law is highly questionable given the number of issued fines. Specifically, the Market Inspectorate of the Ministry of Internal and External Trade does not separately track the number of fines issued for violations involving the sale, serving, or gifting of alcoholic beverages to individuals under 18. These violations related to Article 188, paragraph 1 of the Law on Consumer Protection are monitored in aggregate form together with violations related to tobacco products and pyrotechnics. In the period from 2020 to 2024, a total of 416 misdemeanour orders were issued for these violations. Within the E-Inspector system, the Market Inspectorate does not maintain separate records for each of the 33 types of violations covered by this article of the law. This represents a telling example of the lack of obligation to monitor the enforcement of the Law on Consumer Protection, which needs to be amended as soon as possible—especially in light of the findings of this and previous studies regarding the widespread consumption of alcoholic beverages by minors. The availability of alcohol to minors can be tracked through reliable data, and the number of fines issued is certainly one of the key indicators that reflects institutional effectiveness in this area.

The effectiveness of inspection oversight in the area of alcohol sale and consumption is an important element in the implementation of public health and regulatory policies. Recommendations for its improvement, developed within institutional reforms and strategies for combating the grey economy, emphasize the need for a comprehensive modernization of inspection procedures. A key step in this direction is the introduction of a risk-based model, which allows monitoring to be directed toward entities with a higher likelihood of violating regulations. The introduction of standardized checklists contributes to greater transparency and consistency in the work of inspection bodies. Simultaneously, the digitization of procedures through specialized platforms enables faster data processing and the establishment of a direct connection with the judicial system, thereby reducing administrative burden and increasing the overall efficiency of oversight.

In addition to technical improvements, an important part of the reform involves strengthening inspector capacity through specialized training, as well as improving inter-institutional cooperation among various inspection bodies and internal affairs sectors. Particular emphasis is placed on measures aimed at controlling alcohol sales to minors, which include the implementation of so-called “test shoppers” and tightening of the penal policy for legal and natural persons who violate regulations. Through combined action, these measures form an integrated approach that strengthens law enforcement and contributes to reducing the negative health and socio-economic consequences of excessive alcohol use.³

³ Pravni kutak. (2024, October 13). *Sale of alcohol to minors: Legal ban and poor practice in Serbia*. Republic Commission for the Protection of Rights in Public Procurement Procedures. <https://rkp.rs/prodaja-alkohola-maloletnicima-zakonska-zabrana-i-losa-praksa-u-srbiji>

The **Law on Public Order and Peace** ("Official Gazette RS", Nos. 6/2016 and 24/2018), in Article 21, sanctions the sale of alcohol to minors under the age of 16 with prescribed symbolic fines ranging from 20,000 to 100,000 dinars. This law is, however, inconsistent with the Law on Consumer Protection, which is more restrictive as it prohibits the sale of alcohol to persons under the age of 18.

The **Law on Advertising** ("Official Gazette RS", Nos. 6/2016 and 52/2019) regulates the advertising of alcohol sales that may negatively affect young people, primarily by prohibiting the explicit use of youth as a direct target group. Nevertheless, this law can be considered quite lenient in terms of advertising restrictions. Although it prescribes a ban on advertising during and within ten minutes before and after television programs, in print media, cinema screenings, and theatre performances intended for minors, and prohibits advertising within a 100-meter radius from school and preschool complexes, it still enables wide visibility of alcohol to minors in various ways. The legal provisions take a permissive stance on different types of sponsorships that involve the promotion of alcoholic beverages at various events that minors may attend—including music concerts, sports events, and other cultural and entertainment happenings. Moreover, the ban on alcohol advertising does not apply to other types of venues frequented by minors, such as youth and sports clubs, where advertising of drinks containing less than 20% alcohol is explicitly permitted. The law also prohibits portraying alcohol abstinence in a negative light or suggesting positive effects of alcohol consumption. Additionally, it mandates warning labels regarding the prohibition of sales to minors and messages promoting responsible consumption. Considering that most minors tend to use traditional print and electronic media less, and instead spend a significant portion of their free time engaging with online content, it is important to highlight that the law does not adequately address internet advertising. Furthermore, restrictions related to alcohol advertising are not incorporated into the Law on Electronic Media ("Official Gazette RS", No. 92/2023).

The **Law on Excise Duties of the Republic of Serbia** represents one of the key elements in controlling alcohol consumption in general, and particularly in terms of protecting youth, given that—according to most independent studies—the price of alcoholic beverages and their consumption are in an inversely causal relationship, meaning that higher prices tend to delay the initiation of alcohol use among younger populations.⁴ Research shows that a 20% tax increase could lead to a reduction in alcohol consumption by more than 10%, while in lower-income countries, tax revenues could be up to three times higher.⁵ Such fiscal policy can simultaneously reduce

⁴ Rehm, J., Neufeld, M., Room, R., Sornpaisarn, B., Štelemėkas, M., Swahn, M. H., & Lachenmeier, D. W. (2022). The impact of alcohol taxation changes on unrecorded alcohol consumption: a review and recommendations. *International Journal of Drug Policy*, 99, 103420.

⁵Kilian, C., Lemp, J. M., Llamosas-Falc3n, L., et al. (2023). Reducing alcohol use through alcohol control policies in the general population and population subgroups: A systematic review and meta-analysis. *eClinicalMedicine*, 59, Article 101996. <https://doi.org/10.1016/j.eclinm.2023.101996>

consumption and increase public revenues. The collected funds may then be redirected toward the financing of healthcare and social programs.

The significance of the Law on Excise Duties in the context of consumption prevention is often overlooked, and stakeholders with expectations regarding reducing alcohol affordability—which directly stem from the application of this law—do not have influence over excise policy, which falls under the mandate of the Ministry of Finance. Given the irreplaceable role of price-control measures, it is necessary to redefine the priorities of excise policy, which is currently aimed exclusively at ensuring stable tax revenues, while ignoring savings in social costs (including healthcare) that result from lower consumption. The excise duty on strong alcoholic beverages (over 20% alcohol content) is 56,057.29 dinars per base unit consisting of one hectolitre of pure alcohol measured at a temperature of 20°C. It is calculated by multiplying the base unit with the volume of alcohol expressed in hectolitres in the final product. For drinks with lower alcohol content, the excise rates per litre are: 28.05 din/l for low-alcohol beverages containing more than 1.2% vol. but no more than 15% vol. of alcohol, produced from fruit juices or refreshing non-alcoholic drinks with added refined ethyl alcohol, alcoholic beverages, or plant extracts, or from beverages obtained by fermentation (e.g., wine, cider, perry, etc.); 32.04 din/l for beer, low-alcohol drinks containing beer (regardless of the beer percentage), and low-alcohol drinks containing 5% or more alcohol. In 2021, Serbia aligned its excise policy for strong alcoholic beverages with EU recommendations, calculating excise based on the percentage of pure alcohol rather than by type of beverage, thereby meeting the criterion set out in Chapter 16 on taxation.

In addition to all the aforementioned legal provisions, including the identified shortcomings and inconsistencies, it is important to highlight that several laws which, by their nature, ought to contain provisions aimed at discouraging alcohol consumption do not adequately address this issue. These laws primarily include the Law on Youth (2011), the Law on Hospitality (2019), the Law on Trade (2019), and the Law on Electronic Commerce (2019).

3.1. Global aspects of youth alcohol consumption control

Alcohol control policies are generally defined as public policies established through official documents (law, strategy, rulebook, regulation, etc.) adopted by public authorities, which focus on the relationship between alcohol, public health, and social well-being.⁶ By their nature, and due to the fact that they are enacted by public authorities, such policies inherently imply that the primary objective of public policy is defined as the interest of society, which simultaneously entails the exclusion of

⁶ Babor, T. F., Casswell, S., Graham, K., Huckle, T., Livingston, M., Österberg, E., ... & Sornpaisarn, B. (2022). *Alcohol: no ordinary commodity: research and public policy*. Oxford University Press.

industry interests and those of associated advocacy groups.⁷ The specificity of defining effective alcohol consumption control policies is reflected, among other things, in the fact that alcohol is the only psychoactive substance not regulated at the international level through legally binding instruments—as is the case, for example, with tobacco, which is regulated by the WHO through the Framework Convention on Tobacco Control (FCTC), adopted in 2003. Nevertheless, the need to limit alcohol consumption is undeniably acknowledged in a large number of global documents and recommendations, many of which have been incorporated into national policies, albeit with significant variability in terms of stringency, application, and implementation. The WHO has been a leading global actor since the 1950s, providing active support in combating alcohol consumption and reducing its associated negative effects. Given that alcohol consumption, as a toxic and addictive substance, causes approximately 3 million deaths annually⁸ along with numerous related health and socio-economic consequences, the necessity of an institutional response to the issue is evident.⁹ After decades of various forms of support, in 2010 the WHO adopted the **Global strategy to reduce the harmful use of alcohol**, which is considered the overarching document in the field of alcohol consumption control policies and, as such, forms the basis for developing national approaches to addressing this issue. The strategy outlines 10 key priorities through which governments can take action by adopting appropriate policies based on scientific evidence. These priorities include:¹⁰

- Leadership, awareness, and commitment;
- Response of health services;
- Community action;
- Policies and countermeasures related to drink-driving;
- Availability of alcohol;
- Marketing of alcoholic beverages;
- Pricing policies;
- Reduction of the negative consequences of drinking and alcohol intoxication;
- Reduction of the impact of illicit alcohol and informally produced alcohol on public health;
- Monitoring and surveillance.

Eight years after the adoption of the WHO Strategy, and recognizing the lack of progress in reducing global per capita alcohol consumption, alongside insufficiently defined indicators and targets,¹¹ the WHO introduced the **SAFER initiative**. The aim

⁷ Berdzuli, N., Ferreira-Borges, C., Gual, A., & Rehm, J. (2020). Alcohol control policy in Europe: Overview and exemplary countries. *International journal of environmental research and public health*, 17(21), 8162

⁸ Babor, T. F., Casswell, S., Graham, K., Huckle, T., Livingston, M., Österberg, E., ... & Sornpaisarn, B. (2022). *Alcohol: no ordinary commodity: research and public policy*. Oxford University Press.

⁹ McCambridge, J., & Lesch, M. (2024). Are we moving into a new era for alcohol policy globally? An analysis of the Global Alcohol Action Plan 2022-30. *BMJ Global Health*, 9(2), e014246.

¹⁰ World Health Organization. (2010). *Global strategy to reduce the harmful use of alcohol*. World Health Organization. <https://apps.who.int/iris/handle/10665/44395>

¹¹ Room R. (2021). *Global Intergovernmental initiatives to minimise alcohol problems: some good intentions, but little action*. *European Journal of Risk Regulation*, 12(2), 419–32.

of this initiative is to support WHO Member States in achieving the goals of the 2010 Strategy and other relevant documents focused on combating noncommunicable diseases, as well as target 3.5 of the UN Sustainable Development Agenda (SDG Target 3.5 – Strengthen the prevention and treatment of substance abuse, including narcotic drug abuse and harmful use of alcohol). Drawing on scientific evidence, SAFER emphasizes the most cost-effective interventions—commonly referred to as “best buys”—which include:¹²

- Increasing restrictions on alcohol availability
- Enhancing and enforcing measures against drunk-driving
- Facilitating access to screening, brief interventions, and treatment
- Implementing bans or comprehensive restrictions on alcohol advertising, sponsorship, and promotion.

Recognizing the need to concretize goals, indicators, and specific actions related to the Strategy, in 2022 the WHO Executive Board adopted the **Action Plan for the implementation of the Strategy for the period 2022–2030 (GAAP)**. The Plan acknowledges the role of various stakeholders, including governmental and non-governmental actors, and defines the connection between priority components and other key global documents, including the UN Sustainable Development Strategy. A key motivation for adopting the Action Plan was the insufficiently structured response to activities aimed at promoting alcoholic beverages, targeting youth and adolescents, as well as the fact that existing resources and capacities within the WHO and certain Member States do not correspond to the scale of the health and societal challenge that must be addressed. The Action Plan is structured around six priority areas:¹³

- Area of Action 1: Implementation of high-impact strategies and interventions
- Area of Action 2: Advocacy, awareness, and commitment
- Area of Action 3: Partnership, dialogue, and coordination
- Area of Action 4: Technical support and capacity building
- Area of Action 5: Knowledge generation and information systems
- Area of Action 6: Resource mobilization.

The issue of alcohol consumption by children and adolescents is particularly emphasized under Area of Action 2, in the context of raising awareness among decision-makers and the broader public, especially in countries where high consumption is normalized. It is highlighted that young people are disproportionately affected by the consequences of alcohol use, with 13.5% of all deaths among the 20–39 age group in 2016 linked to alcohol consumption.¹⁴ Although youth drinking

¹² World Health Organization. (2018). *SAFER: A world free from alcohol-related harm*. World Health Organization. <https://www.who.int/initiatives/SAFER/about>

¹³ World Health Organization Regional Office for Europe. (2020). Alcohol pricing in the WHO European Region: Update report on the evidence and recommended policy actions. World Health Organization. <https://www.who.int/publications/i/item/10665-336159>

¹⁴ Ibid.

declined in many European countries in the years preceding the adoption of the Action Plan, particularly vulnerable youth groups are noted as exceptions. Area 2 also underscores the importance of supporting young people in order to protect them from societal pressures to initiate consumption and to prevent onset. Furthermore, in light of resource allocation (Area of Action 6), the Plan stresses the need for increased investment in public health programs, including efforts to safeguard children's health.

When it comes to policies implemented in the broader context (EU countries), alcohol consumption control has been recognized as highly significant for decades—well before the adoption of the WHO Strategy in 2010. The **European Charter on Alcohol** was adopted in 1995 by the WHO's European branch, while a Ministerial Conference held in Sweden in 2001 was specifically dedicated to youth and alcohol. Control policies across the EU can be described as highly diverse, with the weakest progress observed precisely in the so-called “best buy” policies, which the WHO identifies as the most effective. Moreover, even in cases where such policies have been implemented, it remains questionable whether they have been applied in accordance with WHO definitions and recommended approaches. For example, taxation—one of the “best buy” measures—is applied in all observed countries, but only a third of them explicitly align tax adjustments with inflation and income growth, raising concerns about its impact on reducing affordability.¹⁵

When key elements of alcohol control policies at the EU level are analysed, the following conclusions can be drawn:

- **Taxation and pricing policies** – with the exception of a few countries, taxation measures have not been implemented in a way that reduces affordability, which directly affects alcohol consumption among youth. A key element of fiscal policy is excise duties on alcoholic beverages, although some countries also apply minimum pricing measures. EU excise policy is defined through two directives: Directive **92/83/EEC**, supplemented by Directive **2020/1151**, applicable since 2022, outlines the structure of excise duties, categories of alcohol and alcoholic beverages subject to taxation, and the method of calculating excise burdens. Directive **92/84/EEC** sets the minimum rates that must be applied across EU countries, while allowing member states to apply higher rates. This directive is currently under evaluation. According to the directive, current excise rates by product category are:
 - Beer – €0,748 per hectolitre per degree “Plato” or €1.87 per hectolitre per percentage of alcohol strength;
 - Wine – zero rate;
 - Intermediate products (e.g., Port or Sherry) – €45 per hectolitre of product;
 - Spirits – €550 per hectolitre of pure alcohol.

¹⁵ World Health Organization Regional Office for Europe. (2020a). *Policy in action: A tool for measuring alcohol policy implementation*. <https://www.who.int/publications/i/item/10665-336159>

In principle, two types of excise duties may be applied to alcoholic beverages: specific excise duties and ad valorem excise duties. Specific excise duties are based on either the alcohol content or the volume of the product. Research indicates greater effectiveness for alcohol-content-based specific duties, as they reduce price gaps between products of different quality, thereby discouraging a shift to cheaper drinks. The second type—volume-based specific duties—is considered easier to administer but tends to incentivize producers to increase alcohol content in response to higher taxes. Ad valorem excise duties are less common in European practice. They are based on product price and are considered less effective due to the ease with which producers can adjust price, quality, and alcohol concentration in response to tax increases.

According to data from a WHO study¹⁶ analysing tax policy and the affordability of alcoholic beverages using 2022 figures, most countries apply excise policies to beer and spirits, while 14 countries apply a zero rate to wine. In taxing spirits, EU countries generally rely on specific excise duties based on alcohol content. Beer is also predominantly taxed according to this principle, although several countries (e.g., the Netherlands, Norway, and Portugal) use an alternative type of excise based on product volume. For wine, with the exception of Iceland and Norway—which apply excise based on alcohol content—other countries either use volume-based excise or apply a zero rate. Serbia has aligned its excise policy with EU recommendations: excise on beer is calculated using a specific rate based on volume (per litre), while excise on spirits is determined according to the alcohol content.

Regarding the level of excise and tax burden, as previously noted, most EU countries have not implemented taxation policies in a way that discourages consumption by reducing affordability. Spirits and beer bear the highest tax burdens. In 2022, the combined tax and excise burden on spirits averaged 51% and 33%, respectively, of the total retail price across the EU, while beer and wine were subject to a combined burden of 29% (with 11% from excise) and 22% (with 4% from excise), respectively. In Serbia, there are no official comparable data on the share of taxes and excise duties in the average price of alcoholic beverages. According to 2023 EUROSTAT data,¹⁷ which show the relative price of alcohol in EU countries (EU = 100), adjusted for purchasing power index, Serbia ranks among the moderately affordable countries (Table 1).

¹⁶ World Health Organization - Regional Office for Europe. (2025). *Alcohol taxes, prices and affordability in the WHO European Region in 2022*. <https://www.who.int/europe/publications/i/item/9789289061940>

¹⁷ Eurostat. (2023). *Comparative price levels of consumer goods and services*. European Commission. https://ec.europa.eu/eurostat/statistics-explained/index.php?title=Comparative_price_levels_of_consumer_goods_and_services

Table 1. Price index of food, beverages, and tobacco products by EU country for the year 2023

Country	HFCE	Food	Non-alcoholic beverages	Alcoholic beverages	Tobacco
Switzerland	173,7	159,8	139,2	157,0	135,4
Iceland	157,5	142,3	129,3	286,8	181,1
Denmark	145,1	121,5	134,6	128,9	129,0
Ireland	137,1	111,3	140,2	204,8	259,7
Luxembourg	134,0	125,4	120,6	104,5	84,0
Finland	124,4	110,9	127,0	213,3	156,6
Norway	124,2	128,4	141,9	232,8	214,6
Belgium	117,4	103,6	109,1	117,0	128,3
Netherlands	117,0	97,4	121,9	101,4	129,2
Sweden	114,3	106,7	106,5	146,0	102,8
France	112,2	110,9	97,7	102,8	192,7
Austria	111,7	111,2	104,8	89,1	92,3
Germany	108,5	103,4	102,2	86,6	116,6
EA20	104,6	103,2	100,1	98,5	107,5
Estonia	100,9	106,4	114,8	136,5	82,0
Italy	97,8	103,7	82,0	85,7	87,3
Cyprus	93,0	103,8	104,8	120,5	73,7
Czechia	92,7	96,6	95,6	97,0	97,0
Spain	91,4	94,3	101,6	91,6	81,5
Malta	91,0	108,4	127,1	128,9	86,5
Slovenia	89,5	99,4	105,9	108,9	74,2
Portugal	86,7	102,1	116,3	113,5	87,3
Greece	85,7	102,5	112,8	154,4	72,7
Slovakia	83,8	81,6	89,5	90,4	77,6
Lithuania	82,1	101,6	126,9	124,5	78,5
Latvia	82,0	104,2	128,1	135,6	79,4
Croatia	74,7	98,7	128,9	120,4	68,6
Hungary	73,9	98,1	104,2	98,8	83,0
Poland	67,4	81,4	92,7	99,4	61,4
Serbia	65,3	93,8	102,2	108,6	51,6
Albania	65,2	91,9	115,2	143,9	43,9
Montenegro	62,1	82,1	105,7	123,8	43,6
Romania	61,1	74,3	85,9	92,6	84,7
Bulgaria	59,2	86,8	107,8	107,4	49,1
Bosnia and Herzegovina	58,0	84,9	91,9	89,5	50,4
North Macedonia	54,0	72,5	81,4	97,4	37,1
Turkey	43,4	70,8	83,1	187,3	24,1

Country	HFCE	Food	Non-alcoholic beverages	Alcoholic beverages	Tobacco
Coefficient of variation					
EA20	17,6	8,0	12,6	28,8	44,1

Note: Countries are arranged according to the overall price level for household final consumption, as shown in the first column. Shaded cells indicate the highest and lowest Price Level Indices (PLIs) among all 36 participants. The highest and lowest PLIs for each product group among the 27 EU Member States are indicated in **bold**.

Source: Eurostat (online database code: prc_ppp_ind)

According to most available independent studies,¹⁸¹⁹ tax policy plays a key role in discouraging alcohol consumption and thereby avoiding negative consequences for individuals and society. A WHO study examining countries with low tax burdens—such as Georgia, Germany, and Portugal—confirmed that implementing more aggressive tax policies (e.g., increasing the tax share by 10 percentage points or simulating a 10% price increase) leads to significant public health outcomes, including reduced morbidity and mortality rates, as well as increased tax revenues. A 10% increase in retail prices, combined with previously established demand elasticity of around -0.4, would result in approximately a 4% reduction in consumption, depending on country-specific factors such as cultural norms and attitudes toward alcohol, consumer preferences for specific products, levels of illicit consumption, and non-price measures. Among low-income populations, stronger taxation would particularly benefit younger individuals, as lower affordability affects the timing of initiation and the availability of alcohol to youth.

In addition to taxation, another pricing policy measure has increasingly attracted attention in recent years—**minimum pricing** for certain alcoholic beverages. This measure aims to discourage the consumption of the cheapest alcoholic drinks, which are typically consumed by individuals with lower income and those experiencing alcohol dependency. Unlike taxes, this measure does not lead to increased fiscal revenues but instead results in higher profits for producers. It also affects the sale of alcoholic beverages outside on-premises establishments (e.g., bars). The measure can be applied in two ways. The first involves setting a minimum price per product, while the second sets a minimum price per unit of alcohol, aiming to reduce the sale of higher-alcohol-content beverages. Among European countries, Ireland, Scotland, and Wales apply this measure by establishing a minimum price per unit of alcohol across all alcoholic beverages. After its implementation in Scotland, alcohol prices rose by approximately 7.9% on average. Outside Europe, Canada also applies minimum pricing measures. Stockwell et al. (2012)²⁰ found that introducing this pricing

¹⁸ Guindon, G. E., Zhao, K., Fatima, T., Garasia, S., Quinn, N., Baskerville, N. B., et al. (2022). Prices, taxes and alcohol use: A systematic umbrella review. *Addiction*, 117(12), 3004–3023. <https://doi.org/10.1111/add.15966>

¹⁹ Manthey, J., Gobiņa, I., Isajeva, L., Neneman, J., Reile, R., Štelemėkas, M., et al. (2024). The impact of raising alcohol taxes on government tax revenue: Insights from five European countries. *Applied Health Economics and Health Policy*, 22(3), 363–374. <https://doi.org/10.1007/s40258-024-00873-5>

²⁰ Stockwell, T., Zhao, J., Giesbrecht, N., et al. (2012). The raising of minimum alcohol prices in Saskatchewan, Canada: Impacts on consumption and implications for public health. *American Journal of Public Health*, 102, e103–e110.

policy had positive effects, including reduced consumption, fewer alcohol-related deaths, and lower hospital admissions due to alcohol use.

Availability – In line with WHO recommendations, the majority of EU countries apply various measures to physically restrict alcohol sales. These measures are primarily aimed at preventing the industry from making alcohol appealing through sales during specific occasions (e.g., sports or music events) or to targeted groups (e.g., youth). A range of different measures are implemented across countries; however, overall progress in this area has remained relatively unchanged over the past decade.²¹ The most commonly used measures include prohibiting alcohol sales to minors, banning sales at events attended by children and adolescents, restricting sales within specific time intervals, prohibiting the sale of spirits at various cultural and sporting events, and banning sales near locations frequented by children, among others. Lithuania is frequently cited as an example of good practice in this context. Faced with the issue of excessive alcohol consumption, the country raised the legal age for alcohol purchase from 18 to 20, and limited off-premise sales to the time interval between 10 a.m. and 8 p.m. from Monday to Saturday, and from 10 a.m. to 3 p.m. on Sundays.²² Slovenia has restricted the sale of beverages with an alcohol content higher than 15% at sporting events, starting one hour before and continuing throughout the duration of the event.²³ The implementation of sales restriction measures is becoming increasingly challenging due to the rise of e-commerce.²⁴ Therefore, policymakers, considering this trend, should actively work to discourage this form of consumption as much as possible. Restricting alcohol sales is an essential measure for protecting youth, as confirmed by numerous studies which, among other findings, show that raising the legal age limit undeniably reduces consumption among individuals below that threshold,²⁵ and, according to some authors, also leads to a decrease in consumption across the entire population.²⁶ Additionally, the density of retail outlets and their proximity to locations where young people spend their time is directly linked to the frequency of excessive drinking.²⁷ Nevertheless, although many countries—including Serbia—have adopted measures to restrict availability, ensuring their enforcement remains a major challenge and a critical factor in their effectiveness.²⁸ Therefore, alongside the adoption of appropriate measures, it is necessary to

²¹ Berdzuli, N., Ferreira-Borges, C., Gual, A., & Rehm, J. (2020). Alcohol control policy in Europe: Overview and exemplary countries. *International Journal of Environmental Research and Public Health*, 17(21), 8162.

²² Rehm, J., Anderson, P., Manthey, J., Shield, K. D., Struzzo, P., Wojnar, M., & Gual, A. (2016). Alcohol use disorders in primary health care: What do we know and where do we go? *Alcohol and Alcoholism*, 51, 422–427.

²³ Berdzuli, N., Ferreira-Borges, C., Gual, A., & Rehm, J. (2020). Alcohol control policy in Europe: Overview and exemplary countries. *International Journal of Environmental Research and Public Health*, 17(21), 8162.

²⁴ Pellechia, T. (2020). Online alcohol sales grew in 2019, yet all is not rosy. *Forbes*.

²⁵ Wagenaar, A. C., & Toomey, T. L. (2002). Effects of minimum drinking age laws: Review and analyses of the literature from 1960 to 2000. *Journal of Studies on Alcohol, Supplement*(14), 206–225.

²⁶ Subbaraman, M., & Kerr, W. (2013). State panel estimates of the effects of the minimum legal drinking age on alcohol consumption, 1950–2002. *Alcohol: Clinical and Experimental Research*, 37, e291–6.

²⁷ Young, R., Macdonald, L., & Ellaway, A. (2013). Associations between proximity and density of local alcohol outlets and alcohol use among Scottish adolescents. *Health & Place*, 19(1), 124–130. <https://doi.org/10.1016/j.healthplace.2012.10.003>

²⁸ Paschall, M. J., Grube, J. W., Thomas, S., Cannon, C., & Treffers, R. (2012). Relationships between local enforcement, alcohol availability, drinking norms, and adolescent alcohol use in 50 California cities. *Journal of Studies on Alcohol and Drugs*, 73(4), 657–665.

simultaneously strengthen institutional control capacities, raise awareness among other stakeholders responsible for implementation, and prescribe strict penalties for violations.

- **Restriction of marketing and advertising** – In most countries, various types of restrictions on the marketing of alcoholic beverages are applied. These include, among others, prohibiting the display of advertisements during programming intended for children and adolescents, banning portrayals of alcoholic beverages in a positive context, prohibiting advertising at events attended by minors, restricting advertisements for beverages with alcohol content above a certain threshold, and requiring consumer warnings about negative effects. Minors are particularly vulnerable to alcohol-related marketing campaigns, which can lead to a range of adverse outcomes including health, educational, career, social, and family-related consequences.²⁹ Numerous studies show that young people exposed to alcohol industry marketing tend to initiate consumption at an earlier age, develop more positive attitudes toward drinking, and engage in higher levels of alcohol use.³⁰ Marketing campaigns are conducted through various techniques using all available media—including events, points of sale, traditional electronic media (television, radio), and modern electronic media (e.g., social networks). Zhang (2012) notes that a young person in China who watches television for two hours in the evening on a daily basis is exposed to an average of 900 alcohol advertisements per year.³¹ Similarly, a study involving youth in New Zealand identified that positive attitudes held by 18-year-olds toward alcohol advertisements were a strong predictor of beer consumption three years later.³² The internet and social media pose a particular challenge when it comes to restricting advertising, as governments struggle to keep pace with technological changes in digital media—unlike the industry, internet service providers, and marketing agencies. Nevertheless, mere exposure to advertisements has a smaller impact on later risky behaviours compared to direct interaction stemming from that exposure, such as sharing content, commenting, responding to questions, and similar engagement activities.³³ In general, Berdzuli (2020)³⁴ notes that progress in this segment of control policies remains unsatisfactory in most EU countries,

²⁹ McCreanor, T., Lyons, A., Griffin, C., Goodwin, I., Barnes, H. M., & Hutton, F. (2013). Youth drinking cultures, social networking and alcohol marketing: Implications for public health. *Critical Public Health*, 23(1), 110–120.

³⁰ Jernigan, D. H. (2010). The extent of global alcohol marketing and its impact on youth. *Contemporary Drug Problems*, 37(1), 57–89.

³¹ Zhang J. (2012). Alcohol advertising in China. In *Non-government Organization Meeting on Alcohol Policy, 24 September 2004, Auckland, New Zealand*. Auckland: Asia Pacific Alcohol Policy Alliance

³² Wyllie, A., Zhang, J. F., & Casswell, S. (1998). Positive responses to televised beer advertisements associated with drinking and problems reported by 18- to 29-year-olds. *Addiction*, 93(5), 749–760.

³³ McCreanor, T., Moewaka Barnes, A., Goodwin, I., Carah, N., Young, J., Spicer, J., & Lyons, A. C. (2025). Alcohol marketing on social media: young people's exposure, engagement and alcohol-related behaviors. *Addiction Research & Theory*, 33(3), 161-171.

³⁴ Berdzuli, N., Ferreira-Borges, C., Gual, A., & Rehm, J. (2020). Alcohol control policy in Europe: Overview and exemplary countries. *International journal of environmental research and public health*, 17(21), 8162.

particularly with regard to social media, where advertising bans are more easily circumvented.

- **Measures targeting high-risk groups** – individuals prone to excessive consumption. Unlike other aspects of alcohol control, EU countries demonstrate stronger outcomes in addressing issues faced by those struggling with heavy drinking and its consequence.³⁵ In this regard, screening, brief interventions, and treatment for alcohol dependence are particularly noteworthy, although certain challenges remain concerning the integration of these support measures into primary healthcare.³⁶
- **Measures targeting the broader environment (education, control of illicit consumption, etc.)** – These measures owe their popularity to the fact that, unlike taxation for example, they face little direct opposition.³⁷ Educating youth about the harms of alcohol and controlling illicit consumption contribute to the perception that state institutions are acting in the interest of society. These measures are sometimes directed at specific target groups with the aim of behaviour change and treatment of consequences (e.g., individuals with alcohol dependence) or prevention (e.g., minors). However, there is a risk that industry involvement in implementing these measures could compromise their legitimacy, potentially reduce their effectiveness, and create a perception of alcoholic beverage producers as socially responsible actors.

Analysis of good practices indicates that the greatest effectiveness is achieved through the combined application of all available measures, with particular emphasis on the WHO's so-called "best buy" interventions. In this context, Lithuania is frequently cited as a country that successfully reduced alcohol consumption—including among youth—within a relatively short period. During 2017–18, Lithuania implemented the following policies within less than a year: an excise tax increase on beer and wine of more than 100%, which corresponded with price hikes of 29% and 1%, respectively; an excise increase on ethyl alcohol of more than 20%, resulting in a 14% price increase for Lithuanian vodka; a legal age increase for purchasing and consuming alcohol from 18 to 20 years, accompanied by stricter enforcement rules; and a complete advertising ban on television, radio, and the internet.³⁸ In 2017, all-cause mortality across both sexes and all age groups declined by 4.8%, exceeding expected secular trends.³⁹

³⁵ World Health Organization Regional Office for Europe. (2020a). *Policy in Action: A Tool for Measuring Alcohol Policy Implementation*. <https://iris.who.int/handle/10665/349924>

³⁶ Rehm, J., Anderson, P., Manthey, J., Shield, K. D., Struzzo, P., Wojnar, M., & Gual, A. (2016). Alcohol use disorders in primary health care: What do we know and where do we go? *Alcohol and Alcoholism*, 51(4), 422–427.

³⁷ Berdzuli, N., Ferreira-Borges, C., Gual, A., & Rehm, J. (2020). Alcohol control policy in Europe: Overview and exemplary countries. *International journal of environmental research and public health*, 17(21), 8162

³⁸ Ibid.

³⁹ Štelemėkas, M., Manthey, J., et al. (2021). Alcohol control policy measures and all-cause mortality in Lithuania: An interrupted time-series analysis. *Addiction*, 116(10), 2673–2684. <https://doi.org/10.1111/add.15470>

In early July of this year, the WHO will launch a new initiative titled “3 by 35” as part of its ongoing efforts to combat noncommunicable diseases.⁴⁰ This initiative continues support for member states in implementing policies of increased taxation on tobacco products, alcohol, and sugar-sweetened beverages, recognized as the most effective available control measures—particularly in the context of rising public debt and limited access to international financing sources. Through direct support to governments in developing policies aimed at reducing consumption of harmful products, generating additional revenue for public health and development programs, and strengthening political backing for these efforts, the WHO contributes to the achievement of sustainable development goals. The initiative is expected to generate an additional 1 trillion USD over the next ten years, thereby creating significant fiscal space for preventive measures and addressing the consequences of excessive consumption—funded by industry and consumers.

Based on the conducted analysis, it can be concluded that combating alcohol consumption among youth, as part of control policies targeting the general population, is highly complex and requires collaboration among a wide range of institutions. In addition to population-wide measures, legal provisions specifically aimed at youth include restricting access to alcoholic beverages through the establishment and enforcement of minimum legal age limits for alcohol consumption, as well as limiting the density and operating hours of retail outlets. Beyond legislative measures, additional interventions—many of which can be implemented at the local level—comprise brief interventions and treatment programs that can prevent or reduce alcohol use among high-risk populations, educational initiatives, and broader public campaigns. Such measures also include those targeting the reduction of drunk driving, such as “zero tolerance” policies and random testing, which help lower the incidence of traffic accidents.⁴¹

4. Alcohol-related harm

Alcoholism, as the most prevalent form of substance dependency, is associated with numerous serious consequences that significantly impact individual health. Among the most critical adverse outcomes are an increased risk of traffic and other accidents, violence, family conflicts, as well as the development of chronic diseases, including liver conditions and cardiovascular disorders. Although some research suggests that moderate alcohol consumption may be linked to a reduced risk of certain health

⁴⁰ World Health Organization. (2025, July 2). *WHO launches bold push to raise health taxes and save millions of lives*. <https://www.who.int/news/item/02-07-2025-who-launches-bold-push-to-raise-health-taxes-and-save-millions-of-lives>

⁴¹ World Health Organization. (2015). *Young people and alcohol: A resource book*. WHO Regional Office for the Western Pacific. <https://iris.who.int/handle/10665/208202>

problems,^{42 43} frequent and higher alcohol intake substantially increases the likelihood of illness. Nevertheless, the official position of the WHO, based on a large body of complex and methodologically sound research, is that there is no safe level of alcohol consumption—each intake carries a certain degree of risk.⁴⁴ Particularly concerning are numerous scientific findings that confirm a causal link between alcohol consumption and the development of specific types of cancer, such as cancers of the larynx, oesophagus, liver, colon, rectum, and breast.⁴⁵ It is important to emphasize that these risks are significantly higher in women compared to men, which further underscores the need for targeted public health interventions and preventive measures.⁴⁶

According to WHO data (2024), approximately 400 million people globally, or 7% of the world population aged 15 and older, live with alcohol-related disorders, while 209 million (3.7% of adults) are dependent on the substance. In 2019 alone, harmful alcohol use led to 2.6 million deaths worldwide. Particularly alarming is the fact that young people are the most affected—in the 20 to 39 age group, as many as 13% of all deaths were directly linked to alcohol abuse.⁴⁷

Global data take on added significance when viewed in the context of Serbia, where alcohol consumption is deeply rooted in tradition, customs, and everyday life. As a result, alcohol use is often not perceived as risky behaviour, but rather as a socially acceptable norm. This cultural standard further complicates the distinction between moderate and harmful alcohol use, thereby increasing the risk of normalizing the issue—particularly among young people.

According to WHO (2024), alcohol consumption in Serbia ranks among the highest in the region, with particularly high rates reported among men. Even more concerning is the increasing exposure of young people to alcohol influences and their growing participation in patterns of regular use. The 2023 study on the status and needs of youth in the Republic of Serbia⁴⁸ revealed that approximately 70% of individuals aged 15 to 30 consume alcohol. Especially alarming are the frequent early initiation of alcohol use and episodic heavy drinking, which begin as early as high school age.

⁴² O'Keefe, J. H., Bhatti, S. K., Bajwa, A., DiNicolantonio, J. J., & Lavie, C. J. (2014, March). Alcohol and cardiovascular health: The dose makes the poison... or the remedy. *Mayo Clinic Proceedings*, 89(3), 382–393. Elsevier.

⁴³ Stockwell, T., Zhao, J., Panwar, S., Roemer, A., Naimi, T., & Chikritzhs, T. (2016). Do “moderate” drinkers have reduced mortality risk? A systematic review and meta-analysis of alcohol consumption and all-cause mortality. *Journal of Studies on Alcohol and Drugs*, 77(2), 185–198.

⁴⁴ World Health Organization. (2023, January 4). *No level of alcohol consumption is safe for our health*. <https://www.who.int/europe/news/item/04-01-2023-no-level-of-alcohol-consumption-is-safe-for-our-health>

⁴⁵ Roerecke, M., & Rehm, J. (2014). Alcohol consumption, drinking patterns, and ischemic heart disease: a narrative review of meta-analyses and a systematic review and meta-analysis of the impact of heavy drinking occasions on risk for moderate drinkers. *BMC Medicine*, 12, 182. <https://doi.org/10.1186/s12916-014-0182-6>

⁴⁶ Marinković, I. (2020). Estimates of alcohol-related mortality in Serbia (2016-2018). *Stanovništvo*, 58(1), 89–111. <https://doi.org/10.2298/STNV2001089M>

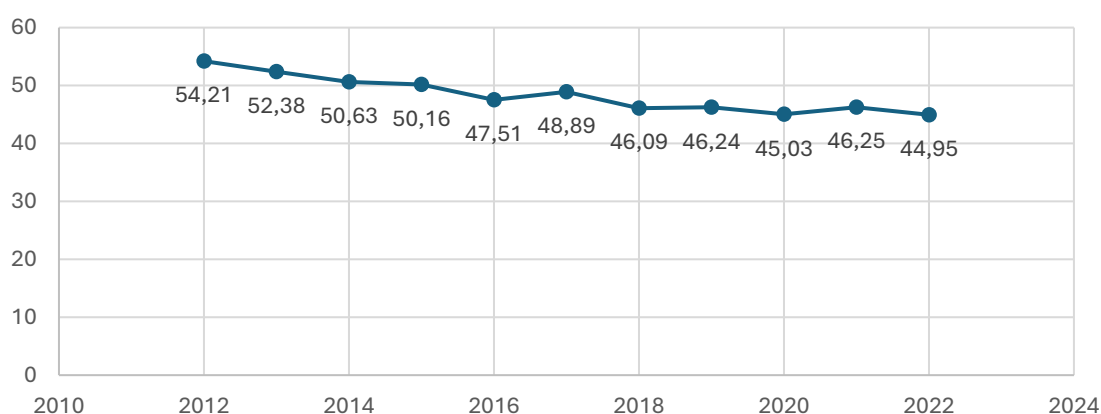
⁴⁷ World Health Organisation. (2024). *Alcohol. Fact sheet*. WHO. <https://www.who.int/news-room/fact-sheets/detail/alcohol>

⁴⁸ Ministry of Trade of the Republic of Serbia. (2024). *Research on consumer attitudes and habits related to alcohol consumption*. <https://mto.gov.rs/extfile/sr/7971/Istrazivanje112024.pdf>

Data from 2024 indicate that as many as 57% of children aged 15 to 16 drink alcohol, with minimal differences in prevalence between boys and girls. Compared to 2011, there has been a 5% increase⁴⁹—clearly signalling a worsening trend and an urgent need for well-designed preventive policies focused on youth protection.

Alcohol represents a significant public health risk factor and is estimated to be responsible for 3.2% of total mortality within Serbia’s population, regardless of the immediate cause of death. The chart below illustrates the trend in alcohol-related mortality rates in Serbia between 2012 and 2022, expressed per 100,000 inhabitants. Over the observed period, a gradual decline was noted—from 54.21 cases per 100,000 inhabitants in 2012 to 44.95 in 2022, marking an overall reduction of approximately 10 percentage points. The most pronounced decrease was recorded during the first half of the decade (2012–2016), while the year 2022 reflects the lowest value within the analysed period, confirming a general downward trend.

Figure 1 Mortality rate due to alcohol-related causes per 100,000 inhabitants, Republic of Serbia



Source: WHO⁵⁰

Such changes may indicate increased effectiveness of public health interventions, shifts in patterns of alcohol consumption, and the broader influence of social and health-related factors. Nevertheless, despite the decline in alcohol-related mortality rates, the levels remain high compared to more developed countries—highlighting the ongoing need to improve preventive measures and policies aimed at safeguarding public health.

Table 2. Health consequences of alcohol consumption

Indicator	Total	Men	Women
Alcohol-attributable mortality (%)	3,2	5,6	0,8

⁴⁹ European Union Drugs Agency. (2024). ESPAD 2024 key findings. https://www.euda.europa.eu/publications/data-factsheets/espac-2024-key-findings_en

⁵⁰ World Health Organization Regional Office for Europe. SDR, selected alcohol-related causes, per 100 000. European Health Information Gateway. https://gateway.euro.who.int/en/indicators/hfa_475-5060-sdr-selected-alcohol-related-causes-per-100-000/

Number of alcohol-attributable deaths	3.703	3.259	443
Number of alcohol-induced deaths per 100,000 inhabitants	25,5	48,1	6,4
Share of alcohol-attributable deaths in total years of life lost due to disease, disability, or premature death	5,0	7,9	1,9
Total years of life lost due to disease, disability, or premature death attributable to alcohol	162.902	133.723	29.179

Source: WHO

Beyond mortality rates, an additional dimension of the problem is revealed through data on the total loss of healthy life years, clearly demonstrating the long-term consequences of harmful alcohol use on the health of Serbia's population. Alcohol is responsible for 5% of all healthy life years lost in Serbia, with the share among men being nearly four times higher (7.9%) than among women (1.9%). In absolute numbers, a total of 162,902 healthy life years are lost annually due to excessive alcohol use, with over 82% of this figure attributed to men (133,723 years).⁵¹

Harmful alcohol use, even when it does not escalate into dependency, has serious consequences for society as a whole. According to data from the Poison Control Centre at the Military Medical Academy (VMA) in Belgrade for 2023, acute alcohol intoxication (ethanol poisoning) was the leading cause for patient admissions. A total of 2,785 visits were recorded due to this type of poisoning, accounting for 54.1% of all cases. This phenomenon disproportionately affects men, who made up 2,117 cases (76.1%), compared to 668 cases among women (23.9%). The age group most represented was 41 to 65 years, with 1,105 patients (39.6%), while the number of intoxicated minors was 280—constituting 10% of all alcohol-related cases.⁵²

In cases of alcohol poisoning, a very small percentage of patients required hospitalization. According to available data, only 0.1% of individuals with alcohol intoxication were hospitalized. This indicates that most of these conditions could be successfully managed through outpatient observation and symptomatic treatment without the need for extended inpatient care.

In 2023, the Department of Toxicological Chemistry at the Poison Control Centre of the Military Medical Academy conducted a total of 17,733 toxicological analyses. Alcohol was identified as the causative agent in 27.8% of all analysed samples, highlighting its high prevalence. Analyses were requested by various organizational units of the Military Medical Academy, members of the Serbian Armed Forces, numerous civilian institutions, as well as through individual citizen requests.

These figures take on added gravity when viewed in the context of specific public safety risks—among which driving under the influence of alcohol stands out as a

⁵¹ World Health Organization. (2024). *Global status report on alcohol and health and treatment of substance use disorders*. World Health Organization. <https://www.who.int/publications/i/item/9789240083616>

⁵² Military Medical Academy, Poison Control Center. (2023). *Annual report of the Poison Control Center*. <http://www.vma.mod.gov.rs/godisnjak-ckt-2023.pdf>

particularly serious issue, with long-term consequences for the health and safety of the population. According to data from the Ministry of Interior of Serbia, during 2024, drivers under the influence of alcohol caused 3,336 traffic accidents, resulting in 83 deaths, 553 serious injuries, and 1,779 minor injuries.⁵³ However, the real consequences of such accidents go far beyond the numbers. They do not stop at the direct victims, but also affect their families and the broader community. Prolonged and costly treatment of the injured, absence from work, loss of income, reduced work capacity and productivity are just some of the effects that create a significant economic burden. At the same time, pressure on the healthcare and social systems increases, while the consequences for family relationships and social bonds are often profound and long-lasting. Among individuals who frequently consume alcohol, problems with emotional stability may arise, including irritability, nervousness, unexplained mood swings, sadness, and lack of motivation. Excessive drinking is often associated with aggressive behaviour, such as theft, fighting, and other criminal acts.

4.1. Economic cost of alcohol consumption

Alcohol consumption represents a significant economic burden at the global level, as confirmed by numerous studies.⁵⁴ The level of alcohol consumption in a country serves as an important indicator of public health status, since morbidity and mortality rates related to alcohol generally increase as overall consumption rises and decrease when consumption declines.⁵⁵

Estimating the economic costs associated with alcohol consumption holds multiple layers of significance, as it is used to inform public policy development, plan interventions, and assess the cost-effectiveness of measures aimed at reducing the negative consequences of alcohol use. However, the evaluation of total alcohol-related costs is hindered by numerous methodological challenges, with the resulting figures varying depending on the methodology applied—more detailed analyses are provided later in the study.⁵⁶

The total economic costs associated with alcohol consumption can be expressed as either gross or net cost. Gross cost encompasses all negative consequences that alcohol has on society, whereas net cost also accounts for potential positive effects—such as tax revenues from alcohol or the contribution of the alcohol industry to

⁵³ Ministry of Internal Affairs of the Republic of Serbia. (2024). *Enhanced traffic control – alcohol and psychoactive substances [Pojačana kontrola saobraćaja – alkohol i psihoaktivne supstance]*. <https://www.mup.gov.rs/wps/portal/sr/aktuelno/saopstenja/38bfb805-35c2-4bba-b2b9-66c254ae1d96>

⁵⁴ Institute of Alcohol Studies. (2003). Alcohol misuse: How much does it cost? <https://www.ias.org.uk/uploads/pdf/Economic%20impacts%20docs/costi%20uk.pdf>

⁵⁵ Nastasić, A. (2011). *An economic approach to the problem of alcoholism [Ekonomski pristup problemu alkoholizma]*. Faculty of Political Sciences, University of Belgrade. <https://www.fpn.bg.ac.rs/wp-content/uploads/BZ-eko-pristup-alkhlzm-Nastasic-sent.pdf>

⁵⁶ Thavorncharoensap, M., Teerawattananon, Y., Yothasamut, J., Lertpitakpong, C., & Chaikledkaew, U. (2009). The economic impact of alcohol consumption: A systematic review. *Substance Abuse Treatment, Prevention, and Policy*, 4, Article 20. <https://doi.org/10.1186/1747-597X-4-20>

employment and the economy. These positive effects are then subtracted from the total amount to provide a more realistic picture of the costs. Several studies have already attempted to estimate the economic impact of alcohol consumption using various methodologies. Meta-analyses of these studies offer broader insight into the scale of the issue and help foster a deeper understanding of its complexity. To adequately assess the economic consequences of alcohol consumption, it is essential to clearly distinguish between private costs and benefits and those borne or experienced by the wider community, i.e., external effects.⁵⁷ This distinction is not merely theoretical but carries direct implications for shaping public policy, given that the state holds legitimacy to intervene only in areas where individual behaviour generates consequences for other people or the broader community. Private costs refer to the financial and non-financial expenses borne directly by the alcohol consumer. This category includes:

- Consumption of alcoholic beverages;
- Individual healthcare costs related to alcohol use;
- Increased health insurance premiums;
- Legal expenses in cases of offenses committed under the influence of alcohol.

On the other hand, the private benefits of alcohol consumption relate to personal and subjective experiences of the individual—primarily the feeling of pleasure, or the hedonistic effect, as well as perceived social advantages such as easier integration into social situations. From an economic theory perspective, the minimal value of these benefits can be estimated based on the price the consumer is willing to pay for a given quantity of alcohol, assuming rational behaviour and awareness of the cost-benefit relationship.

In contrast to private benefits, external costs arise when the consequences of alcohol consumption exceed individual responsibility and affect other people or society as a whole. These costs most commonly manifest through:

- Traffic accidents caused by driving under the influence of alcohol, which involve injuries, fatalities, and emergency service expenses;
- Violence and criminal behaviour committed while intoxicated;
- Increased use of public healthcare services funded by the state budget;
- Reduced workplace productivity, frequent sick leave, and overall decline in efficiency, affecting employers and colleagues.

Some authors also point to the existence of external benefits,⁵⁸ such as alcohol's role in fostering social and professional interaction, viewing it as a kind of social catalyst.

⁵⁷ Institute of Alcohol Studies. (2003). Alcohol misuse: How much does it cost? <https://www.ias.org.uk/uploads/pdf/Economic%20impacts%20docs/costi%20uk.pdf>

⁵⁸ Dunbar, R.I.M., Launay, J., Wlodarski, R. *et al.* Functional Benefits of (Modest) Alcohol Consumption. *Adaptive Human Behavior and Physiology* 3, 118–133 (2017). <https://doi.org/10.1007/s40750-016-0058-4>

However, such effects are difficult to measure and largely depend on subjective interpretation. Overall, there is virtually no relevant research that challenges the fact that—even if such benefits exist—their impact on the national economy is negligible compared to the harm resulting from alcohol use.

In the context of public health and economic policy, external costs hold a central position. While the importance of private costs and benefits is acknowledged, it is assumed that individuals already consider them when making decisions about alcohol consumption. In contrast, negative externalities represent a form of market failure, as their consequences extend beyond personal responsibility and impact the wider community. This is precisely why public interventions—such as alcohol consumption taxes, sales restrictions, or informational campaigns—aim to mitigate these adverse effects, similarly to environmental pollution regulation or protection against passive smoking.

According to available meta-studies that examined methodologically grounded research on the costs of alcohol consumption in various countries—and whose approach could be applied in Serbia—the following key findings emerge: the economic cost of alcohol consumption ranges from 0.45% to 5.44% of GDP.⁵⁹ Although highly significant and intuitively easier to comprehend, direct costs are, according to some authors, lower than productivity loss costs. For example, Manthey et al. (2021) report that productivity loss expenses account for more than 61% of total costs on average.⁶⁰ Although dependent on country-specific circumstances, consumption patterns, and healthcare system characteristics, direct healthcare costs are by no means negligible. According to OECD research, they account for an average of approximately 2.4% of total healthcare expenditures, with significantly higher proportions observed in certain countries.⁶¹

5. Role and characteristics of the alcohol industry in Serbia's economy

Serbia still lacks reliable estimates of the economic and other costs resulting from alcohol consumption. As part of the preparation for adopting a comprehensive strategy to control alcohol consumption in Serbia—with youth protection as one of its priorities—it is necessary to conduct a detailed cost-benefit analysis. This analysis should answer key questions regarding the economic, health, and overall societal

⁵⁹ Thavorncharoensap, M., Teerawattananon, Y., Yothasamut, J., Lertpitakpong, C., & Chaikledkaew, U. (2009). The economic impact of alcohol consumption: a systematic review. *Substance abuse treatment, prevention, and policy*, 4(1), 20.

⁶⁰ Manthey, J., Hassan, S. A., Carr, S., Kilian, C., Kuitunen-Paul, S., & Rehm, J. (2021). What are the economic costs to society attributable to alcohol use? A systematic review and modelling study. *Pharmacoeconomics*, 39(7), 809-822.

⁶¹ OECD (2021), Preventing Harmful Alcohol Use, OECD Health Policy Studies, OECD Publishing, Paris, <https://doi.org/10.1787/6e4b4ffb-en>.

consequences of the current situation. In this context, it is essential to assess total direct costs (e.g., healthcare costs, prevention costs, costs associated with crime, property loss or damage, administrative costs, social service expenditures, etc.), indirect costs (e.g., premature death, lost productivity, job loss, work incapacity, etc.), and intangible costs (e.g., decreased life satisfaction). Additionally, dedicated sectoral studies would help determine the extent to which alcohol consumption has influenced poorer outcomes related to education, career progression, and labour market positioning (opportunity cost), as well as rising rates of crime, various forms of violence, and traffic offenses.

The production of alcoholic beverages in the Republic of Serbia encompasses a range of interconnected sectors, including primary agricultural production, the food industry, and retail trade. Household-level data on alcohol consumption can serve as a starting point for analysing this sector. According to Eurostat data for 2023, household spending on alcoholic beverages in Serbia accounted for 1.5% of the gross domestic product (GDP), while such expenditures represented 2.4% of total household consumption.⁶² However, it is important to note that the cited data refer exclusively to household-level consumption and do not include alcohol intake occurring in hospitality venues. Taking this into account, it can be assumed that the actual financial impact of alcohol consumption on household budgets is significantly higher than reported.

This further supports the assumption that alcohol spending has a considerable effect on lowering quality of life by reducing the disposable budget for other essential goods such as food, hygiene products, education, travel, etc. The crowding-out effect at the household level contributes to a marked decline in living standards, a phenomenon already confirmed in the case of tobacco consumption in Serbia.⁶³

An important aspect of the analysis involves examining how this sector affects other economic activities and the labour market—an argument frequently used by the industry to challenge control policies, not only in Serbia but globally. The alcoholic beverage industry largely relies on agricultural production, with a significant portion of raw materials—such as grains, grapes, and various types of fruit—sourced domestically. However, this must not serve as an excuse to avoid a systematic approach to reducing consumption. Societal interest should be structured so that public health—especially the health of young people as the foundation of sustainable development—is prioritized first. Only thereafter should policymakers address specific interests related to mitigating potential negative effects of stricter control policies on industry, employment, and associated economic sectors, including agriculture. This approach is also predominant at the EU level, where relevant documents consistently prioritize public health within the broader framework of sustainable development.⁶⁴

⁶² Eurostat. (2025). *Household final consumption expenditure by purpose (COICOP 2018)* [Data set]. Eurostat. https://ec.europa.eu/eurostat/databrowser/view/nama_10_cp18_custom_17019593/default/table?lang=en

⁶³ Vladislavljevic, M., Zubović, J., Jovanovic, O., & Đukić, M. (2024). Crowding-out effect of tobacco consumption in Serbia. *Tobacco Control*, 33(Suppl 2), s88-s94.

⁶⁴ European Commission. (2021). Europe's Beating Cancer Plan. https://health.ec.europa.eu/system/files/2022-02/eu_cancer-plan_en_0.pdf

According to data from the Statistical Office of the Republic of Serbia (RZS), at the end of 2024, the manufacturing industry employed 21.5% of Serbia's total workforce. Beverage production accounted for 1.8% of total employment within the manufacturing sector. However, when focusing exclusively on the beverage production industry itself, it represents 37.4% of total employment within the broader beverage sector, employing a total of 3,256 individuals.⁶⁵

Table 3. Employment structure in the alcoholic beverage industry in Serbia, 2024

Category	# of employees	Share	Note
Total employment	2.319.535	100%	-
Manufacturing industry	497.939	21,5%	Share of manufacturing in total employment
Beverage production	8.717	1,8%	Share of beverage production within manufacturing
Alcoholic beverage production	3.256	37,4%	Share of alcoholic beverage production within beverage production

Source: Statistical Office of the Republic of Serbia

Within the alcoholic beverage production sector of the Republic of Serbia, the brewing industry stands out in particular. Led by major international companies, this branch relies on a tradition spanning more than three centuries and today represents one of the most systematically developed areas within the food processing sector. Data from publicly available financial reports issued by the Business Registers Agency for the three leading brewing companies in Serbia indicate a high level of market concentration, as these firms collectively control 97.5% of the domestic beer market.⁶⁶ *Heineken Serbia* holds the largest market share (35.6%) and reports the highest net profit, while *Carlsberg Serbia* and *Apatin Brewery* record slightly lower market shares, as shown in the table below.

Table 4. The power of major alcohol producers – leading brewing companies in Serbia

Company	# of employees	Business revenue (€)	Net profit (€)	Market share
Heineken Serbia	421	133.723.115	22.558.605	35,6%
Carlsberg Serbia	521	123.003.138	6.264.954	32,8%
Apatin Brewery	613	109.061.991	2.345.863	29,1%

Source: Serbian Business Registers Agency (APR)

⁶⁵ Statistical Office of the Republic of Serbia. (n.d.). *Alcoholic beverage consumption in households [Potrošnja alkoholnih pića u domaćinstvima] [Data].* Data Stat <https://data.stat.gov.rs/Home/Result/240203?languageCode=sr-Cyrl>

⁶⁶ Agency for Business Registers of the Republic of Serbia. (n.d.). *Search of financial report registrants [Pretraga evidencije obveznika finansijskih izveštaja].* <https://fin.apr.gov.rs/JavnaPretraga>

Based on the presented data, it is evident that the economic strength of the alcohol industry is considerable, with the current business environment, consumer demand, and relatively lenient control policies contributing to substantial profits. These high profits are also influenced by several other factors, notably the lower effective income tax rate compared to other markets, pronounced disparities in market shares that reduce competition, and the limited bargaining power of domestic retail chains. Despite the dominant position of major producers, recent years have seen growth in the number of small craft breweries, although their market share remains modest at around 2%.⁶⁷ In addition to the brewing industry, a significant segment of alcoholic beverage production in Serbia consists of the manufacture of strong alcoholic drinks. Since the implementation of producer registration under the Law on Strong Alcoholic Beverages ("Official Gazette of RS", No. 92/2015),⁶⁸ Serbia has recorded a substantial increase in the number of registered producers in this sector. According to data from the Ministry of Agriculture, Forestry and Water Management, a total of 687 producers of strong alcoholic beverages were registered by the end of 2024.⁶⁹

According to the Serbian Rakija Producers Association, as of the end of 2024, plum brandy (šljivovica) dominated fruit brandy production with a 60% share. It was followed by quince brandy (dunjevača) at 15%, apricot and pear brandy (kajsijevača and kruškovača) with 10% each, while other fruit brandies comprised the remaining 5%.⁷⁰ In addition to fruit brandies, strong alcoholic beverages such as brandy (vinjak), herbal spirits (travarica), liqueurs, gin, and other products represent a significant segment of production. Alongside registered producers, a notable number of individuals—primarily from the Rasina, Šumadija, Moravica, and Zlatibor districts—produce rakija for personal use, a long-standing tradition deeply rooted in rural communities. Traditionally, most rural households use their own orchards to produce rakija, the most widespread domestic fruit product. The wine sector is also showing positive trends. By the end of 2024, Serbia registered a total of 497 wine producers intended for the market. Among them, 112 wineries carry geographical origin labels, encompassing a total of 450 wines.⁷¹ The economic activity of the alcoholic beverage industry extends beyond the domestic market and represents a significant source of foreign currency inflow through exports. Internationally, Serbia is increasingly recognized not only as a beer producer but also as a producer of quality wines and rakija, contributing to the strengthening of the export base and the internationalization of domestic brands. According to data from the Statistical Office of the Republic of Serbia, in 2024 Serbia

⁶⁷ Agency for Business Registers of the Republic of Serbia. (n.d.). *Financial reports, Q2 2025 [Finansijski izveštaji II kvartal 2025] [Data]*. <https://fin.apr.gov.rs/JavnaPretraga>

⁶⁸ Law on Strong Alcoholic Beverages [Zakon o jakim alkoholnim pićima]. (2015). *Official Gazette of the Republic of Serbia, No. 92/2015*. Paragraf.rs. <https://www.paragraf.rs/propisi/zakon-o-jakim-alkoholnim-picima.html>

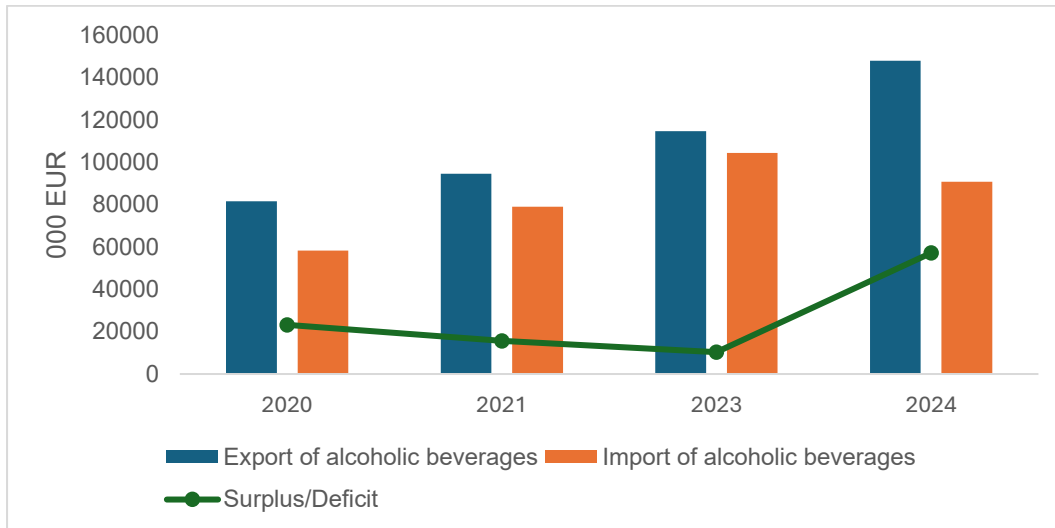
⁶⁹ Ministry of Agriculture, Forestry and Water Management of the Republic of Serbia. (n.d.). *List of registered active producers of strong alcoholic beverages [Spisak registrovanih aktivnih proizvođača jakih alkoholnih pića] [PDF]*. <https://www.minpolj.gov.rs/spisak-registrovanih-aktivnih-proizvodjaca-jakih-alkoholnih-pica/>

⁷⁰ Association of Rakija Producers of Serbia. (n.d.). *Official website of the Association of Rakija Producers of Serbia*. <https://savezrakija.rs/>

⁷¹ Chamber of Commerce and Industry of Serbia – Association for Plant Production and Food Industry, Group for Viticulture and Winemaking. (2025). *Belgrade: Chamber of Commerce and Industry of Serbia*.

exported alcoholic beverages worth €147,902.3 million, while imports amounted to €90,786.3 million,⁷² resulting in a substantial foreign trade surplus (Figure 2).

Figure 2 Foreign trade exchange of alcoholic beverages, 2020-2024., in 000 EUR

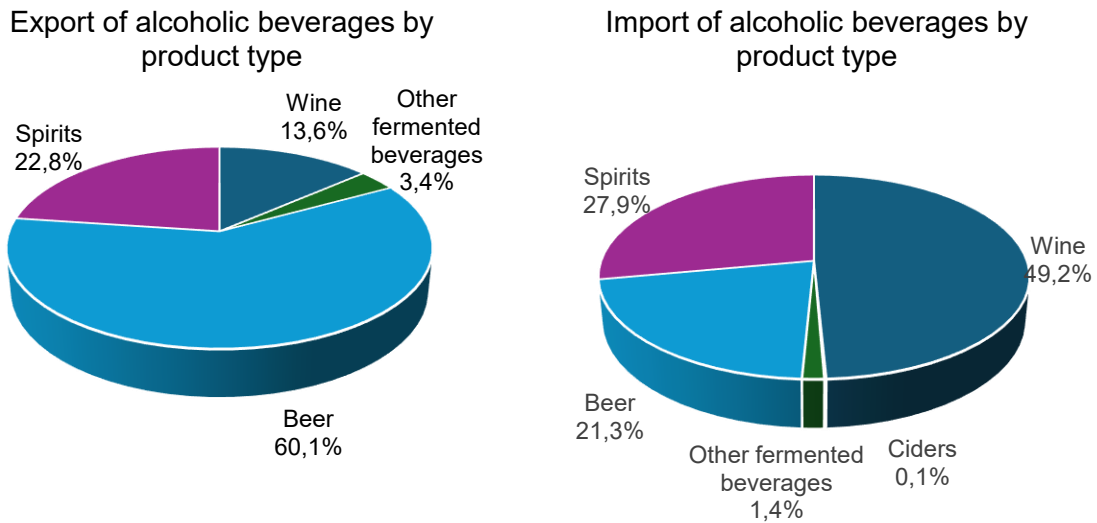


Source: Statistical Office of the Republic of Serbia

When viewed by product group, beer held the largest share of total alcoholic beverage exports from Serbia in 2024, at approximately 60%. It was followed by strong spirits (22.8%), wine (13.6%), and fermented beverages (3.4%). On the other hand, within the import structure, wine had the dominant share at 49.2%, while strong spirits accounted for 27.9% and beer 21.3%. Imports of fermented beverages were negligible, with a share of only 1.4% (Figure 3).

⁷² Statistical Office of the Republic of Serbia. (n.d.). *Export and import by commodity groups SMTK, rev. 4 [Data]*. <https://data.stat.gov.rs/Home/Result/170303?languageCode=sr-Cyrl>

Figure 3. Export and import of alcoholic beverages in Serbia



Source: Statistical Office of the Republic of Serbia

It is important to highlight that the aforementioned profitability and export performance enable the industry to conduct highly intensive marketing campaigns, which, in the absence of appropriate institutional restrictions, further influence consumer perceptions—including among youth. Funding activities aimed at creating the image of the alcoholic beverage industry as a responsible societal actor and its collaboration with state institutions pose a challenge to youth protection policies. This is particularly relevant regarding potential influence over taxation policy, reducing accessibility, and limiting marketing activities.

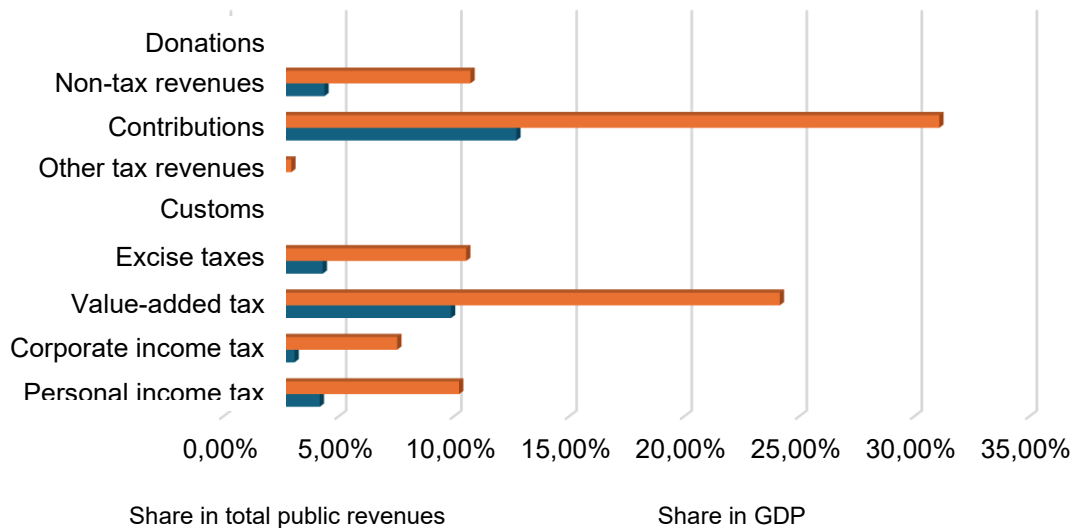
Within the analysis of the role of the alcohol industry in Serbia's economy, fiscal aspects—namely the revenues generated through excise duties on alcoholic beverages—hold a central position. Excise duties represent a key instrument of fiscal policy, not only contributing to public revenue but also serving a regulatory function in controlling consumption of products that may negatively impact public health. Including data on excise revenue supports a clearer understanding of the sector's position in Serbia's economy, thereby emphasizing the state's dual interest—as both a market regulator and a beneficiary of public income generated by the alcoholic beverage industry.

According to official data from the Ministry of Finance of the Republic of Serbia,⁷³ excise duties accounted for 4.3% of Serbia's Gross Domestic Product (GDP) in 2024, and 10.5% of total public revenues. These indicators suggest that although excise duties represent a stable source of income, their fiscal importance is not dominant within the structure of public finances. For instance, Value Added Tax (VAT) contributed 9.9% to GDP and 24.2% to total revenues, while social contributions

⁷³ Ministry of Finance of the Republic of Serbia. (2024). *Table: Overview of revenues by tax type – 2024 [Tabela: Pregled prihoda po vrstama poreza – 2024. godina] [Data file].* https://www.mfin.gov.rs/upload/media/sRpnaY_686ba59a24350.xlsx

remain by far the most significant budget source, comprising 12.7% of GDP and 31.1% of total revenues. Personal income tax (10.2%) and non-tax revenues (10.7%) hold a fiscal weight comparable to that of excise duties.

Figure 4. Structure of public revenues of the Republic of Serbia by share in GDP and total revenues, 2024



Source: Ministry of finance of the Republic of Serbia

Within total excise revenue, the most significant portion stems from excise duties on petroleum products, accounting for 54.1%. These are followed by excise duties on tobacco products, which contribute 34.0%. Together, these two categories generate as much as 88.1% of overall excise income.

In contrast, excise duties on alcoholic beverages make up 4.1% of total excise revenues, or just 0.4% of total public revenue. This figure highlights that, both in absolute and relative terms, alcoholic beverages are considerably less taxed and economically less significant for the budget when compared to energy and tobacco products. However, this also indicates substantial room for increasing alcohol excise rates in line with WHO recommendations. This reinforces the notion that although alcohol excise duties are not negligible, they currently do not represent a major fiscal instrument. For comparison, analyses of excise policy harmonization point to significant differences in the share of alcohol-related excise revenues among EU countries. In 2022, the EU generated approximately €30 billion from excise duties on alcoholic beverages,⁷⁴ while data from the European Commission presented by Movendi International indicate that over €100 billion in total tax revenues (across all tax categories) were collected at the EU level. In certain member states, these revenues constitute a significant share of public income—for example, in Bulgaria

⁷⁴ Karpavičiūtė, A., & Šapranavičienė, M. (2025). Harmonisation of excise duties on alcohol within the EU. In *Young Scientist, Conference/Jaunasis mokslininkas, konferencija* (pp. 32-37).

(6.2%) and Latvia (4.4%).⁷⁵ For example, in countries that apply stricter excise policies compared to Serbia, the share is significantly higher—as is the case in Finland, where excise duties on alcoholic beverages account for 1.5% of total public revenue.⁷⁶ Through a stricter excise policy, Lithuania significantly increased the share of these revenues in its budget. Budget execution data for Lithuania in 2021 show that excise duties on alcoholic beverages accounted for more than a quarter of total excise revenues, surpassing the volume of excise income from tobacco products.⁷⁷ Data for the period 2010–2019 show that the share of excise duties on alcoholic beverages varies significantly across EU countries. Some of the nations with the highest shares—such as Estonia, at 3.23%—generate 20 to 30 times more excise revenue from alcohol compared to Italy, which has the lowest share at just 0.15%.⁷⁸ Overall, the share of excise revenues from alcohol is significantly higher in the Baltic countries, Poland, the United Kingdom, Ireland, and Finland (ranging from 1.5% to 1.9% of total public revenue) compared to other nations. An overview of these data clearly shows there is considerable room for implementing a stricter excise policy in Serbia. However, developing an appropriate policy should also take into account consumption patterns by product type. It is noticeable that in countries characterized by wine production—primarily Mediterranean countries—the largest share of alcohol-related excise revenue comes from strong spirits. Looking at the average share of excise collected by beverage type in total alcohol excise revenue (2010–2018 average), two-thirds of countries had beer excise shares below 40%. In this respect, Serbia belongs to a group of countries such as Austria, Croatia, and Slovenia, where beer excise duties constitute the dominant portion of alcohol-related excise revenue. Given Serbia's relatively low level of alcohol excise revenue, there is substantial room to increase all excise rates—with a disproportionate increase in tax rates on strong spirits. Naturally, any excise reform should be preceded by a thorough analysis of product-specific consumption patterns and an assessment of price elasticity of demand across beverage types in order to carefully evaluate the degree and pace of tax increases, their budgetary impact, and the extent of consumption reduction.

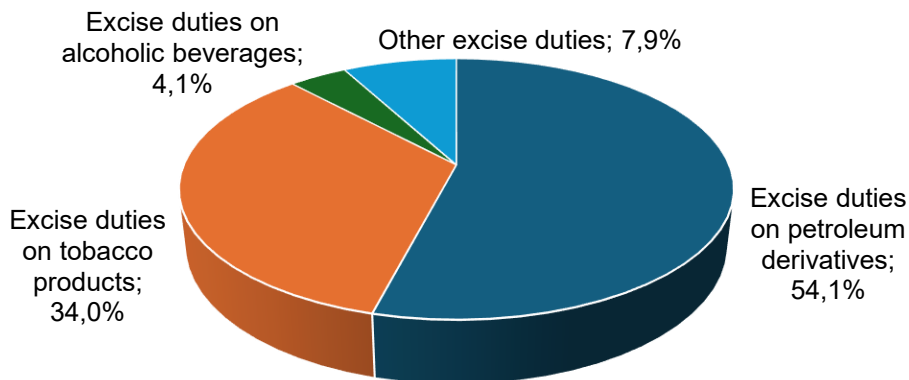
⁷⁵ Movendi International. (2024, October 17). *European Parliament reviews alcohol taxes*. Movendi International. <https://movendi.ngo/policy-updates/2024/10/17/european-parliament-reviews-alcohol-taxes/>

⁷⁶ Ibid.

⁷⁷ Ministry of Finance of the Republic of Lithuania. (2021). *Annual report 2021*. https://finmin.lrv.lt/public/canonical/1722402065/23266/2021_metai_EN_.pdf

⁷⁸ Nawrołska, I. (2023). Excise Tax on Alcohol—Fiscal or Non-Fiscal Objective?. *Optimum. Economic Studies*, 113(3), 46-64.

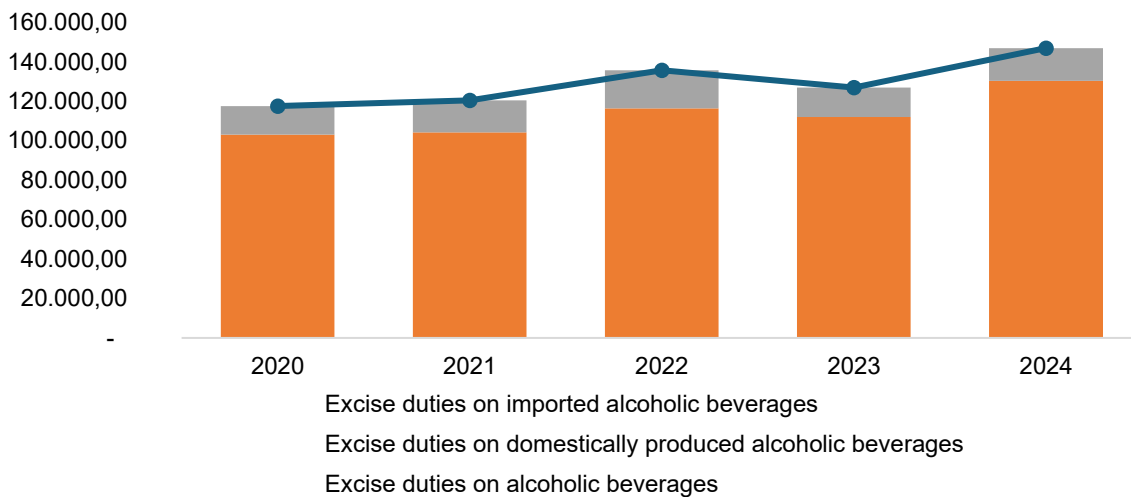
Figure 5. Structure of excise tax revenues in the Republic of Serbia, 2024.



Source: Ministry of finance of the Republic of Serbia

According to data from the Ministry of Finance, total gross excise revenue from alcoholic beverages in 2024 amounted to €146.9 million. Of this amount, 88.7% was generated from excise duties on domestically produced alcoholic beverages, while the remaining 11.3% came from excise duties on imported alcohol. Compared to 2020, total gross excise revenue increased by 25.0%, with an average annual growth rate of 6.1% during the analysed period.

Figure 6. Overview of excise duties on alcoholic beverages, 2020-2024, in 000 EUR



Source: Ministry of finance of the Republic of Serbia

Within the structure of excise duties on domestically produced alcoholic beverages in 2024, the largest share was held by beer and low-alcohol beverages with an alcohol content of 5% or higher, accounting for 82.2% of total excise collected. This was followed by other alcoholic beverages with a 5.1% share, while strong spirits and liqueurs contributed 4.7%. These figures indicate that beer and low-alcohol beverages represent the most significant segment of domestic alcohol production and consumption.

Table 5. Excise duties on domestically produced alcoholic beverages, 2020-2024, in 000 EUR

Excise duty	2020	2021	2022	2023	2024
Excise duty on beer, low-alcohol beverages containing beer (regardless of beer content), and low-alcohol beverages containing 5% or more Alcohol	88.467,4	87.946,6	97.665,6	92.549,7	107.088,9
Excise duty on natural Brandy and Cognac	3.191,8	4.231,7	4.731,5	4.306,0	4.849,6
Excise duty on low-alcohol beverages	696,8	1.049,0	1.237,9	1.125,9	22,4
Excise duty on strong alcoholic beverages and liqueurs	3.251,1	3.432,0	3.920,7	4.470,5	6.100,9
Excise duty on fruit, grape, and specialty brandies	2.560,2	3.113,2	3.908,5	3.125,0	4.467,5
Excise duty on brandies made from cereals and other agricultural raw materials	3,2	1,6	2,4	1,9	1,2
Excise duty on other alcoholic beverages	4.785,8	4.334,9	4.932,8	6.150,9	6.662,1
Excise duty on domestically produced low-alcohol beverages containing up to 5% alcohol	0,0	0,0	0,0	138,2	1.127,7

Source: Ministry of finance of the Republic of Serbia

Table 6. Excise duties on imported alcoholic beverages, 2020-2024, in 000 EUR

Excise duty	2020	2021	2022	2023	2024
Excise duty on imported beer, low-alcohol beverages containing beer (regardless of beer content), and low-alcohol beverages containing 5% or more alcohol	7.770,8	10.182,8	11.269,2	7.216,2	7.229,6
Excise duty on imported low-alcohol beverages	0,0	0,0	0,0	26,4	67,9
Excise duty on imported natural brandy and cognac	0,0	15,1	0,0	0,0	0,0
Excise duty on imported strong alcoholic beverages and liqueurs	2.479,5	5.054,9	8.005,3	7.710,3	9.070,1
Excise duty on imported whiskey, gin, cognac, and other alcoholic beverages	0,0	0,0	0,0	0,1	0,0
Excise duty on imported fruit, grape, and specialty brandies	430,5	236,2	0,3	0,0	0,0
Excise duty on imported brandies made from cereals and other agricultural raw materials	3.858,6	770,6	0,0	0,9	7,1
Excise duty on imported low-alcohol beverages containing up to 5% alcohol	0,0	0,0	0,0	0,0	175,0

Source: Ministry of finance of the Republic of Serbia

On the other hand, the majority of excise revenue from imported alcoholic beverages in 2024 originated from excise duties on strong alcoholic drinks and liqueurs, accounting for 54.8%, while excise duties on beer and low-alcohol beverages with 5% or more alcohol made up 43.7% of total revenue from this category.

Based on the analysed data, it can be concluded that excise duties on alcoholic beverages have a limited fiscal impact and do not constitute a significant source of budgetary revenue. Their share in total public revenues is relatively low, underscoring their secondary role within the tax system. Nevertheless, considering the potential role of excise duties in shaping public health outcomes, a detailed analysis of the price elasticity of demand for alcoholic beverages is recommended. Such an analysis would allow for empirical evaluation of the effects of stricter fiscal policy on reducing alcohol consumption and increasing revenue, while also examining opportunities to improve fiscal efficiency. This analysis should be conducted by beverage category as well as by income group. It would support the formulation of a fiscal policy aimed at sufficiently discouraging consumption while simultaneously increasing revenue—achieving the so-called “double dividend”: reducing the consumption of harmful products (“social dividend”) and generating income (“economic dividend”).

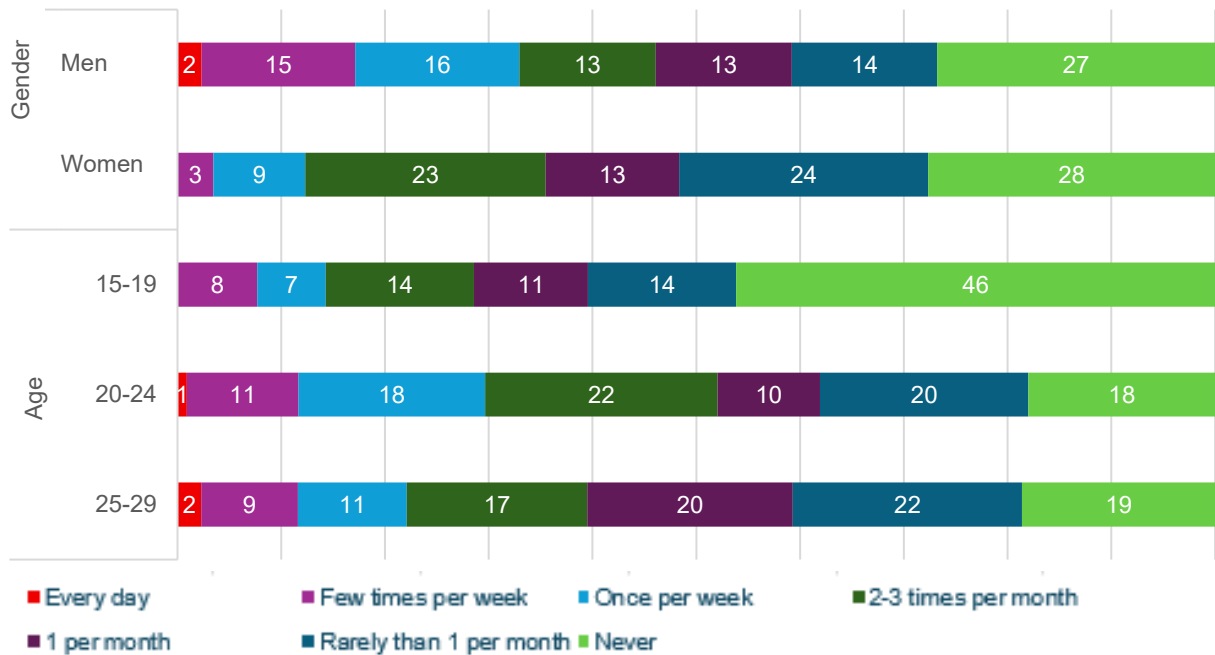
6. Results of the quantitative research on alcohol consumption habits

The European Social Survey (ESS) is a unique, internationally comparable study conducted every two years across Europe since 2001. It provides insight into citizens’ attitudes, beliefs, and behaviours across various domains—including economic, cultural, and political aspects—with the aim of enhancing societal understanding, identifying cross-country differences, and laying the foundation for better-informed public policymaking. As such, ESS stands as one of the most significant databases on European societies, adhering to rigorous methodological standards. The most recent wave—the 11th—conducted in 2023, included questions related to alcohol consumption. This expansion enabled the collection of substantial data supporting deeper insight into consumption patterns and intensity. The following section presents an analysis of alcohol consumption in Serbia based on ESS data, accompanied by a comparative perspective with other European countries.

6.1. Frequency of consumption

The data on alcohol consumption frequency show no gender differences in the proportion of abstainers. Just over one-quarter of both young men (27%) and young women report never consuming alcohol (Figure 7). However, when it comes to those who do drink alcohol, the differences become more apparent—men consume it significantly more frequently than women. Around 2% drink daily, an additional 15% several times a week, 16% once a week, and another 14% drink two to three times a month or less frequently. In total, one-third (33%) of young men consume alcohol at least once a week. Among women, consumption is notably less frequent. In this sample, there are no young women who drink daily; around 3% consume alcohol several times a week, and 9% at least once a week.

Figure 7. Frequency of alcohol consumption among youth in Serbia by gender and age



Source: ESS ERIC (2024a, Wave XI)

When the frequency of alcohol consumption is observed in relation to the age structure of young people, the situation is as follows. Just under half (46%) of respondents under the age of twenty do not drink at all. Around 8% consume alcohol several times a week and an additional 7% once a week, meaning that one in seven people (15%) regularly consume alcohol. In older age groups, the number of abstainers significantly decreases, and in both groups only one in five individuals never drink, while at the same time, the frequency of regular consumption increases.

Interestingly, the frequency of alcohol use is somewhat higher in the middle age group (20–24 years) than in the older group (25–29 years). Data indicate that the “peak” of alcohol consumption frequency occurs between the ages of 20 and 24, and then slightly declines, with a drop in the proportion of those who consume alcohol once or two to three times a week, and an increase in the proportion of those who do so monthly. We can assume that this distribution correlates with socializing and going out patterns, which are most intense in the middle age group; as individuals grow older, these activities become less frequent, and alcohol consumption decreases accordingly.

6.2. Alcohol consumption patterns

In the European Social Survey, respondents were asked about the extent and types of beverages they consume. Since beverages vary in alcohol content, a calculation

was made to determine how many grams of alcohol each respondent consumed. Table 7 presents estimates of alcohol quantity in grams for different types of drinks most commonly consumed in Serbia.

Two indicators will be used: (1) the amount of alcohol most recently consumed on a weekday (Monday to Thursday), and (2) the amount consumed on a weekend day (Friday to Sunday). These data do not refer to alcohol consumption on every weekday or weekend, but rather the quantity consumed on the most recent occasion.

Table 7. Estimated alcohol quantity (in grams) across different types of beverages

Type of beverage	Quantity (ml)	% vol.	Grams of alcohol
Small beer	330	5	13
Large beer	500	5	20
Glass of wine	175	14	19
Glass of spritzer	300	6	14
Bottle of wine	750	12	71
Shot of spirits	30	40	10
Cocktail	100	28	22
Liqueur	30	20	5

The following data refer only to respondents who reported consuming alcohol (those who do not drink were excluded). On weekdays (Figure 8), men consume on average two large beers (38 grams), while women consume one large and one small beer (33 grams) on average. Both men and women increase the amount of alcohol they drink over the weekend, but this increase is significantly greater among men.

Thus, over the weekend, men on average consume one full bottle of wine and one small beer (84 grams), while women consume three glasses of wine (57 grams) on average during this part of the week. For both men and women, weekends are associated with going out, socializing, and alcohol consumption intended to relax, feel more comfortable, and/or gain social recognition among peers. However, alcohol appears to hold greater significance for young men, given the higher quantities they consume.

Figure 8. Quantity of alcohol consumed in grams on weekdays and weekend days by gender



Source: ESS ERIC (2024a, Wave XI)

When the data are observed in relation to the age structure of young people (Figure 9), it is evident that in the youngest age group, aged 15 to 19, the amount of alcohol consumed on weekdays and weekends shows almost no difference, with an average intake of about two large beers, or approximately 40 grams of pure alcohol. In the 20 to 24 age group, a clear pattern emerges showing significantly higher alcohol consumption on weekends. Young people in this age group (those who drink) consume on average one bottle of wine and one large beer on a weekend day (around 90 grams).

Figure 9. Quantity of alcohol consumed in grams on weekdays and weekends by age group



Source: ESS ERIC (2024a, Wave XI)

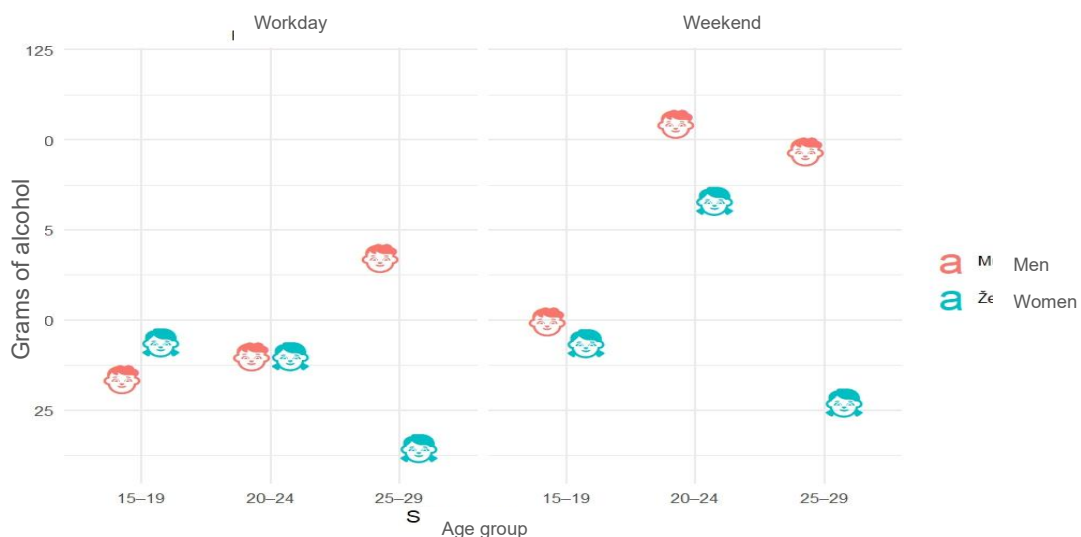
In the next age group (25–29 years), weekend alcohol consumption decreases to around three glasses of wine. In the first two groups, weekday drinking is consistent, averaging about two large beers, whereas in the third group it drops slightly to just

over one large beer. We observe that higher quantities of alcohol during the weekend are particularly consumed by the middle age groups, and that this practice becomes less frequent with age.

A more detailed pattern of alcohol consumption emerges when gender and age are considered (Figure 10). Regarding weekday consumption in the age groups 15–19 and 20–24, there are no differences between young men and young women. However, in the oldest age group, men consume on average around three large beers per day (about 60 grams), while women consume less than two liqueurs on average. In other words, as they grow older, women significantly reduce their weekday alcohol use, while men increase theirs. One possible reason may be entering parental roles, which impose the expectation of a healthier lifestyle on women, while for men it signals entry into the “male world,” which includes daily alcohol consumption.

During weekends, alcohol consumption levels are similar for men and women aged 15–19. In the 20–24 age group, the amount of alcohol consumed increases for both genders: on the most recent weekend, men drank on average a bottle of wine, a large beer, and a shot of spirits, while women drank a bottle of wine. In the oldest age group, alcohol consumption slightly declines among men, but significantly among women. While men continue to consume, on average, a full bottle of wine and an additional small beer when drinking on weekends, women tend to reduce their intake to smaller amounts—typically a cocktail.

Figure 10. Quantity of alcohol consumed in grams on weekdays and weekends by age group and gender



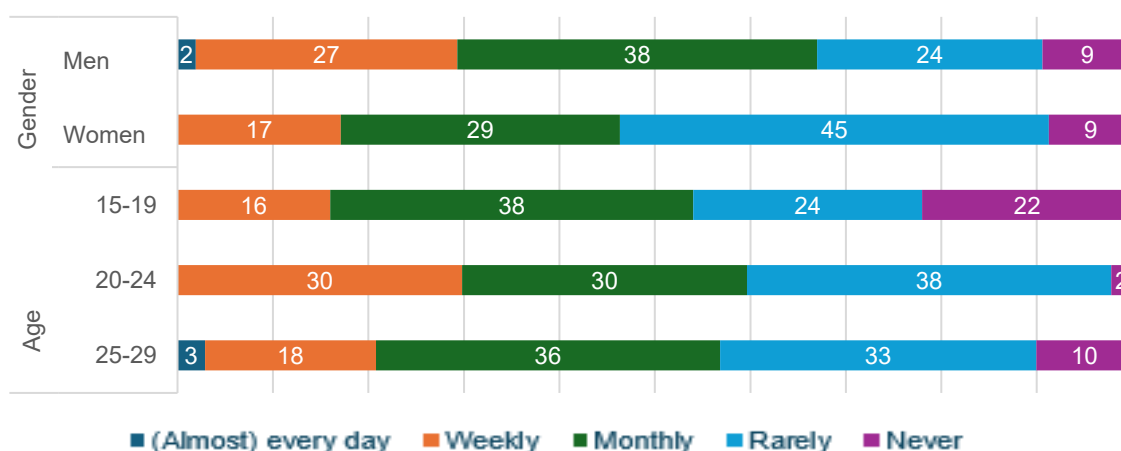
Source: ESS ERIC (2024a, Wave XI)

6.3. Incidence of binge drinking

Binge drinking refers to the frequency of consuming large amounts of alcohol that lead to intoxication (Figure 11). In this study, binge drinking was operationalized as the consumption of 6 or more units of alcohol on a single occasion for women, and 8 or

more units for men. The data pertain only to respondents who consume alcohol and exclude those who reported never drinking.

Figure 11. Frequency of binge drinking among youth in Serbia by gender and age



Source: ESS ERIC (2024a, Wave XI)

Men binge drink more frequently than women. Around 2% of men consume eight or more alcoholic drinks daily, and more than a quarter (27%) binge drink at least once a week. About 38% of young men binge drink once a month, 24% less than once a month, and only 9% of alcohol consumers report never becoming intoxicated. Given that two-thirds of men binge drink at least monthly, it suggests that for a significant portion, intoxication is a central purpose of alcohol use.

Among women, the prevalence of binge drinking is noticeably lower. There are no daily binge drinkers in the sample, but one in six (18%) young women binge drink weekly. Just under a third (29%) binge drink once a month, while the majority do so only occasionally. Nevertheless, as with men, only 9% of women report never becoming intoxicated. Monthly or more frequent binge drinking is reported by slightly less than half of female respondents (46%), indicating that intoxication is a less dominant motive behind their alcohol consumption.

In terms of age, the frequency of binge drinking increases until the middle age group, then gradually declines. Among youth aged 15 to 19, 22% report never binge drinking, while 16% do so weekly and 38% monthly. In the 20 to 24 age group, 30% binge drink weekly and another 30% monthly—indicating that nearly all respondents in this cohort become intoxicated at least occasionally. In the oldest cohort, the share of weekly binge drinkers’ declines, but a new category emerges: those who binge drink daily (3%). The proportion of respondents who never binge drink does not increase, with only 10% of young alcohol consumers reporting complete abstention from intoxication.

These findings suggest that alcohol use is most intense during the period when socializing and going out are most frequent (between ages 20 and 24), as reflected in the dominance of weekly binge drinking. As individuals mature, some reduce their

drinking intensity and binge drinking frequency—yet a subset appears to develop an unhealthy pattern of daily intoxication.

6.4. Consequences of alcohol consumption

Frequency of alcohol use and the quantity consumed are associated with other forms of risky behaviour and health risks affecting both mental and physical well-being (Table 8). Specifically, the more frequently young people drink alcohol, the more likely they are to smoke cigarettes frequently and in larger quantities. This relationship is even stronger when linked to binge drinking. Increased alcohol consumption raises the risk of feeling that "everything is hard," as well as elevated blood pressure and breathing problems. Alcohol use during weekdays is also associated with depression, feelings of heaviness, restless sleep, and experiences of loneliness and sadness. As the quantity of alcohol consumed on weekends increases, so does the likelihood of experiencing depression, disturbed sleep, loneliness, high blood pressure, and respiratory issues.

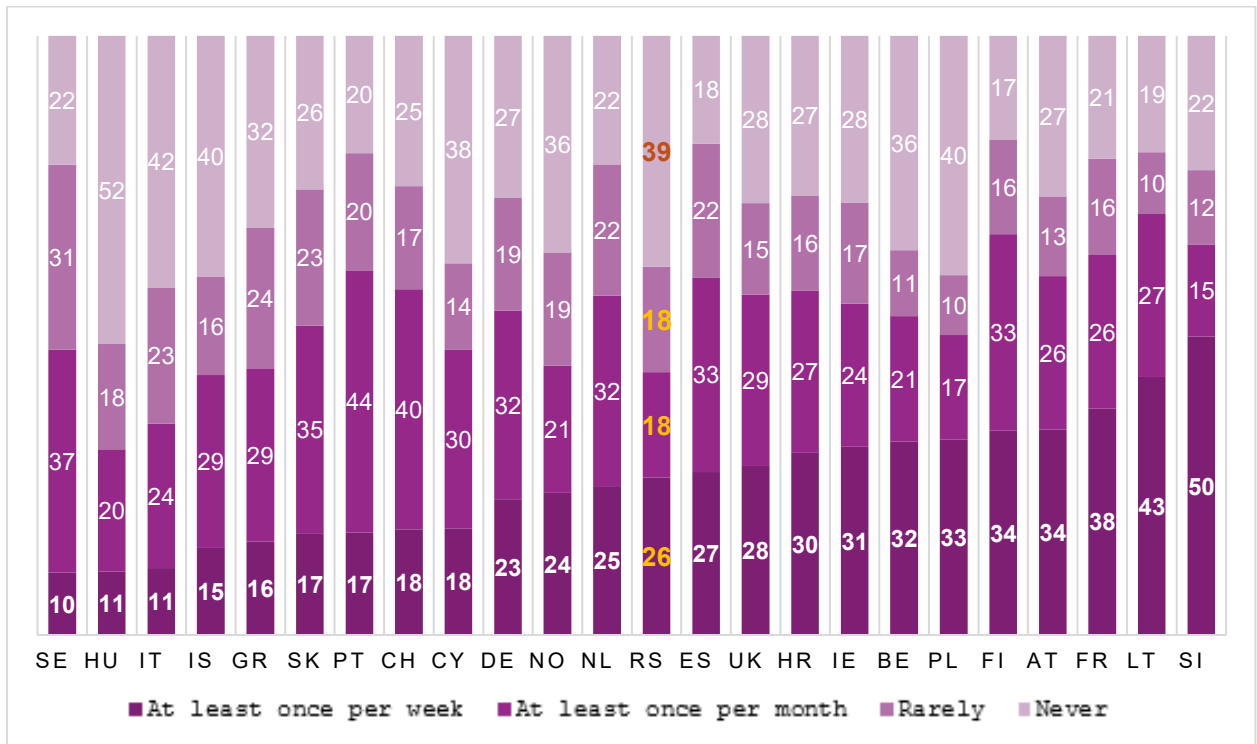
Table 8. Correlations between risk behaviours and health issues

	Frequency of smoking	Depression	Feeling that "everything is hard"	Restless sleep	Feeling of loneliness	Feelings of sadness	Hugh blood pressure	Respiratory problems
Frequency of consumption	.210**	0.075	.220**	0.085	0.043	0.052	.155**	.120*
Grams of alcohol: Monday–Thursday	0.102	.226**	.203**	.266**	.261**	.225**	0.003	0.139
Grams of alcohol: Friday–Sunday	.186**	.175*	0.095	.155*	.193**	0.130	.319**	.190**
Frequency of binge drinking	.263**	0.041	0.028	0.125	0.052	-0.022	.268**	0.119

6.5. Serbia's Drinking Patterns in a European Context

The frequency of alcohol consumption among young people in Serbia is approximately in line with the European average (Figure 12). According to ESS data, youth in Hungary, Italy, and Greece consume alcohol somewhat less frequently compared to their peers in other European countries, while young people in Slovenia, Lithuania, France, Austria, and Finland drink slightly more than the average. With two out of five young individuals' never consuming alcohol, and a quarter drinking daily, Serbia is roughly positioned at the European average.

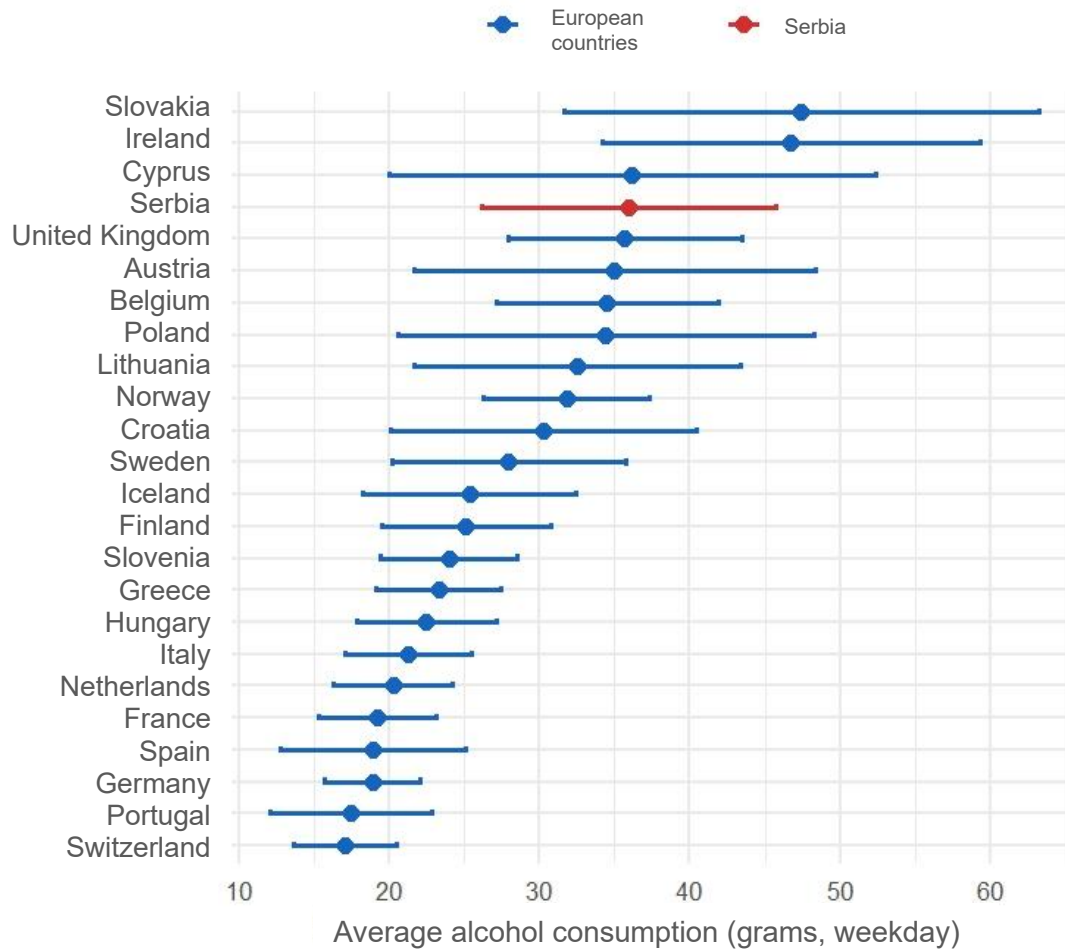
Figure 1. Alcohol consumption across European countries



Source: ESS ERIC (2024a, Wave XI)

Although young people in Serbia do not consume alcohol significantly more frequently than their peers, when they do drink during the workweek (Figure 13), they do so in quantities considerably higher than most youth in other European countries. The amount of alcohol consumed by young people in Serbia on weekdays ranks among the highest in Europe. Together with youth from Cyprus, Slovakia, Ireland, and the United Kingdom, this reflects a notably high level of alcohol consumption in a comparative context.

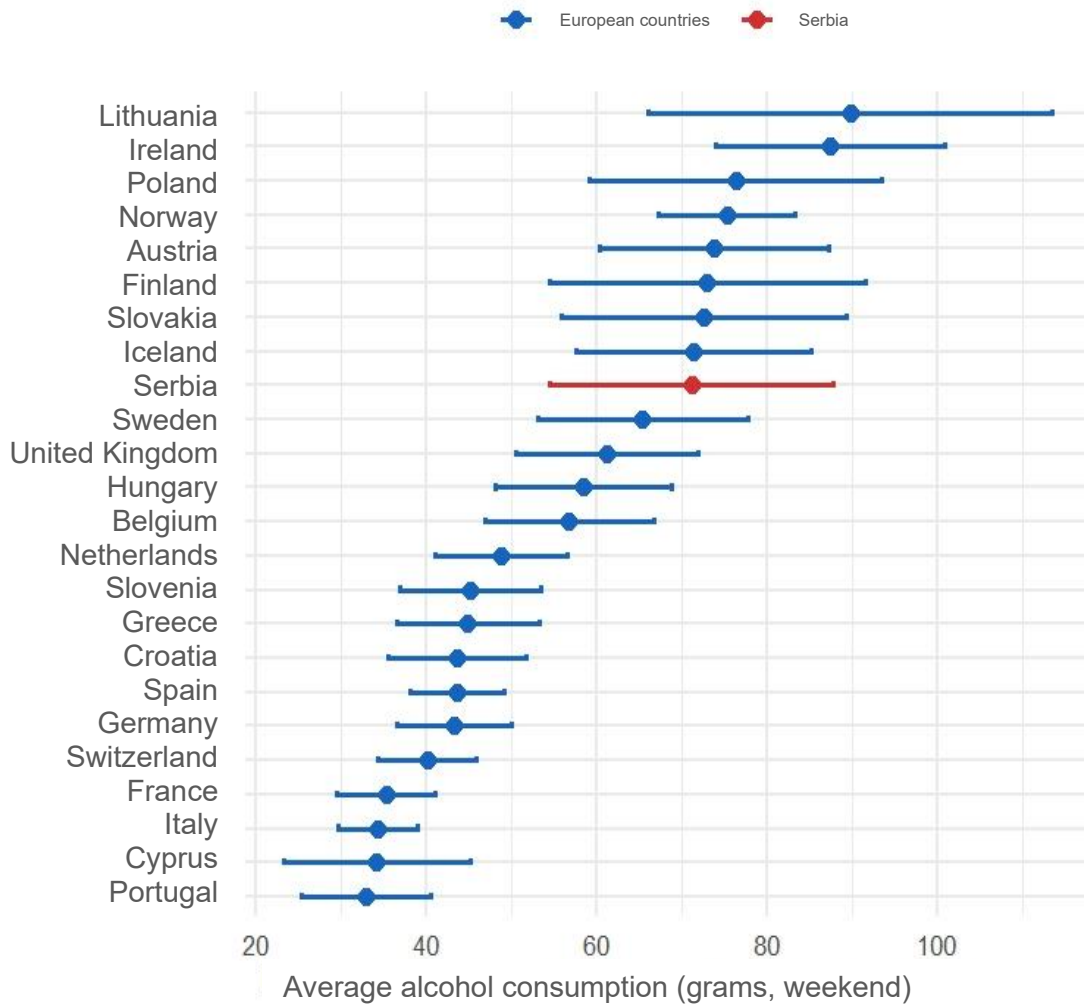
Figure 2. Amount of alcohol consumed (in grams) during weekdays in European countries (with confidence intervals)



Source: ESS ERIC (2024a, Wave XI)

The amount of alcohol consumed during weekends is also somewhat higher compared to most European countries, but in this regard, young people are closer to the European average. Both indicators clearly show that youth in Serbia come from a context in which their peers generally consume significant quantities of alcohol.

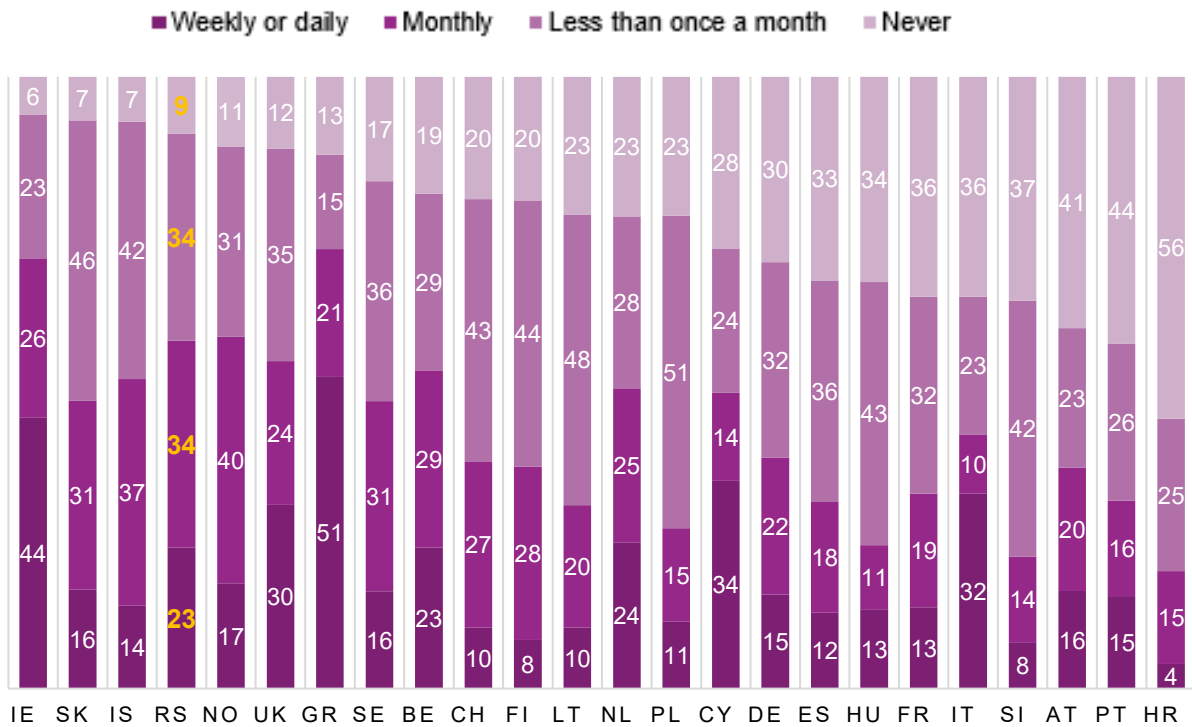
Figure 3. Amount of alcohol consumed (in grams) during weekend in European countries (with confidence intervals)



Source: ESS ERIC (2024a, Wave XI)

Finally, the comparative analysis of binge drinking frequency reveals that young people in Serbia are on par with their peers from countries where the majority of alcohol consumers engage in binge drinking at least occasionally, and where a significant proportion of youth do so on a weekly or monthly basis (Figure 15).

Figure 4. Frequency of binge drinking in European countries



Source: ESS ERIC (2024a, Wave XI)

7. ESPAD Survey results on the prevalence of alcohol use among youth aged 15 and 16

The *European School Survey Project on Alcohol and Other Drugs (ESPAD)* is an internationally comparable survey on the use of harmful substances, conducted among youth aged 15 and 16 in 37 European countries since 1995. The latest, 8th round of the survey was carried out in 2024, with a sample of 113,882 students. In addition to a standardized set of questions, this round placed special emphasis on mental health and prevention, recognizing their growing impact on youth health outcomes. Preliminary results were published on May 20, 2025, while the full report is expected in October 2025. Overall, the findings from the 8th ESPAD round indicate a slight decline in alcohol consumption and binge drinking episodes, particularly among boys, while consumption among girls shows a relatively stable trend. Despite these encouraging developments, significant country-level variability remains, along with persistent challenges for policymakers—including the continued wide availability of alcoholic beverages to minors, early initiation of drinking, and frequent episodes of excessive alcohol use. Key findings from the 2024 survey revealed the following:

- One-third of respondents had tried alcohol at age 13 or younger.

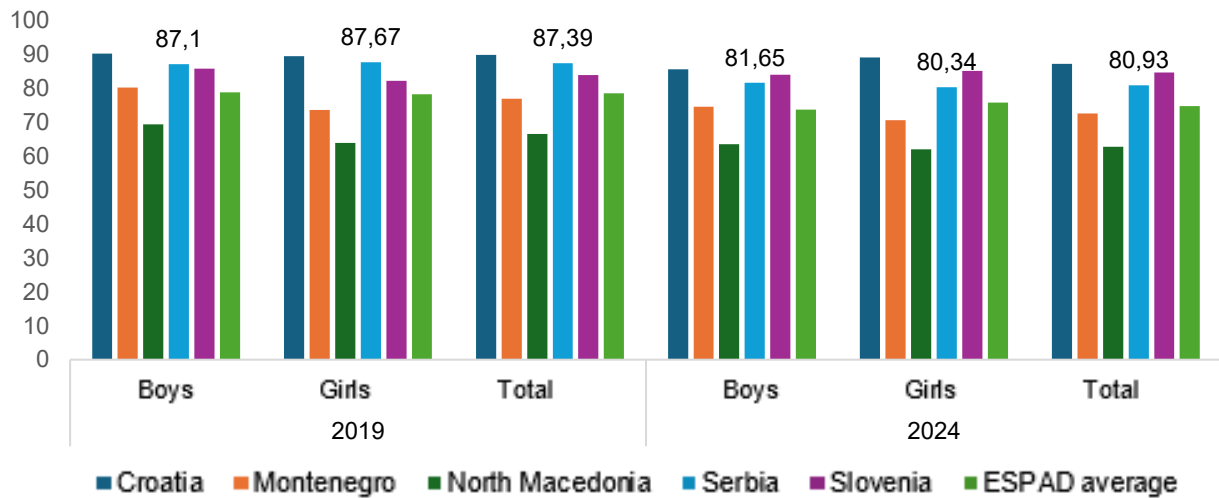
- Approximately 8% of youth aged 15–16 reported experiencing drunkenness at age 13 or younger.
- Boys show slightly higher prevalence of alcohol use compared to girls—34% versus 33% for consumption, and 8.2% versus 7.8% for episodes of intoxication.
- In Serbia and neighbouring countries, unlike most EU member states, boys still consume alcohol significantly more than girls.
- Three out of four students believe it is easy or very easy to obtain alcoholic beverages.
- 42% of youth consumed alcohol in the past 30 days.
- Compared to the first ESPAD survey conducted in 1995, there has been a notable decline in 30-day alcohol consumption, with the largest reductions observed in Iceland (from 56% to 12%), Ireland (from 66% to 35%), and Finland (from 57% to 27%).

The following section presents key ESPAD indicators for Serbia, along with comparisons to neighbouring countries and the average across the 37 countries covered by the survey.

The majority of youth aged 15 and 16 have already had experience with alcohol. Three-quarters of young people have tried alcohol, with a slightly higher proportion among girls than boys. Compared to 2019, this share has declined in 2024. With the exception of North Macedonia, the proportion of youth in Serbia and neighbouring countries remains somewhat higher than the average across the 37 ESPAD countries. In Serbia, nearly 81% of respondents had tried alcohol by age 16, which is about 6 percentage points lower than in 2019 (Figure 16).

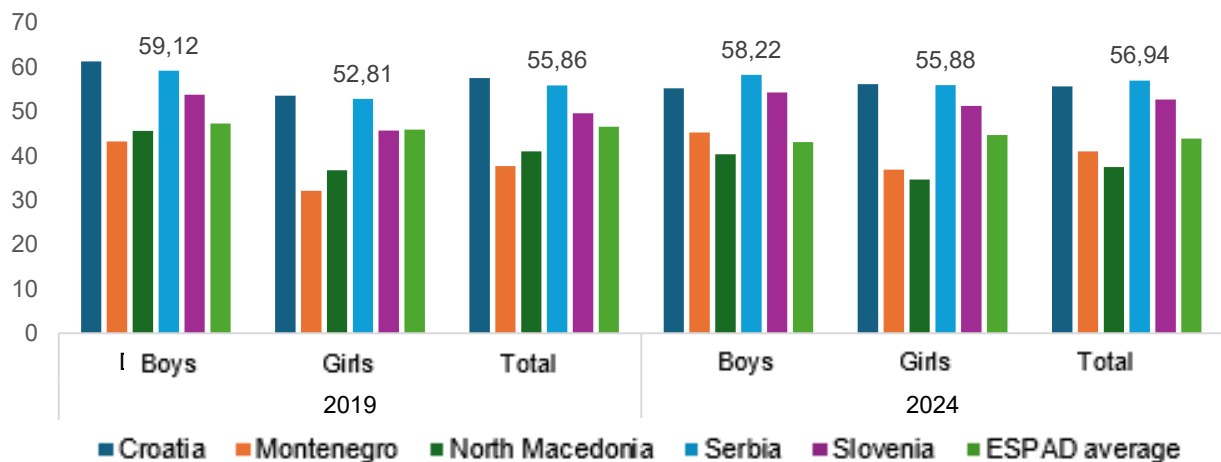
Compared to other countries, a significant share of youth in Serbia—almost 57%—reported having consumed alcohol at least once in the past month. This figure is not only substantially higher than the ESPAD country average of 43.8%, but also shows an increase compared to 2019, while the gender gap has narrowed. The proportion of boys in Serbia who consumed alcohol in the past 30 days—58.2%—is, along with Croatia, the highest in the region (Figure 17).

Figure 5. Share of youth (aged 15–16) who have tried alcohol at least once in their lifetime



Source: ESPAD

Figure 6. Share of youth (aged 15–16) who have tried alcohol at least once in the past month

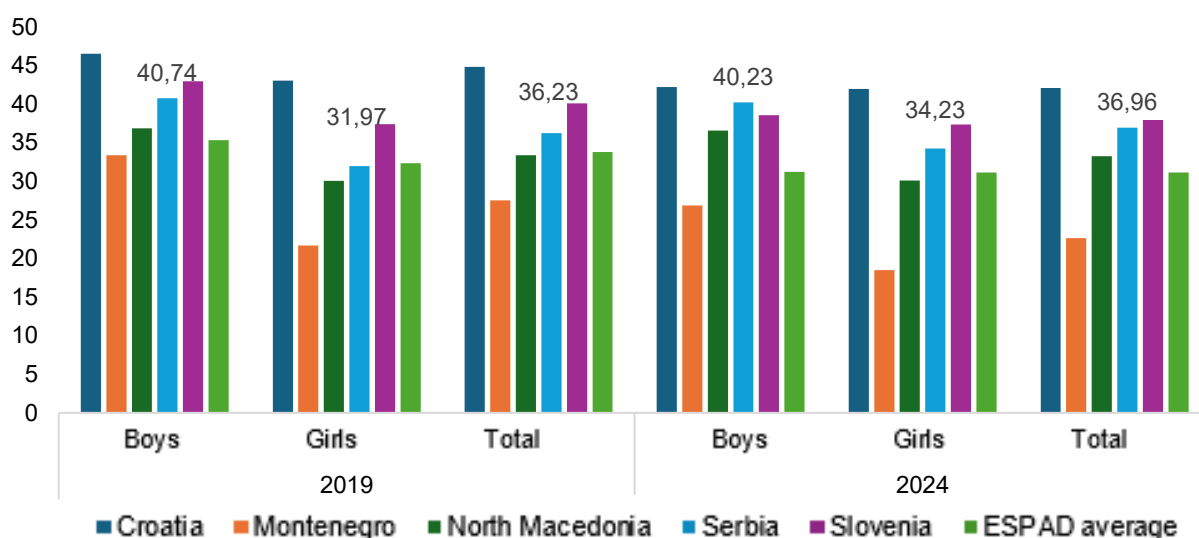


Source: ESPAD

One of the particularly important indicators of youth habits—linked to future outcomes and problems stemming from excessive use—is so-called binge drinking, defined as episodes of heavy drinking (five or more drinks on a single occasion) within the past month. The average across ESPAD countries stands at 31.1%, representing a decrease of more than 2.5 percentage points compared to 2019. In Serbia, nearly 37% of respondents answered affirmatively to this question, placing the country among those with the highest share of youth who experienced binge drinking episodes in the past month. This proportion is nearly identical to that recorded five years ago, indicating a lack of progress in the effectiveness of public policy measures in this area.

Serbia shows slightly better results than Croatia (42.1%) and Slovenia (37.9%), but unlike Serbia, these neighbouring countries have recorded a decline compared to the previous 2019 survey (Figure 18).

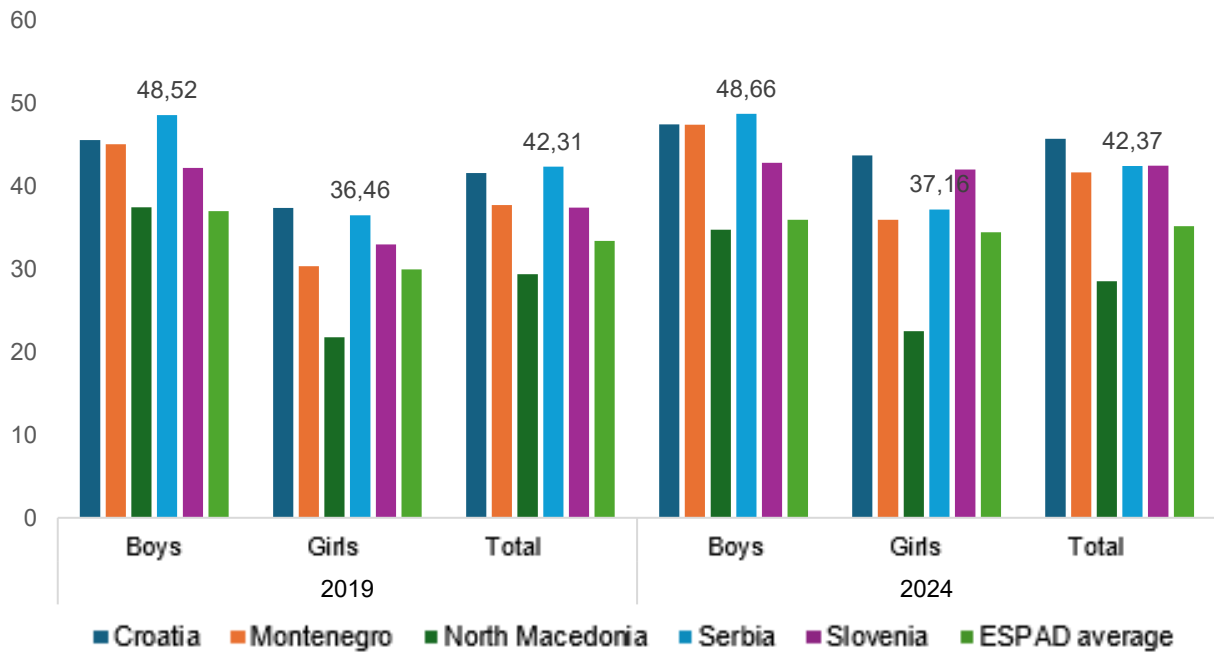
Figure 7. Share of youth who engaged in binge drinking episodes (5 or more drinks on a single occasion) in the past 30 days (in %)



Source: ESPAD

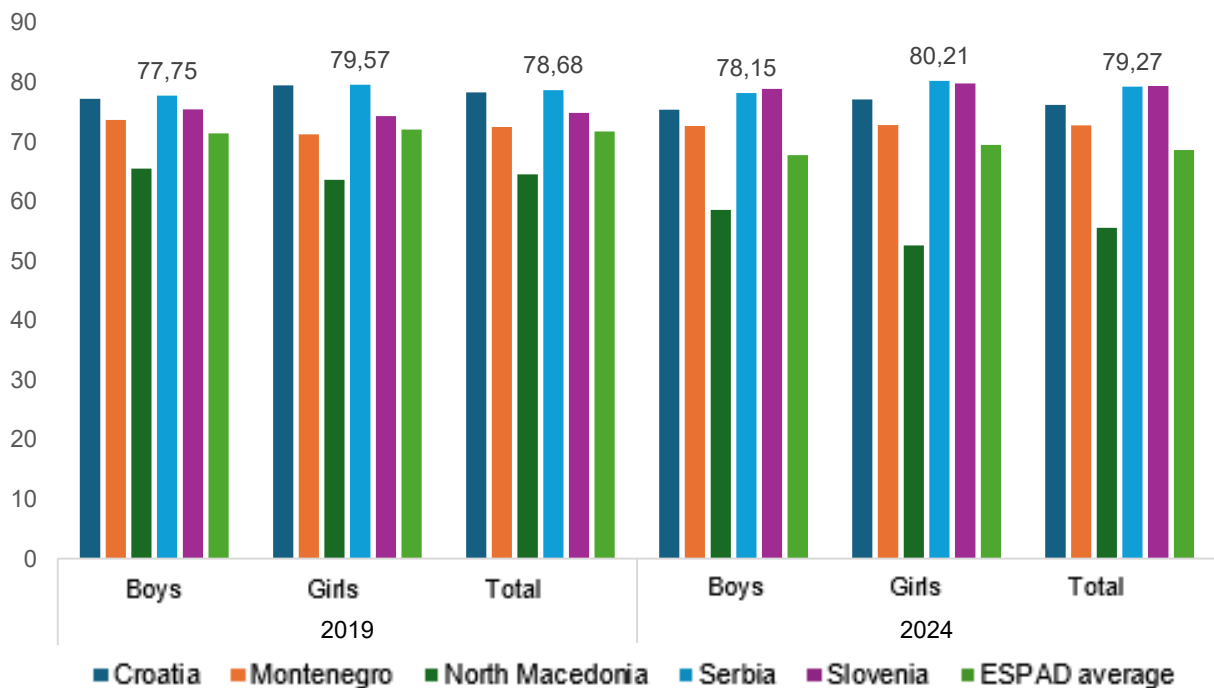
When it comes to initiation, nearly half of boys in Serbia (48.7%) had tried alcohol by age 13 or earlier, placing Serbia at the bottom of the regional ranking. Early initiation of alcohol consumption is a common characteristic across the Western Balkans, compared to most observed countries. Serbia ranks sixth on this indicator, with 42.4% of youth having tried alcohol by age 13 (Figure 19). The underlying causes of this situation include the normalization of alcohol consumption, relatively affordable prices, and the fact that alcoholic beverages remain easily accessible due to non-compliance with age restrictions on purchase. ESPAD data illustrate the availability of alcoholic beverages to minors through questions on how easy it would be to obtain specific types of alcohol (beer, wine, or spirits). In Serbia, four out of five young people report no difficulty obtaining beer, three-quarters can easily obtain wine, and more than two-thirds can access spirits. On this indicator as well, Serbia performs the worst compared to neighbouring countries. Notably, spirits have become even more accessible since 2019, with an increase of nearly 5.5 percentage points (Figures 20–22). In all regional countries except North Macedonia, alcoholic beverages are significantly more accessible than the ESPAD country average.

Figure 8. Share of youth aged 15–16 who tried alcohol by age 13



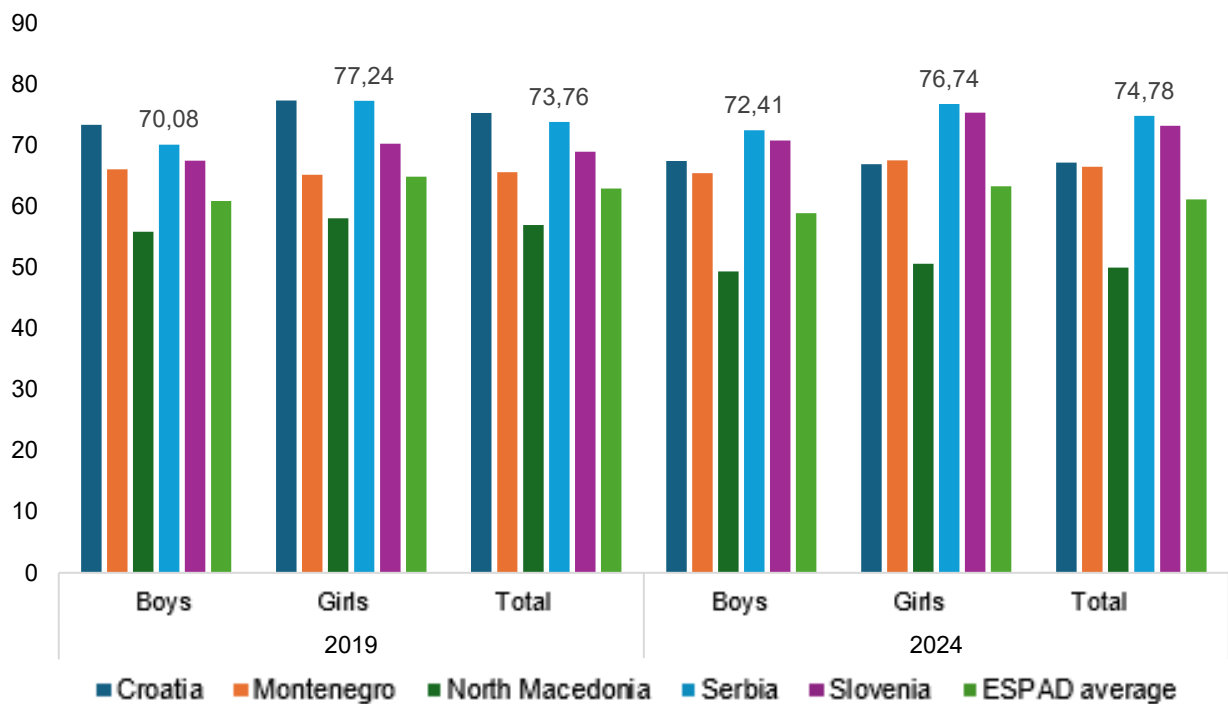
Source: ESPAD

Figure 20. Share of youth who believe they could easily obtain beer (in %)



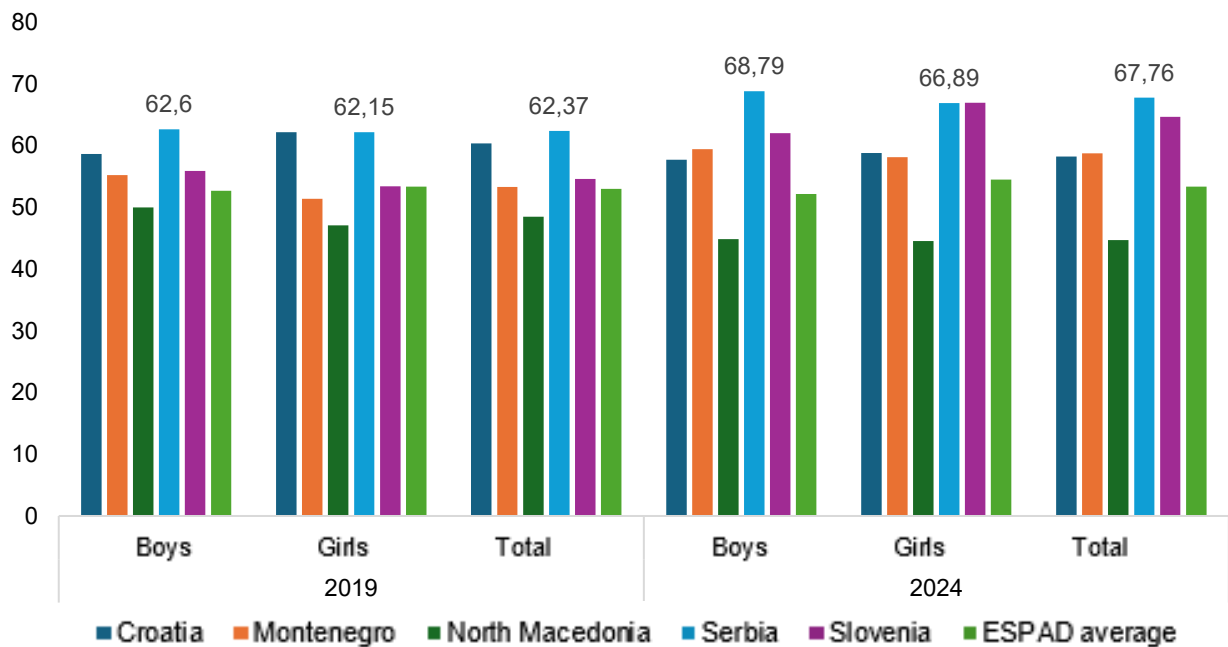
Source: ESPAD

Figure 21. Share of youth who believe they could easily obtain wine (in %)



Source: ESPAD

Figure 9. Share of youth who believe they could easily obtain spirits (in %)



Source: ESPAD

The results of the conducted research highlight the ongoing problem of significant alcohol use among youth in Serbia and the urgent need for an institutional response. Serbia is among the countries where young people consume alcohol to a considerable extent, and according to most observed indicators, it ranks well above the average of

ESPAD countries – with some indicators placing it among the countries where youth drinking habits are particularly alarming. For policy makers in this field, especially relevant are the data on early initiation of alcohol use, alcohol consumption among youth in the past month, and episodes of excessive intoxication. Data on early initiation are supported by findings indicating extremely high alcohol availability, which has even increased over the past five years. The ESPAD survey suggests that urgent measures are required – especially price policies with a direct effect on initiation and excessive use, as well as stricter enforcement of existing bans on alcohol sales to minors. Additionally, long-term efforts should focus on broader implementation of preventive measures and information dissemination, targeting both young people and other stakeholders regarding the negative consequences of alcohol consumption among minors.

8. Qualitative findings as a basis for policy development

Between May and June 2025, a series of semi-structured interviews were conducted with key stakeholders in the fields of youth policy, public health, addiction prevention, and youth work. The research had a multi-layered objective: to identify patterns of alcohol consumption among youth in Serbia, to assess availability and perception of alcohol, to evaluate the effectiveness of existing policies and institutional responses, and to map out key factors that contribute to the spread or mitigation of this phenomenon. The participants included representatives from the Ministry of Tourism and Youth, the World Health Organization (WHO), the National Youth Council of Serbia (KOMS), the Institute of Public Health of Vojvodina, representatives of the military health system, as well as civil society organisations involved in youth work, public health, and advocacy.

The analysis of conducted interviews with representatives of institutions, civil society organisations, and experts in health and youth policy indicates that alcohol consumption among youth in Serbia is a complex social phenomenon occurring within culturally accepted behavioural patterns, weak institutional control, and an underdeveloped prevention system. Most interviewees share the opinion that alcohol use among youth is widespread and includes all younger age groups, even children under the age of 14. It was observed that the majority of young people try alcohol at least once in their lives, and the frequency of consumption between the ages of 15 and 18 points to an alarming trend of the normalization of drinking, especially in the context of social gatherings, public events, and informal social networks. Nearly all respondents highlighted the following factors as the most significant contributors to youth alcohol consumption:

- social influence and immediate environment,
- curiosity,
- cultural patterns and tolerance toward alcohol

- Influence of media.

8.1. Economic and physical availability

Respondents emphasized that alcohol is very easily accessible to youth, both physically and in terms of price. The prices of alcoholic beverages are relatively low compared to other psychoactive substances, and availability in stores and hospitality establishments remains high despite formal legal restrictions. In practice, alcohol is often sold to minors without adequate control, and sales personnel rarely conduct age verification. Furthermore, homemade alcohol production and its presence in everyday life further contribute to the normalization of consumption, with young people frequently encountering alcohol in their families and even receiving it directly from family members. In this context, alcohol is not perceived as a harmful substance, but rather as part of tradition and social identity, especially in the context of holidays, celebrations, and festivities.

8.2. Normalisation of consumption among youth and the influence of marketing

Respondents pointed to the strong influence of the social environment, particularly peer groups, in decision-making regarding alcohol consumption. Young people seeking to integrate into certain social circles often feel pressured to drink, with alcohol perceived as a means of relaxation, self-affirmation, or proof of maturity – especially among adolescents. Media also plays a significant role in this process, particularly social networks that frequently promote alcohol through content from influencers, music videos, and advertisements. Respondents stated that although alcohol marketing is formally regulated, it still finds ways to reach youth, especially through informal channels and indirect sponsorship of events. The issue is further complicated by the fact that celebrities such as athletes, actors, and musicians appear in advertisements or content that promotes alcohol, which young people often interpret as a message that drinking is part of a successful and free lifestyle.

8.3. Prevention measures and awareness

Youth awareness of the risks associated with alcohol consumption is assessed as insufficient. Respondents noted that the formal education system does not devote adequate attention to this topic, nor does it offer a consistent curriculum that informs youth about consequences and protective mechanisms. School programs tend to neglect issues of healthy lifestyles, and when they are addressed, it is often limited to one-off workshops that depend on the enthusiasm of individual teachers or external collaborators. Respondents agreed that education must be continuous, age-appropriate, and focused on empowering critical thinking among youth. Peer education was identified as a particularly effective approach, wherein young people, through trust and mutual exchange of experiences, convey messages about the risks of alcohol consumption. However, such programs remain rare and depend on the capacity and motivation of non-governmental organizations. The most effective

recommendations for improving preventive measures include organizing workshops in cooperation with educational and health institutions, as well as youth offices; training peer educators; campaigns aimed at informing families about the harms of alcohol through television programming; direct engagement with youth through testimonies from individuals with negative personal experiences with alcohol; and campaigns featuring public figures – particularly influencers and musical performers – who hold significant sway over youth via social media.

8.4. Institutional response and restriction of alcohol sales to minors

Regarding public policies and institutional response, most interviewees emphasize that existing mechanisms are neither sufficiently effective nor systematically connected. Policies related to the prohibition of alcohol sales to minors largely remain “a dead letter” due to the absence of enforcement and sanctioning mechanisms. Interviewees also point to inconsistencies within the legal framework, where some regulations set the minimum age for purchasing alcohol at 16 and others at 18, creating confusion in enforcement. Furthermore, after reaching 18, no legal restrictions apply to alcohol purchase and consumption, making it easily accessible to newly legal adults who are still considered youth. Given that a large number of young people begin consuming alcohol between the ages of 15 and 18, the legal prohibition applies only during a relatively short period.

Additionally, the number of field inspectors is limited, vendor and hospitality staff awareness of legal obligations is low, and sanctioning is rare and selective. Although the importance of prevention is often highlighted rhetorically, in practice, insufficient resources are allocated to continuous programs, and there is no clear institutional commitment to prioritize youth health. Research conducted by CZOR, based on the mystery shopper methodology, and confirmed these findings. Of twelve attempted alcohol purchases by minors, all twelve were successful, with receipts provided as proof. Based on this, it is clear that although the restriction exists, it is not adequately implemented—supported by secondary statistical data indicating extreme ease of access.

Finally, it is necessary to mention the Youth Strategy for the period 2023–2030 and the corresponding Action Plan for 2023–2025. Although reducing alcohol consumption among youth aged 15 to 30 is identified as a success indicator, the ambitious goal of reducing the share of youth who have tried alcohol to 25% (from the current 70%) appears difficult to achieve. This is further illustrated by the modest and declining budget allocations for prevention and youth education programs during the observed period. Without significant financial investment, it is unlikely that effective control measures can be implemented to reach the targeted indicator values.

8.5. Intersectoral cooperation

In terms of intersectoral cooperation, most interviewees point to limited capacity and fragmented approaches. Although formal bodies and working groups exist bringing together representatives from various sectors (health, education, and youth), cooperation is often inconsistent, marked by personnel changes, and lacking clear lines of accountability. Interviewees underline the need for long-term, stable teams that are not subject to political shifts but have continuity and professional legitimacy in addressing these issues. It is also noted that although the health sector is formally responsible, its capacities are limited, with a very small number of professionals directly accessible to youth. According to interview data, one school psychologist may serve up to 18,000 young people, highlighting a severe mismatch between needs and available resources. All currently implemented measures lack active participation from representatives of the trade and finance sectors, whose mandate includes potentially effective tools such as market inspection, marketing restrictions, excise policy, and other pricing instruments like minimum pricing or the earmarking principle.

8.6. Financial responses

As with other public health policies and based on comparative practices, and considering the prevailing public interest, financing of control policies is generally carried out through public sources. Therefore, the foundation for implementing effective control policies is political commitment to achieving public health goals and, consequently, securing sustainable budget funding. All available independent analyses of economic costs and benefits, regardless of the specific measure or a country's development level, demonstrate the economic efficiency of control policies. For every unit of invested funds, the monetary return is reported to be several tens of units. An OECD study shows that for each dollar invested, economic returns amount to 16 dollars.⁷⁹ Given limited financial resources, the government may choose to generate additional funds through increased taxation of alcohol consumption and the introduction of earmarking principles. Intersectoral cooperation is also emphasized, as public health priorities in this context can be pursued through collaboration and co-financing with other actors such as the ministries responsible for trade, youth, road safety, civil society development, and local governance. Furthermore, it is important to utilize opportunities for international funding (e.g. EU) through calls supporting programs and projects in public health. There is also the possibility of attracting resources from the private sector, focusing on stakeholders with financial interest in promoting healthy lifestyles (sports, recreation, sustainable development, etc.). Of course, to use these opportunities, an appropriate strategic and institutional framework must be established.

8.7. Tax policy

Finally, several interviewees raised concerns about the existing tax policy toward alcoholic beverages. Although excise duties formally exist, their levels do not serve as

⁷⁹ OECD (2021), Preventing Harmful Alcohol Use, OECD Health Policy Studies, OECD Publishing, Paris, <https://doi.org/10.1787/6e4b4ffb-en>.

a serious deterrent. As a result, alcohol remains the most affordable psychoactive substance in Serbia, and its presence in young people's daily lives stems not only from personal choices but also from deep cultural patterns, systemic passivity, and insufficient institutional support. An additional challenge lies in the fact that tax revenues are not allocated to preventive programs. In this context, there are increasing initiatives advocating the introduction of an earmarking model, where part of the revenue from alcohol taxes would be dedicated to educational campaigns, counselling services, psychosocial interventions, and other public health activities aimed at youth. Tax policy falls under the jurisdiction of the Ministry of Finance, and its adequacy has not been sufficiently debated, particularly regarding the affordability of alcoholic beverages. As confirmed by research in many countries, including WHO analyses, the affordability of alcohol has a pronounced impact on youth, contributing to early initiation and increased intensity of consumption.

Summarizing the interview findings, alcohol consumption among youth in Serbia is not an isolated phenomenon but deeply rooted in social norms, highlighting the need for a coordinated, comprehensive, and long-term approach that integrates prevention, education, control, and support. Interviewees agree that the problem lies not only in individuals but in the entire system, which currently fails to recognize the scope and consequences of this issue. This underscores the necessity of establishing societal consensus and defining a strategic approach to combat consumption, with particular focus on youth and adolescents. The initial step should be a preliminary assessment of the costs of the status quo and a response to the question of how much Serbia loses due to alcohol consumption among youth—including healthcare costs, lost years of life, and other social costs across various sectors (education, workforce, crime, domestic violence, traffic, etc.).

9. Conclusions and recommendations

Alcohol consumption among young people in Serbia presents a serious challenge for public health, the education system, and social policy, as well as a question of economic development priorities. Although data do not indicate significantly higher consumption rates compared to peers in other European countries, the behavioural patterns observed are concerning — particularly the consumption of large quantities of alcohol during both weekdays and weekends. According to ESS data, approximately 40% of young people in Serbia aged 15 to 19 consume alcohol at least once a month, while this share rises to around 60% among the 20–24 and 25–29 age groups. About 54% of alcohol-consuming youth aged 15 to 19 report getting drunk at least once a month, indicating that a considerable portion of young people below the legal age — or just after reaching adulthood — drink with the explicit aim of intoxication. Additionally, Serbia stands out for the notably early onset of alcohol use compared to most other European countries. Around 42% of youth start consuming alcohol at age 13 or earlier. Such behaviour is individually associated with a range of

harmful consequences, including an increased risk of depression, sleep disorders, loneliness, respiratory problems, and elevated blood pressure. Long-term societal consequences include a significant number of years lost to disease or early death due to alcohol-related conditions — alongside the associated treatment costs and lost productivity, lower educational achievement, worse labour market outcomes, domestic violence, and more. Overall, alcohol consumption contributes to the suboptimal use of resources and represents a significant barrier to societal development.

Below are the key findings derived from the conducted research:

- **The alcohol control system insufficiently limits youth access and affordability**

Beyond individual and social factors, the prevalence of alcohol consumption among youth is heavily influenced by systemic structural weaknesses. Alcohol is easily accessible to young people – widely available in retail and hospitality settings and sold at relatively low prices, making it economically affordable. ESPAD data confirm that the system provides insufficient protection for minors, allowing them relatively easy access to alcoholic beverages. For four out of five, and three out of four, 15- and 16-year-olds respectively, purchasing beer and wine poses no difficulty. Particularly notable is the rising share of youth who can obtain strong alcoholic beverages without issue – a marked increase compared to 2019. Only one in three believe obtaining such drinks might present a challenge. A comparison of alcoholic beverage prices across European countries, adjusted for purchasing power index, shows that Serbia ranks among medium-affordability countries. The current tax policy does not aim to reduce affordability, nor does it include mechanisms to adjust for inflationary pressures or rising income levels.

- **Institutional capacity and interagency cooperation are insufficient to support strategic objectives**

The legislative framework in Serbia is misaligned and often inconsistent. Penalties are lenient, and inspection oversight is irregular and lacks a systematic approach. This study found that Serbian institutions do not track data on the number of fines issued for the offense of selling alcohol to minors. In this regard, Serbia could benefit from the experiences of other countries (e.g. Iceland, Lithuania, and Slovenia) that have significantly strengthened the capacities of inspection services with the goal of protecting youth and raising public awareness – particularly among minors. At the same time, the education system fails to provide adequate support through continuous prevention programs. Young people are insufficiently informed about the risks of alcohol consumption. Education on alcohol-related harm is generally limited to sporadic workshops, which often depend on the enthusiasm of individual teachers or external collaborators, rather than being part of a structured, system-wide approach. Collaboration between educational and health institutions – with the aim of creating effective, child-centred awareness campaigns – is largely absent.

- **Marketing of alcoholic beverages is insufficiently regulated, encouraging normalization of consumption among youth**

An added concern is the presence of entrenched cultural norms that not only tolerate but often actively encourage alcohol consumption. Young people seeking social acceptance frequently feel pressured to drink, while alcohol is perceived as a means of relaxation, self-affirmation, or proof of maturity—especially during adolescence. This pressure is further intensified by content on social media and modern media channels, where alcohol is portrayed as a symbol of fun, social approval, and personal freedom. Marketing by the alcohol industry is inadequately regulated, as evidenced by the frequent appearance of advertisements on television and sponsorship of sporting and cultural events that commonly attract children and adolescents. Advertising is also not restricted near places where children spend substantial time (youth clubs, theatres, cinemas, sports centres, etc.).

- **The economic impact of the alcohol industry is not negligible, but it does not justify the absence of stricter control policies – especially for the protection of minors**

Analysis of the economic contribution of the alcoholic beverages industry in Serbia shows that this sector actively participates in economic flows, especially through employment and export-oriented production. Nevertheless, its overall impact remains limited, and market effects are not critical to the stability of the national economy. These findings further support the case for implementing decisive public health measures, as restricting access to alcohol—particularly among youth—would have minimal effect on economic dynamics, while the health benefits for the population would be substantial. The study confirms the notable influence of the industry, which is evident in efforts to slow the implementation of stricter regulations.

- **Current cross-sector cooperation is inadequate, especially in the area of excise policy development**

Although formal cross-sector cooperation exists, its practical functioning is uneven and heavily dependent on individual initiatives and the availability of institutional personnel. The lack of clearly defined lines of accountability further complicates the implementation of youth protection policies. In the domain of fiscal policy, the existing model for taxing alcoholic beverages proves ineffective in reducing consumption: current excise levels are not dissuasive, and collected revenues are not directed toward prevention, education, or public health protection measures. This represents a missed opportunity to use economic instruments as tools of public health policy. The effectiveness of excise policy remains a topic that is not publicly discussed and is handled exclusively within the Ministry of Finance, despite its direct impact on consumption and the far-reaching consequences beyond budgetary considerations.

The findings of the study indicate that alcohol consumption among youth is a complex and multidimensional issue requiring a coordinated, comprehensive, and long-term sustainable response. It is essential to establish an integrated framework that connects preventive, educational, regulatory, and fiscal mechanisms, with clearly defined institutional responsibilities and mechanisms for continuous monitoring and evaluation of policy effects. Otherwise, there is a real risk of further normalization and

increase in alcohol consumption among youth, which poses a serious obstacle to the development of a healthier and safer society.

Based on the findings of the research conducted, the following **RECOMMENDATIONS** have emerged:

Harmonization of legislation and alignment of age limits

It is necessary to harmonize all legal regulations governing the sale and consumption of alcohol in order to establish a unified age limit of at least 18 years. This would eliminate existing inconsistencies that create confusion in law enforcement and hinder oversight. Additionally, it is recommended to consider introducing supplementary protective measures for individuals between the ages of 18 and 21, who are still in a vulnerable developmental phase, in order to strengthen prevention and reduce alcohol availability within that at-risk group.

Development of a new national Strategy for the prevention of alcohol consumption

Instead of relying on the existing Regulation on the National Program, which has proven insufficiently functional and lacks clearly defined implementation mechanisms, it is recommended to develop a new, comprehensive national strategy. This strategic document should be aligned with relevant public policies, including the Youth Strategy, and should contain clearly defined objectives, measurable indicators, precisely designated competent institutions, defined sources of funding, and sustainable mechanisms for intersectoral coordination. Such an approach would enable more effective planning, implementation, and monitoring of measures aimed at reducing alcohol consumption among youth. The issue of funding holds a particularly important place, as without ensuring appropriate resources for the implementation of measures and defining sources of funding, progress in achieving the set indicators cannot be expected.

Revision of objectives and focus on real target groups within the Youth Strategy

The objectives set within the Youth Strategy, and especially Objective 5 relating to the creation of a healthy and safe environment, require careful revision and more precise targeting of activities. It is necessary to strategically plan measures that will be directed not only at the current youth population but also at generations that will enter the age group of 15 to 30 years by 2030. Special attention should be given to adolescents and young people aged 15 to 24 years, who will remain part of the target group covered by the strategy in the coming period. Additionally, the implementation of objectives operationalized through the Action Plan must be

	<p>accompanied by the allocation of significant financial resources aimed at prevention measures and awareness-raising among all stakeholders, with close coordination with public health sector institutions and civil society organizations.</p>
<p>Amendments to the Consumer Protection Law</p>	<p>It is necessary to implement amendments to the Consumer Protection Law, with particular emphasis on more precise definition of offenses related to the sale of alcoholic beverages to minors, as well as on the introduction of stricter and more effective punitive measures that would have a deterrent effect. Furthermore, it is recommended to introduce a legal basis that would allow employees in retail and hospitality establishments to request personal identification documents from customers in cases of suspicion that the buyer is a minor. For the implementation of this recommendation, it is additionally necessary to work on strengthening the capacity of market inspection and raising public awareness.</p>
<p>Introduction of mandatory preventive education in schools and systemic education of parents and local communities</p>	<p>The prevention of early alcohol consumption should become an integral part of the school curriculum through systemic and continuous education on the risks and consequences of alcohol use, starting as early as primary education. Peer education is recognized as a particularly effective approach, within which young people, relying on mutual trust and the sharing of experiences, convey messages about the harmfulness of alcohol consumption. Additional value lies in direct work with young people through testimonies of individuals with personal, negative experiences related to alcohol. Parents and local communities should be included in prevention programs through continuous education and empowerment in recognizing and responding to risky behaviours among youth.</p>
<p>Improvement of tax policy</p>	<p>It is necessary to consider increasing excise duties on all alcoholic beverages, applying the principle of earmarked revenues, whereby part of the excise income would be allocated for prevention programs and treatment of diseases related to alcohol consumption. Given the key role of pricing policy in consumption control, it is essential to redefine the priorities of excise policy, which is currently predominantly focused on ensuring stable budget revenues, while disregarding possible long-term social benefits, including savings in healthcare and other public expenditures resulting from reduced alcohol consumption. The focus of the revised tax policy should be affordability. To achieve this, it is</p>

necessary to ensure that excise duties are continuously adjusted to reflect inflation trends and income growth of the population. It is also recommended to conduct an elasticity analysis between excise revenue and the level of alcohol consumption in order to empirically assess the impact of fiscal policy on consumption reduction and public revenue increase. Additionally, the introduction of a minimum price for alcoholic beverages should be considered in order to prevent substitution of more expensive drinks with cheaper ones.

Expansion of alcohol advertising bans in media and youth-related events

Introducing restrictions on advertising alcoholic beverages in media content and on digital platforms accessible to younger populations. Special attention must be directed toward preventing the promotion of alcohol through channels most frequently used by children and adolescents, in order to reduce their exposure to marketing messages that encourage early and risky consumption. Furthermore, it is necessary to restrict the industry's ability to sponsor events attended and followed by minors (sports, cultural, entertainment events, etc.), and to expand the advertising ban near educational institutions to include other spaces frequented by youth (youth clubs, theatres, parks, etc.).

Strengthening the capacity of inspection services and control mechanisms

Inspection services must be reinforced in terms of personnel and technical equipment to enable more effective supervision of the sale and promotion of alcoholic beverages, particularly near schools, youth centres, and other gathering places for young people. To monitor the implementation of laws, more intensive inspection activities must be conducted, including citizen participation and the implementation of "mystery shopping" operations. Experiences from Slovenia, which has begun intensive application of such measures, may be useful. It is necessary to develop more modern and effective models of law enforcement oversight, including the introduction of digital tools for alcohol sales recording and reporting irregularities by citizens and sector employees. In this context, the market inspection should establish a dedicated violation tracking system specifically for alcoholic beverages, separate from those related to tobacco products, pyrotechnics, and similar categories. Regular and transparent reporting of these data would enable better monitoring of trends and directing of inspection activities toward high-risk areas, thereby significantly improving law

	<p>enforcement and reducing alcohol availability among youth.</p>
<p>Development and financing of peer and digital campaigns with promotion of civil society participation in activities supporting healthy lifestyles</p>	<p>It is recommended to design modern campaigns aimed at informing youth about the harms of alcohol. These campaigns should use language and formats familiar to young people and enable their direct participation in the creation and implementation of the campaigns. The role of civil society in awareness-raising activities and direct work with youth is irreplaceable, given their experience working with young people “in the field.” Additionally, cooperation between civil society and other stakeholders should result in the implementation of actions that promote alternatives to alcohol consumption, based on healthy lifestyles.</p>
<p>Strengthening intersectoral cooperation</p>	<p>Addressing the issue of alcohol abuse requires coordinated action from the health, education, finance, police, and local government sectors, with clearly defined responsibilities and shared accountability. It is necessary to establish stable, long-term teams with institutional continuity and professional legitimacy, which will not be susceptible to political changes. Also, although the health sector is formally responsible, it operates with limited capacity, and an exceptionally small number of professionals are directly available to youth, which further complicates the implementation of preventive and counselling activities.</p>
<p>Reporting obligation and evaluation of outcomes</p>	<p>It is recommended to establish the obligation for regular reporting on the implementation of planned activities from existing and future strategic documents in the field of alcohol consumption prevention. At the same time, it is necessary to develop mechanisms for independent monitoring and evaluation of effectiveness, with clearly defined progress indicators that will be publicly accessible. Transparency in implementation and outcome assessment is a key prerequisite for responsible management of public policies and long-term improvement of their effectiveness.</p>

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