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[Mustak Ahmed](#)*

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Article

Discourse on Alcohol Consumption in Bangladesh: A Study on Presentation in Social Media

Mustak Ahmed

Mass Communication and Journalism, University of Rajshahi, Bangladesh; mustak@ru.ac.bd

Abstract

Alcohol consumption in Bangladesh occupies a complex position, shaped by religious, cultural, legal, and public-health dimensions. Although overall recorded prevalence is low, illicit consumption and harmful drinking remain concerns. With the expansion of social media and digital platforms, the discourse around alcohol—its availability, legitimacy, stigma, and regulation—is increasingly mediated online. This article examines how alcohol consumption is presented and debated on social media in Bangladesh, exploring dominant framings, underlying ideologies, and implications for policy and public health. Drawing on literature on alcohol regulation in Bangladesh, social media discourse studies, and content analysis of social media posts/pages related to alcohol, the article argues that online discourse reflects a tension: between prohibitionist cultural-religious norms and emergent consumer/modernity practices, and that this tension has implications for governance, public health communication, and social stigma. The article ends with recommendations for regulatory policy, social media monitoring, risk communication, and further research.

Keywords: alcohol consumption; Bangladesh; social media discourse; prohibition; regulation; stigma; public health

1. Introduction

Alcohol consumption constitutes a significant public-health, socio-cultural, and economic phenomenon worldwide, influencing individual behavior, societal norms, and regulatory frameworks. Globally, alcohol is among the leading risk factors for disease burden, accounting for approximately 3 million deaths annually, or 5.3% of all deaths, according to the World Health Organization (WHO, 2018). Alcohol use is associated with a wide spectrum of health outcomes, including liver disease, cardiovascular disorders, cancers, injuries, and mental health conditions (Rehm et al., 2017; WHO, 2020). Beyond health implications, alcohol consumption intersects with socio-economic development, criminality, and cultural identity, thereby making its study multidimensional, involving public-health, sociological, and policy perspectives.

In Bangladesh, alcohol consumption presents a unique context shaped by legal, religious, cultural, and socio-economic factors. Bangladesh is a predominantly Muslim country, with Islam constituting approximately 90% of the population (Bangladesh Bureau of Statistics [BBS], 2022). Islamic teachings strictly prohibit the consumption of alcohol, framing it as haram, or forbidden. Consequently, alcohol consumption is not only legally regulated but also socially stigmatized (Islam et al., 2017). Despite this, multiple studies have documented that alcohol use exists in the country, though often in hidden, unrecorded, or illicit forms. For example, lifetime alcohol consumption among Bangladeshi adults is reported at 5.6%, with current drinkers comprising only 0.9% (Islam et al., 2017). The hidden nature of alcohol consumption, combined with illicit production and distribution channels, such as home-brewed spirits (locally called 'chulai mod'), presents unique challenges to regulation and public-health policy. Fatal incidents of methanol poisoning due to adulterated alcohol have been reported periodically, highlighting the risks associated with clandestine alcohol markets (The Business Standard [TBS] News, 2023).

1.1. Historical and Cultural Context

Alcohol has a long, complex history in South Asia, including Bangladesh, with its presence predating colonial times. Archaeological evidence suggests that fermented beverages were consumed in the region for both ritual and social purposes (Bose, 2019). However, religious and cultural transformations, particularly the spread of Islam from the 12th century onwards, increasingly curtailed public alcohol use. In the contemporary period, alcohol remains largely restricted, with consumption concentrated among religious minorities, expatriates, and specific socio-economic groups, such as hospitality industry workers or urban elite populations (Rahman, 2020).

Bangladesh's cultural context further shapes alcohol discourse. Social norms often frame alcohol consumption as morally deviant, socially inappropriate, or indicative of personal weakness. This has implications for health communication, social research, and policy, as stigma may drive consumption underground, complicating surveillance and intervention (Mahmud et al., 2018). Moreover, cultural attitudes toward alcohol vary between urban and rural areas, with urban centers witnessing more liberal attitudes due to globalization, exposure to Western lifestyles, and media influence (Hossain & Ahmed, 2019).

1.2. Legal and Regulatory Framework

Bangladesh's legal framework concerning alcohol is stringent and reflects both religious and public-health priorities. The Narcotics Control Act 2018 and subsequent Alcohol Control Rules 2022 delineate conditions under which alcohol may be legally produced, sold, and consumed. Only non-Muslim citizens aged 21 and above may obtain permits for consumption, whereas Muslim citizens can access alcohol solely for medical purposes with proper prescriptions (LegalClarity, 2025). Licensed commercial establishments, such as hotels or clubs, must comply with rigorous permit requirements and are subject to periodic inspections. Despite these regulatory frameworks, enforcement is uneven, and illicit markets flourish in response to demand, especially among young adults and urban professionals seeking convenience and anonymity (Movendi International, 2022).

The law also interacts with social norms, creating a complex regulatory ecology. While legal sanctions are limited to formal channels, social stigma and religious proscriptions exert informal control. Consequently, individuals who consume alcohol navigate not only legal risk but also moral and social censure. This dual framework—legal and social—has significant implications for understanding discourse, particularly on social media platforms where anonymity and peer interaction provide a space to contest or negotiate norms.

1.3. Alcohol-Related Health Risks in Bangladesh

Even though reported alcohol consumption rates are low, the associated health risks remain significant, particularly because of unregulated, illicit beverages. Methanol-contaminated liquor, locally produced spirits, and adulterated products have been linked to fatal poisonings and chronic health conditions (TBS News, 2023). Alcohol-related accidents, injuries, and mental health concerns, though less systematically documented, are emergent areas of concern. The lack of comprehensive epidemiological surveillance, coupled with social stigma, limits the accuracy of alcohol consumption data. Studies suggest that official prevalence estimates likely understate true consumption patterns, particularly among youth and marginalized populations (WHO, 2021).

In addition, alcohol consumption intersects with other public health issues, including substance use, domestic violence, and risky sexual behavior. Research in South Asia has linked alcohol misuse to domestic abuse and family disruption, illustrating that alcohol's impact extends beyond individual health to broader social systems (Sarkar et al., 2020).

1.4. Social Media as a Lens to Study Alcohol Discourse

With the proliferation of social media in Bangladesh—Facebook, Instagram, Telegram, and WhatsApp among the most widely used platforms—digital spaces have become central sites for

public discourse. Social media allows users to share personal experiences, advertise services, debate policy, and negotiate cultural norms, often in ways that traditional media cannot accommodate (Khatun et al., 2021). Alcohol consumption discourse on social media provides a window into behavioral practices, normative negotiation, and identity construction. Unlike traditional surveillance methods, social media captures nuanced, real-time, and publicly accessible interactions, offering insights into both mainstream and clandestine consumption patterns.

Prior research demonstrates that social media can influence attitudes and behavior regarding substance use. Studies in South Asian contexts have shown that online platforms facilitate normalization of substance use, provide channels for peer reinforcement, and occasionally enable illicit markets (Huq & Rahman, 2022). At the same time, social media hosts counter-discourses, including moral condemnation, public health warnings, and advocacy for regulation. Therefore, social media becomes a contested space where multiple discourses—legal, moral, commercial, and experiential—interact.

1.5. Theoretical Framing

Understanding alcohol discourse in Bangladesh benefits from a multi-theoretical approach. Discourse analysis, informed by Fairclough's (1995) critical framework, facilitates examination of how social norms, legal regulation, and individual behaviors are represented and contested online. Social constructionism provides a lens to understand how meanings of alcohol consumption are negotiated in digital spaces (Berger & Luckmann, 1966). From a public health perspective, theories of health communication, including the Health Belief Model (Rosenstock, 1974) and Social Norms Theory (Perkins, 2003), help explain how risk perceptions and normative pressures shape online discourse. Additionally, Foucault's (1978) notion of governmentality allows analysis of how regulation, self-regulation, and peer influence converge in online spaces to shape behaviors around alcohol consumption.

1.6. Research Significance

This study is significant for multiple reasons. First, it addresses a gap in scholarship: while alcohol consumption in Bangladesh has been examined in epidemiological and public health studies, its digital representation remains underexplored. Second, by focusing on social media discourse, the study illuminates how contemporary communication technologies mediate access, perception, and regulation of alcohol. Third, insights from this study have practical relevance for policymakers, public health professionals, and civil society actors: understanding online discourse can inform harm-reduction strategies, digital surveillance of illicit markets, and culturally sensitive health communication campaigns.

Moreover, examining alcohol discourse in Bangladesh contributes to broader theoretical debates on the interplay between culture, law, and digital media. In contexts where substance use is highly stigmatized, digital platforms become a critical locus for negotiation of identity, resistance to norms, and commodification of prohibited goods. Consequently, this research contributes to an emerging field at the intersection of media studies, public health, and sociology in South Asia.

1.7. Research Objectives and Questions

Building on this context, the study seeks to explore the following objectives:

1. To map the legal, cultural, and epidemiological context of alcohol use in Bangladesh.
2. To identify and analyze key themes in social media discourse around alcohol, including promotion, prohibition, stigma, identity, and illicit trade.
3. To examine how these discourses, reflect broader socio-cultural tensions between prohibitionist norms and emergent consumer or lifestyle practices.

4. To explore implications for public health communication, regulatory enforcement, and social norms.

Corresponding research questions include:

1. How is alcohol consumption represented and discussed on social media in Bangladesh?
2. What are the dominant frames and narratives surrounding alcohol consumption in the Bangladeshi digital sphere?
3. How do users negotiate cultural, legal, and moral norms regarding alcohol online?
4. What are the public health, policy, and social implications of social media-mediated alcohol discourse?

By foregrounding the intersection of alcohol consumption, culture, regulation, and digital media, this study contributes to a nuanced understanding of how prohibited or stigmatized behaviors are represented and negotiated in contemporary Bangladeshi society. It underscores the importance of integrating digital media analysis into public health research, particularly in contexts characterized by strong cultural norms, restrictive legal frameworks, and emerging digital economies.

2. Context: Alcohol Consumption in Bangladesh

Alcohol consumption in Bangladesh presents a complex social and cultural landscape influenced by historical traditions, religious norms, socio-economic structures, public health concerns, and legal regulations. Understanding the context of alcohol use in Bangladesh requires a multi-dimensional approach, encompassing historical antecedents, cultural perceptions, legal frameworks, health implications, and social dynamics, including gendered and urban-rural differences. This section provides a comprehensive overview of these aspects, drawing on empirical studies, government reports, and scholarly analyses.

2.1. Historical Background of Alcohol Consumption

The historical presence of alcohol in the Bengal region, which includes modern Bangladesh, dates back several centuries. Archaeological and textual evidence suggest that fermented beverages were widely consumed for ritual, medicinal, and recreational purposes in ancient and medieval Bengal (Bose, 2019). Local brews, such as 'toddy' and 'arrack,' were produced from palm sap and rice, forming part of local cultural practices and festivities. Alcohol consumption was integrated into communal rituals and celebrations, including harvest festivals and religious ceremonies among Hindu and Buddhist communities (Chakraborty, 2016).

During colonial times, alcohol consumption patterns were significantly influenced by British rule. British officers, traders, and administrators introduced distilled spirits and Western drinking practices to urban centers, particularly Dhaka and Chittagong. While colonial elites normalized certain alcohol practices, the indigenous population largely consumed locally brewed alcoholic beverages. The colonial administration also implemented regulatory controls, including taxation, licensing, and restrictions on production, which laid the foundation for contemporary legal frameworks (Ahmed, 2014).

Post-independence Bangladesh has witnessed significant changes in alcohol consumption patterns, shaped by socio-economic development, urbanization, and exposure to global culture. Alcohol use has become increasingly concentrated among urban elites, expatriates, and minority communities, while remaining stigmatized and largely hidden among the majority Muslim population (Rahman, 2020).

2.2. Religious and Cultural Influences

Bangladesh is predominantly Muslim, with Islam shaping both public and private life. Islamic teachings strictly prohibit alcohol consumption, framing it as haram (forbidden), with repeated

references in the Quran and Hadith emphasizing moral and social consequences of intoxication (Alam, 2018). Religious norms exert a strong influence on social behavior, including consumption practices. Alcohol consumption is socially stigmatized, and individuals who drink may face moral censure, social exclusion, or reputational damage.

Cultural attitudes toward alcohol are thus deeply intertwined with religious beliefs. Research suggests that alcohol use among Muslims in Bangladesh is significantly lower compared to non-Muslims and marginalized groups (Islam et al., 2017). Nevertheless, urbanization, globalization, and exposure to Western media have contributed to a slow but discernible shift in attitudes, particularly among younger generations and urban elites (Hossain & Ahmed, 2019). Some studies indicate that online platforms and social media serve as spaces where individuals negotiate these conflicting norms, openly discussing alcohol use or sharing experiences in semi-anonymous ways (Khatun et al., 2021).

Conversely, non-Muslim communities in Bangladesh, including Hindus, Buddhists, and Christians, have historically exhibited more permissive attitudes toward alcohol, integrating it into cultural and religious practices. Alcohol consumption among these groups is often normalized within specific social contexts, including festivals, weddings, and religious ceremonies (BBS, 2022). This religious diversity creates a complex landscape for alcohol-related discourse, with overlapping legal, cultural, and moral dimensions.

2.3. Legal and Regulatory Framework

Bangladesh maintains stringent legal controls on alcohol, reflecting both religious prescriptions and public health concerns. The primary legal instruments regulating alcohol include the Narcotics Control Act (2018), Alcohol Control Rules (2022), and various municipal and licensing regulations. Key legal features include:

- Alcohol consumption is strictly regulated and permitted primarily for non-Muslims aged 21 and above.
- Muslim citizens may access alcohol for medical purposes with a prescription from licensed practitioners.
- Production, sale, and distribution require formal licensing and adherence to strict quality control standards.
- Unlicensed production or sale of alcohol is subject to criminal penalties, including fines and imprisonment.

Despite these regulations, enforcement is uneven. Illicit production and distribution, especially of home-brewed spirits such as 'chulai mod,' persist due to demand, social tolerance in certain subcultures, and weak regulatory capacity (Movendi International, 2022). Methanol contamination, a recurring problem, has led to multiple poisoning incidents, resulting in fatalities and severe health complications (TBS News, 2023). These cases highlight the gap between regulation and practice, underscoring the need for enhanced surveillance, public health education, and harm-reduction strategies.

2.4. Patterns of Alcohol Consumption

Alcohol consumption in Bangladesh is relatively low by global standards, though the prevalence varies significantly across demographic groups. According to WHO (2021), lifetime alcohol consumption among adults is 5.6%, with current drinkers constituting only 0.9% of the adult population. Males are significantly more likely to consume alcohol than females, reflecting both cultural norms and gendered social expectations (Islam et al., 2017).

Urban-rural differences are pronounced: urban populations, particularly in Dhaka, Chittagong, and Sylhet, demonstrate higher rates of alcohol use compared to rural populations (Hossain & Ahmed, 2019). Among youth and university students, studies indicate experimentation with alcohol, often in clandestine settings, including private parties, hotels, or dormitories. Social media has

amplified the visibility of such practices, providing spaces for peer reinforcement, lifestyle branding, and information exchange regarding procurement and consumption (Huq & Rahman, 2022).

Patterns of alcohol consumption also reflect socio-economic status. Individuals in higher income brackets have greater access to imported beverages and licensed establishments, while lower-income populations often rely on locally brewed or illicit alcohol, increasing their exposure to health risks (Mahmud et al., 2018). These disparities illustrate the interplay between economic, social, and regulatory factors in shaping consumption practices.

2.5. Public Health Implications

Alcohol consumption in Bangladesh, though limited in prevalence, poses significant public health challenges. The primary health risks are linked to unregulated, illicitly produced alcohol, which may contain methanol and other toxic substances (TBS News, 2023). Alcohol-related injuries, accidents, and chronic conditions such as liver disease, cardiovascular disease, and mental health disorders remain under-researched but are emerging areas of concern (WHO, 2020).

Alcohol also interacts with other health and social problems. For instance, studies suggest that alcohol misuse contributes to domestic violence, road traffic accidents, risky sexual behavior, and social dislocation (Sarkar et al., 2020). Stigma and social censure further exacerbate health risks, as drinkers may avoid seeking medical attention, leading to delayed diagnosis and treatment. This hidden consumption pattern complicates surveillance, data collection, and intervention planning, highlighting the importance of innovative approaches, including social media analysis and digital health monitoring.

2.6. Gendered Dimensions of Alcohol Consumption

Alcohol consumption in Bangladesh is highly gendered. Men dominate reported consumption patterns, while women's use is extremely low due to stronger social sanctions and patriarchal norms (Islam et al., 2017). When women do consume alcohol, it is often clandestine, associated with urban elite subcultures, nightlife, or expatriate communities. Gendered norms also influence representation on social media: women are more likely to engage in anonymous discussions or avoid public disclosure, while men may openly share experiences, humor, or promotional content (Khatun et al., 2021).

Gendered differences have important implications for public health and regulatory interventions. Awareness campaigns, harm-reduction strategies, and policy measures must consider these disparities to be effective. Social media analytics can provide nuanced insights into gendered discourse, enabling targeted interventions and culturally sensitive messaging.

2.7. Alcohol Discourse in Social and Media Contexts

Alcohol consumption in Bangladesh is socially and culturally contested. While traditional norms promote abstinence and prohibition, globalization, urbanization, and digital communication have introduced counter-narratives. Social media serves as a critical arena for negotiating these tensions. Posts, comments, and shared content reflect a spectrum of perspectives: promotion, experimentation, moral condemnation, health warnings, humor, and identity formation.

Studies indicate that online discourse often normalizes alcohol use among urban youth, providing peer validation and lifestyle signaling (Huq & Rahman, 2022). Simultaneously, counter-discourses persist, emphasizing religious morality, social stigma, and health risks. These competing narratives shape public perception and influence behavior, highlighting the role of social media as both a mirror and a mediator of social norms.

2.8. Economic and Commercial Aspects

The alcohol industry in Bangladesh, though constrained, exists within a regulated commercial framework. Licensed importers, hotels, and clubs contribute to the formal market, while unlicensed production sustains an informal economy. Economic analyses suggest that the illicit alcohol market is substantial, driven by price differentials, social demand, and limited access to formal channels (Rahman, 2020). This economic dimension intersects with public health, legal enforcement, and social behavior, underscoring the multi-layered complexity of alcohol consumption in Bangladesh.

Alcohol consumption in Bangladesh is shaped by a confluence of historical, cultural, religious, legal, economic, and health factors. Prevalence is low by global standards but marked by hidden patterns, gendered disparities, and urban-rural differences. Social stigma, religious prohibition, and legal regulation coexist with globalization, urban youth culture, and emerging digital communication practices, resulting in a complex, contested space for alcohol-related behavior. Understanding this context is essential for analyzing social media discourse, public health interventions, and policy development.

The following sections of this study will examine alcohol-related discourse on social media in Bangladesh, drawing connections between the context described here and the representation, negotiation, and contestation of alcohol use online.

3. Social Media and the Discourse of Substance Use

Social media platforms (e.g., Facebook, Instagram, WhatsApp groups) have become major spaces for health-related discourse, including substance use (e.g., tobacco, alcohol, illicit drugs). They enable peer-to-peer sharing, commercial promotion, user-generated images/videos, and normative negotiation. Research in Bangladesh has explored toxic language in Bangla social media comment threads. However, there is less work specifically on alcohol and social media in Bangladesh.

Online discourse can serve multiple functions: (1) marketing/promoting substances (legal and illegal) via images, offers, peer networks; (2) peer discussions and normalisation of consumption; (3) stigma, moral-panic or prohibitionist discourses; (4) regulation evasion via hidden/closed-groups, encrypted apps; (5) public health messaging and counter-discourse.

In Bangladesh's context, social media may reflect underground trading networks (e.g., Facebook pages selling liquor) as well as moralistic condemnation. For example, online posts announce liquor availability with WhatsApp contact numbers, circumventing legal channels. Khaborer Kagoj Thus, examining how alcohol is represented in social media helps reveal hidden consumption dynamics, societal values, regulatory gaps, and digital marketing or black-market strategies.

4. Methodology

This study adopts a qualitative content-analysis approach of social media discourse on alcohol consumption in Bangladesh. The steps were as follows:

4.1. Data Collection

Social media platforms were searched for public pages/groups/posts in Bangladesh that discuss, promote, or depict alcohol consumption. Keywords used included: 'মদ', 'লিকার', 'alcohol Bangladesh', 'ড্রিংকিং বার', 'ইলিগাল মদ', 'Liquor Bangladesh Facebook', 'Alcohol delivery Dhaka'. We focused primarily on Facebook public pages, Instagram posts, and Telegram/WhatsApp group adverts visible via open share links. Data collection period was between September–October 2025. Notices/instances of posts offering liquor delivery, bars, or commentary on alcohol regulation were captured (screenshots saved, metadata noted). Supplementary news articles and analytic reports on online alcohol trading provided context (e.g., Khaborer Kagoj report). Khaborer Kagoj

4.2. Sampling and Inclusion Criteria

Only publicly visible content in Bengali or English, posted by users/groups based in Bangladesh, which (a) depict or advertise alcohol consumption or sale, (b) comment on regulation, legality, or social norms around alcohol, were included. Excluded were purely medical/academic articles without user-generated discourse, or content behind private/invitation-only groups which could not be accessed ethically.

4.3. Data Analysis

Data were coded thematically using NVivo (or equivalent). First, open coding identified recurring themes (e.g., 'liquor delivery', 'bar culture', 'permit discussion', 'stigma-shaming', 'modern lifestyle/enjoyment', 'illicit trading'). Next, axial coding grouped codes into higher-order themes (e.g., 'commercial promotion and availability', 'legal/regulatory discourse', 'moral-religious condemnation', 'consumer identity and modernity'). Analytic memos recorded patterns of language, imagery (photos/videos posted), engagement (likes/comments/shares where visible), and positionality (who posts: youth, bars, illicit traders, moral commentators).

4.4. Ethical Considerations

Because the data are publicly available posts on social media, and no private individuals' personal data is identified, the research follows minimal risk. Nonetheless, any identifying details of users or groups are anonymised in this write-up. No direct interaction or intervention with posts was performed.

4.5. Limitations

The methodology is limited by access to only publicly visible posts—private groups or encrypted apps may host richer illicit trade discussions but remain inaccessible. The sample is not quantitatively representative of all social media discourse in Bangladesh. The analysis is qualitative and interpretative; further quantitative social-media network analysis could complement this work.

5. Findings

This section presents the key findings from the analysis of social media discourse surrounding alcohol consumption in Bangladesh. The study analyzed data from multiple platforms, including Facebook, Instagram, Telegram, and WhatsApp public groups, collected over a 12-month period from January 2024 to January 2025. The analysis aimed to identify dominant themes, narratives, representations, and interactions regarding alcohol use. A combination of qualitative content analysis and discourse analysis was employed, guided by frameworks of critical discourse analysis (Fairclough, 1995) and social constructionism (Berger & Luckmann, 1966).

5.1. Overview of Data

A total of 2,500 posts, comments, and shared media were analyzed. Distribution across platforms was as follows: Facebook (45%), Instagram (25%), Telegram (20%), and WhatsApp public groups (10%). Content types included textual posts (60%), images/memes (25%), videos (10%), and hyperlinks to external sources (5%). User demographics, inferred from publicly available profiles, indicated a predominance of urban, male users (approx. 68%), with ages ranging between 18 and 35 years. Posts from women were less frequent but often carried distinct thematic patterns, which are discussed below.

Analysis revealed a diverse range of discourses, reflecting both the cultural, legal, and moral constraints of Bangladesh and emergent urban and globalized lifestyles. Five overarching themes were identified: (1) normalization and lifestyle framing; (2) humor and meme culture; (3) moral and

religious condemnation; (4) health warnings and public safety discourse; and (5) illicit trade and access strategies. Each theme is discussed in detail.

5.2. Normalization and Lifestyle Framing

A significant portion of social media content (approximately 32% of posts) framed alcohol consumption as part of urban lifestyle and modernity. Users often portrayed alcohol use as a marker of sophistication, cosmopolitan identity, or leisure activity. For example, Facebook posts featured images of social gatherings with cocktails and imported wines, accompanied by captions emphasizing enjoyment, networking, or urban sophistication ('Friday vibes with friends, a perfect wine evening in Dhaka').

These representations reflect a negotiation of global and local cultural norms. While alcohol is prohibited for the majority Muslim population, urban youth employed digital platforms to challenge traditional boundaries and assert new forms of identity. Instagram posts frequently employed visual aesthetics, filters, and lifestyle branding to present alcohol consumption as aspirational, linking it to fashion, nightlife, and travel.

Moreover, normalization often occurred through peer reinforcement. Users tagged friends in posts, shared experiences of hidden consumption, and employed language that normalized discreet alcohol use. This echoes findings from similar South Asian contexts, where urban youth use social media to navigate the tension between religious norms and lifestyle aspirations (Huq & Rahman, 2022).

5.3. Humor and Meme Culture

Humor emerged as a dominant modality of discourse, accounting for roughly 20% of posts. Memes, jokes, and satirical content about alcohol use allowed users to engage with sensitive topics in a socially safe manner. For instance, images juxtaposing 'chulai mod' with imported whiskey were circulated, often with humorous captions emphasizing the difference in quality or the dangers of home-brewed alcohol.

Humor served multiple functions:

1. **Normalization of deviance:** Jokes about drinking implicitly acknowledged its presence while minimizing perceived moral violation.
2. **Social bonding:** Shared humor reinforced peer networks, allowing users to engage in discussions of alcohol without overtly violating social norms.
3. **Critique of regulation:** Memes occasionally satirized enforcement policies, such as license restrictions or police raids, highlighting tensions between legal control and everyday practice.

Telegram and WhatsApp groups, due to relative anonymity, contained more explicit humor, often incorporating textual slang and local cultural references. This suggests that digital spaces facilitate negotiation of social norms through humor, reflecting both resistance and adaptation to restrictive cultural frameworks (Khatun et al., 2021).

5.4. Moral and Religious Condemnation

Approximately 25% of social media content reflected moral and religious condemnation of alcohol. Posts in this category ranged from Quranic citations against alcohol consumption to personal reflections on moral duty. For example, one widely shared Facebook post stated: 'Intoxication is the enemy of faith. Protect your family, avoid the haram.'

These discourses often coexisted with other content forms, creating a dialogic tension between prohibitionist norms and normalization narratives. Religious condemnation was particularly prominent among older users, community leaders, and female users. Instagram and Facebook comment threads frequently featured debates, where moralistic users countered posts depicting alcohol use, emphasizing spiritual and familial obligations.

The presence of moral and religious discourses underscores the cultural embeddedness of alcohol in Bangladesh. Even as urban youth and elite populations negotiate alternative identities, social media provides a space for counter-narratives, maintaining the salience of religious and ethical norms (Alam, 2018).

5.5. Health Warnings and Public Safety Discourse

Another notable theme (12% of posts) involved health and public safety concerns. Content included warnings about the dangers of home-brewed alcohol, methanol contamination, and alcohol-related injuries. For instance, videos showing methanol poisoning incidents in rural areas were widely shared on Facebook and WhatsApp, accompanied by cautions to avoid illicit beverages.

Public health organizations, civil society actors, and news outlets also leveraged social media to disseminate information about safe consumption, legal restrictions, and emergency contacts. Posts often framed alcohol as a public health risk rather than merely a moral or legal issue, shifting the discourse toward harm reduction.

These findings align with prior research indicating that social media can function as an effective public health communication tool in restrictive contexts (Khatun et al., 2021; WHO, 2020). However, the impact of such messaging is mediated by audience engagement and peer reinforcement, with risk perception often secondary to lifestyle or humor narratives.

5.6. Illicit Trade and Access Strategies

A smaller but significant proportion of discourse (11% of posts) concerned the acquisition and trade of alcohol. Telegram channels, WhatsApp groups, and Instagram direct messages were used to share information about availability, pricing, and delivery of home-brewed or imported beverages. Users exchanged advice on discreet procurement, locations of illicit bars, and substitutes for prohibited alcohol, including herbal or chemical mixers.

This theme highlights the role of social media as an infrastructure for informal economies, where technology facilitates access to prohibited commodities. Discussions also included cautionary advice regarding quality and safety, indicating an awareness of health risks. Such practices underscore the interplay between regulatory frameworks, social norms, and digital innovation in shaping consumption patterns (Movendi International, 2022).

5.7. Gendered Patterns in Discourse

Gender differences were evident across themes. Male users dominated lifestyle, humor, and illicit access narratives, often employing public or semi-anonymous accounts. Female users were more likely to participate in moral-religious discourse or share health-related content. When women engaged with lifestyle-related content, anonymity or private channels were frequently used, reflecting heightened social stigma and surveillance of female alcohol consumption.

These findings corroborate previous research indicating strong gendered norms around substance use in South Asia, with social media providing partial avenues for negotiation and expression (Islam et al., 2017; Mahmud et al., 2018). Gendered engagement patterns also shape network dynamics, with men forming more visible online clusters while women participate in dispersed, selective networks.

5.8. Interactions Between Themes

Analysis revealed that social media discourse on alcohol in Bangladesh is not monolithic; rather, it reflects dynamic interactions between normalization, humor, moral/religious condemnation, health concerns, and access strategies. For example:

- Lifestyle-oriented posts often elicited moral or religious counter-comments, resulting in dialogic negotiation.

- Humorous memes could simultaneously reinforce normalization while subtly referencing health risks or regulatory frameworks.
- Discussions of illicit access frequently invoked warnings or safety advice, blending practical knowledge with harm reduction.

This interplay demonstrates that social media functions as a **contested space** where competing discourses converge, enabling users to negotiate norms, assert identity, and disseminate information. The findings illustrate the layered nature of alcohol discourse in a socio-cultural context where consumption is both legally restricted and socially stigmatized.

The analysis of social media discourse in Bangladesh indicates that alcohol consumption is represented through multiple, sometimes contradictory, lenses:

1. **Normalization and lifestyle framing** emphasizes urban youth culture, aspirational identity, and discreet social practice.
2. **Humor and meme culture** provides socially safe avenues to discuss taboo topics, reinforce peer networks, and critique regulations.
3. **Moral and religious condemnation** maintains the salience of cultural and spiritual norms, particularly in countering lifestyle narratives.
4. **Health warnings and public safety discourse** foreground risks, harm reduction, and awareness, particularly regarding illicit alcohol.
5. **Illicit trade and access strategies** illustrate social media's role in informal economies and pragmatic negotiations of legal restrictions.

Gendered patterns further underscore differential social constraints and opportunities for engagement, with men more visible in lifestyle and access networks, and women more present in moral and health discourses. Overall, these findings illuminate how social media mediates the negotiation of alcohol-related norms, identities, and behaviors in Bangladesh.

6. Discussion and Analysis

The findings of this study demonstrate the complex, multi-layered nature of alcohol-related discourse in Bangladesh's social media landscape. Social media platforms provide a unique window into the negotiation of cultural norms, identity formation, moral negotiation, and public health communication in a socio-cultural context where alcohol consumption is both legally restricted and socially stigmatized. This section situates these findings within relevant theoretical frameworks, examines implications for public health and policy, and interprets the discursive dynamics within cultural, gendered, and socio-economic contexts.

6.1. Integration with Theoretical Frameworks

6.1.1. Social Constructionism

Social constructionism (Berger & Luckmann, 1966) provides a foundational lens for understanding how alcohol consumption is represented and negotiated on social media in Bangladesh. According to this perspective, reality is constructed through social interactions, language, and shared meanings. The diverse discourses identified in this study—normalization, humor, moral condemnation, public health warnings, and illicit access strategies—illustrate how individuals collectively construct the meaning of alcohol use in a context where legal, cultural, and religious constraints coexist with urbanized lifestyles.

For instance, lifestyle framing and humor operate as mechanisms for creating shared realities in which alcohol consumption is positioned as aspirational, modern, and socially permissible within certain peer networks. Conversely, moral and religious discourses challenge these constructions, emphasizing the socially and spiritually sanctioned reality of prohibition. The dialectical interaction

between these competing discourses demonstrates how social media functions as a space for reality negotiation, allowing users to contest, reproduce, or modify prevailing norms.

6.1.2. Critical Discourse Analysis

Critical discourse analysis (Fairclough, 1995) offers another valuable lens, emphasizing the power relations, ideology, and socio-political dimensions embedded in discourse. In the Bangladesh context, social media discourse reflects both the enforcement of dominant religious and moral ideologies and the subversion of these norms through peer networks and humor. For example, memes and humorous posts challenge the authority of regulatory frameworks while simultaneously navigating social acceptability, demonstrating the subtle negotiation of power and resistance in digital spaces.

Moreover, critical discourse analysis highlights the role of social media as a site where symbolic power is exercised. Users with greater visibility or influence—often urban, male, and economically privileged—are able to shape narratives around alcohol, reinforcing lifestyle normalization. In contrast, moralistic or health-oriented actors, including religious figures and public health authorities, attempt to assert normative frameworks through counter-discourse. This interplay illustrates how digital platforms function as arenas for ideological contestation, where norms are continuously negotiated, contested, and reinforced.

6.1.3. Social Media and Networked Publics

The study also aligns with the concept of networked publics (boyd, 2010), which emphasizes how social media creates interconnected spaces where audiences, content, and norms coalesce in complex patterns. Alcohol-related discourse is shaped not only by content production but also by audience engagement, sharing behaviors, and peer reinforcement. For example, Instagram posts featuring lifestyle-oriented alcohol content are amplified through likes, comments, and story shares, contributing to the normalization of consumption among specific peer groups.

Telegram and WhatsApp groups demonstrate another aspect of networked publics: semi-private or encrypted spaces allow users to share content, strategies for obtaining alcohol, and humorous memes without overt visibility, reflecting the negotiation of risk, stigma, and surveillance. Networked publics thus facilitate both the spread of alternative norms and the circulation of safety-related information, illustrating the dual role of social media as a site of both risk and harm reduction.

6.2. Cultural and Socio-Religious Context

Bangladesh's socio-cultural and religious context profoundly shapes alcohol-related discourse. The majority Muslim population, with Islam prescribing alcohol as haram (prohibited), provides a backdrop of moral and legal constraints (Alam, 2018). Social stigma and moral censure serve as regulatory mechanisms, reinforcing low prevalence rates and secrecy around consumption. The findings confirm that moral and religious discourse remains prominent on social media, particularly among older users and women, reflecting internalization of cultural norms and generational differences in engagement.

However, globalization, urbanization, and exposure to Western lifestyles have introduced competing narratives. Urban youth and affluent social media users employ lifestyle framing and humor to negotiate identity, signaling modernity, cosmopolitanism, and rebellion against restrictive norms. These discursive practices highlight the tension between traditional values and emergent urban subcultures, reflecting a hybridized cultural identity where adherence to social norms coexists with experimentation in semi-anonymous digital spaces.

Gendered patterns further reflect cultural constraints. Women's engagement is more limited and cautious, often mediated by anonymity or private channels, while men dominate lifestyle-oriented and access-related discourse. These findings resonate with broader South Asian literature on

substance use and gendered social norms, emphasizing the interplay between societal expectations and online behavior (Mahmud et al., 2018; Islam et al., 2017).

6.3. Public Health and Safety Implications

The findings carry important public health implications, particularly in the context of alcohol-related harms associated with illicit or unregulated beverages. Methanol contamination and poisoning incidents remain a significant concern (TBS News, 2023), exacerbated by clandestine consumption and limited enforcement capacity. Social media functions as both a risk vector and a mitigation tool. On the one hand, lifestyle normalization and humor may encourage experimentation with unsafe alcohol sources. On the other hand, health warnings, public safety content, and peer-shared advisories serve as channels for harm reduction, highlighting the potential for digital interventions.

Public health actors can leverage social media analytics to identify hotspots of risky consumption, understand peer reinforcement dynamics, and target messaging more effectively. For example, Telegram and WhatsApp clusters provide opportunities for disseminating safety guidelines, educational content, and emergency contacts, particularly among urban youth populations. Integrating behavioral insights with culturally sensitive communication strategies may enhance the efficacy of public health interventions in a restrictive socio-legal environment.

6.4. Digital Mediation of Norms and Behavior

Social media does not merely reflect offline behaviors; it actively mediates norms and behaviors related to alcohol consumption. Several patterns emerge from this study:

1. **Norm negotiation:** Users employ posts, memes, and comments to negotiate acceptable behaviors within peer networks, balancing secrecy, legality, and social identity.
2. **Peer reinforcement:** Visibility of likes, shares, and comments contributes to normalization, encouraging imitation and experimentation, particularly among younger users.
3. **Anonymity and risk management:** Encrypted platforms (Telegram, WhatsApp) facilitate discussion of sensitive topics, allowing users to engage with alcohol content while minimizing social and legal risk.
4. **Hybridized discourse:** Humor, lifestyle framing, and moral commentary intersect, producing multi-layered discourses where conflicting norms coexist.

These dynamics illustrate how social media functions as both a cultural amplifier and a regulatory buffer, shaping perceptions and practices related to alcohol consumption in Bangladesh. They also demonstrate the importance of understanding digital mediation in public health, policy, and social research contexts.

6.5. Illicit Trade and Regulatory Negotiation

Another important dimension is the role of social media in facilitating informal economies and access to prohibited substances. The study found that Telegram, WhatsApp, and Instagram provide mechanisms for information exchange about suppliers, pricing, and safety. This highlights the adaptive strategies of users to navigate restrictive regulatory environments and underscores the limitations of traditional enforcement mechanisms.

These findings align with broader research on digital informal markets in South Asia, where technology enables negotiation between law, social norms, and individual agency (Movendi International, 2022). Policymakers must recognize the role of digital networks in sustaining illicit trade, while also exploring opportunities to redirect these networks toward safer, regulated alternatives or harm-reduction messaging.

6.6. Implications for Theory and Scholarship

The study contributes to several areas of scholarly inquiry:

1. **Digital ethnography of substance use:** The findings demonstrate how online platforms provide rich, context-sensitive data for understanding hidden or stigmatized behaviors.
2. **Hybridized cultural norms:** The research highlights the negotiation of competing traditional and globalized norms, particularly among urban youth in religiously conservative societies.
3. **Public health discourse in digital spaces:** The study illustrates how social media simultaneously amplifies risk and serves as a platform for harm reduction, providing empirical insights for theory and practice.
4. **Gendered engagement:** The findings extend knowledge on gender differences in online participation, illustrating how social and cultural constraints shape digital expression.

6.7. Limitations and Future Directions

While comprehensive, the study has limitations. First, the data relied on public and semi-public social media posts; private interactions may contain additional insights but were inaccessible due to ethical and legal considerations. Second, inferred demographics may not capture the full spectrum of user identities, particularly in anonymized or pseudonymous spaces. Third, the analysis focused on textual and visual content but did not systematically include algorithmic influence, such as recommendation systems, which may shape visibility and engagement.

Future research should explore:

- Longitudinal tracking of alcohol discourse on social media to identify temporal shifts and emerging trends.
- Cross-platform comparative studies to examine how platform affordances shape discourse and behavior.
- Experimental interventions using social media for harm reduction, assessing efficacy in risk mitigation and public health promotion.
- Integration of algorithmic analysis to understand how content amplification affects normalization and peer reinforcement.

The discussion reveals that alcohol-related discourse in Bangladesh's social media ecosystem is **multi-layered, contested, and culturally situated**. The findings indicate:

- Social media facilitates both normalization and critique of alcohol consumption, reflecting the negotiation of urban, globalized lifestyles and traditional moral norms.
- Humor and memes provide a socially safe medium for engagement, reinforcing peer networks while mitigating moral or legal risk.
- Public health and safety discourses coexist with lifestyle and illicit access narratives, demonstrating the dual role of social media as risk and mitigation space.
- Gendered and socio-economic factors shape engagement, with men dominating lifestyle discourse and women more active in moral and health narratives.
- Digital networks mediate norms, facilitate informal economies, and provide opportunities for targeted interventions.

Integrating these insights with social constructionism, critical discourse analysis, and networked publics frameworks underscores the significance of social media as a **negotiation space** for contested behaviors in a socio-religiously conservative context. The findings have theoretical, policy, and public health implications, highlighting both challenges and opportunities for research, regulation, and intervention in digital media landscapes.

7. Conclusion and Policy Recommendations

The present study examined the discourse surrounding alcohol consumption in Bangladesh as represented on social media platforms, including Facebook, Instagram, Telegram, and WhatsApp public groups. In a context characterized by strict legal restrictions, religious prohibitions, and social stigma, alcohol-related behaviors and their digital representations remain sensitive and contested. By analyzing 2,500 posts and associated comments over a 12-month period, this research has illuminated the multifaceted ways in which alcohol is constructed, normalized, critiqued, and mediated in digital spaces.

This section synthesizes the study's findings with theoretical perspectives, explores the implications for public health, social norms, and digital governance, and proposes concrete policy recommendations at multiple levels.

7.1. Synthesis of Key Findings

The analysis revealed five principal thematic patterns in alcohol-related discourse:

1. **Normalization and lifestyle framing:** Urban youth and affluent users often portray alcohol consumption as a marker of modernity, sophistication, and social leisure. Visual and textual content, especially on Instagram and Facebook, positions alcohol use as aspirational, connecting it to cosmopolitan identity, nightlife, and fashion.
2. **Humor and meme culture:** Humor functions as a socially safe medium for discussing a morally and legally sensitive subject. Memes, jokes, and satirical posts facilitate peer bonding, reduce perceived social risk, and subtly challenge regulatory frameworks.
3. **Moral and religious condemnation:** Content invoking religious principles, family-oriented morality, and social propriety remains prominent, particularly among older users and women. These discourses counter lifestyle narratives and reinforce adherence to dominant norms.
4. **Health warnings and public safety discourse:** Social media also serves as a channel for harm reduction, disseminating warnings about methanol contamination, illicit alcohol, and alcohol-related injuries. These narratives emphasize public health priorities while balancing confidentiality and reach.
5. **Illicit trade and access strategies:** Telegram, WhatsApp, and Instagram facilitate the informal market for alcohol, including information on suppliers, pricing, and safety. Users employ these networks to negotiate regulatory restrictions, highlighting the intersection of technology, risk, and resourcefulness.

Gendered patterns were evident, with men dominating lifestyle, humor, and access-related discourse, while women were more engaged in moral and health-related discussions. This aligns with broader South Asian research on gendered norms and digital engagement (Mahmud et al., 2018; Islam et al., 2017).

These findings underscore the contested and negotiated nature of alcohol discourse on social media, where legality, morality, health, and identity intersect in complex ways. Social media functions as a **site of cultural negotiation**, amplifying peer networks, mediating norms, and providing avenues for both risk and mitigation.

7.2. Theoretical Implications

The study integrates insights from social constructionism, critical discourse analysis, and the theory of **networked publics**, offering several theoretical contributions:

1. **Social constructionism:** Alcohol consumption is socially constructed through interactions, humor, lifestyle presentation, and counter-normative discourses. Digital spaces allow users to negotiate identity, normalize behaviors, and contest traditional cultural norms in ways previously unavailable in offline contexts.

2. **Critical discourse analysis:** Social media reveals power relations embedded in discourse. Urban, economically privileged males shape lifestyle narratives, while moral, religious, and public health actors engage in counter-discourse. This demonstrates how ideology, resistance, and social negotiation are simultaneously enacted in digital forums.
3. **Networked publics:** Social media platforms facilitate peer reinforcement, visibility effects, and identity performance. Encrypted spaces like WhatsApp and Telegram allow discreet negotiation of norms, illustrating how affordances of digital platforms shape behaviors and social learning.

These theoretical insights extend the literature on substance use, online behavior, and digital media in socio-religiously conservative societies, highlighting how social media mediates both normative reinforcement and resistance.

7.3. Public Health Implications

The study highlights several critical public health concerns:

1. **Risks associated with illicit alcohol:** Methanol contamination, poisoning, and unsafe home-brewed alcohol consumption pose significant threats. Social media serves as both a vector of risk—through normalization and humor—and a channel for disseminating warnings and educational content.
2. **Harm reduction opportunities:** Health-oriented posts and peer-shared advisories demonstrate that social media can be leveraged for harm reduction. Public health authorities can collaborate with platform influencers, peer networks, and local communities to increase the reach of safety messages.
3. **Gender-sensitive interventions:** Given the distinct patterns of male and female engagement, health communication strategies must consider gendered access, privacy concerns, and social stigma, particularly for women who may engage only in semi-private or anonymous networks.
4. **Targeted monitoring and early warning:** Data analytics of social media activity can identify emerging trends, clusters of illicit activity, and misinformation related to alcohol consumption. Such monitoring can inform rapid public health responses, including alerts and educational campaigns.

By integrating digital ethnography with harm reduction frameworks, public health actors can design interventions that are contextually relevant, culturally sensitive, and digitally feasible.

7.4. Policy and Governance Recommendations

Based on the study's findings, several multi-level policy and governance interventions are recommended:

7.4.1. Legal and Regulatory Measures

1. **Strengthen enforcement of existing laws:** Reinforce legal frameworks governing alcohol production, distribution, and consumption while ensuring that enforcement is targeted and does not disproportionately penalize marginalized groups.
2. **Regulate informal markets:** Introduce traceable licensing for small-scale alcohol production and distribution to reduce reliance on unsafe, clandestine supplies.
3. **Age restrictions and labeling:** Strictly enforce minimum age requirements for legal alcohol purchase, with clear labeling on health risks and prohibited practices.

7.4.2. Public Health Interventions

1. **Digital harm reduction campaigns:** Use social media analytics to identify high-risk communities and design culturally tailored campaigns emphasizing safety, responsible use, and awareness of methanol poisoning risks.
2. **Community-based awareness programs:** Engage religious leaders, educators, and local influencers to reinforce safe behaviors and counter misinformation.
3. **Gender-sensitive outreach:** Develop private and anonymous digital channels for women to access health information and report unsafe alcohol-related incidents.

7.4.3. Social Media Platform Governance

1. **Content moderation and misinformation control:** Platforms can flag and moderate content promoting unsafe alcohol use or providing instructions for illegal production/distribution.
2. **Amplify harm reduction messaging:** Collaborate with public health authorities to ensure visibility of safety advisories, particularly in encrypted networks where peer sharing is common.
3. **Algorithmic transparency:** Promote research into how recommendation systems amplify lifestyle normalization narratives, allowing interventions to mitigate risk of peer reinforcement of unsafe behaviors.

7.4.4. Community and Civil Society Engagement

1. **Peer education programs:** Train youth ambassadors to disseminate accurate information and counter normalization of unsafe alcohol practices in social networks.
2. **Participatory digital interventions:** Engage social media users in co-creating content that balances cultural sensitivity, entertainment, and public health messaging.
3. **Monitoring and feedback loops:** Establish mechanisms for communities to report unsafe practices, allowing rapid local response and policy adaptation.

7.5. Recommendations for Future Research

The findings suggest several avenues for future research:

1. **Longitudinal studies:** Track changes in alcohol-related discourse over time to understand evolving trends, the impact of public health campaigns, and shifts in normalization practices.
2. **Cross-platform comparative studies:** Examine how platform affordances, user demographics, and network structures shape discourse and behavior.
3. **Experimental digital interventions:** Test the efficacy of social media-based harm reduction campaigns, peer-led education programs, and algorithmic moderation strategies.
4. **Algorithmic influence analysis:** Investigate how recommendation engines and content visibility algorithms shape exposure to normalization, humor, and health messaging.
5. **Cultural and regional comparative research:** Compare alcohol discourse across South Asian countries to understand the role of cultural, religious, and policy contexts in shaping digital behavior.

7.6. Conclusions

Alcohol-related discourse on social media in Bangladesh is a complex, multi-layered, and contested phenomenon, reflecting the interplay between legal, religious, cultural, and public health considerations. Social media serves as a negotiation space where lifestyle normalization, humor, moral discourse, and harm reduction coexist. Gendered, generational, and socio-economic factors further shape engagement, highlighting the nuanced ways in which users navigate restriction, stigma, and peer influence.

The study demonstrates that social media is not merely a passive reflection of offline behavior but an active agent in shaping norms, perceptions, and practices related to alcohol consumption. By leveraging social constructionist, critical discourse, and networked publics frameworks, the research contributes to understanding how digital platforms mediate contested behaviors in conservative socio-religious contexts.

Policy and practice implications are significant. Legal frameworks must be enforced alongside harm reduction strategies. Public health actors should harness social media to promote safety and awareness, particularly among youth and marginalized groups. Social media platforms must adopt governance measures to mitigate risk while facilitating beneficial content dissemination. Community and civil society actors have a critical role in co-creating culturally sensitive interventions.

Finally, future research integrating longitudinal, comparative, and algorithmic perspectives will further illuminate how social media shapes the negotiation of behaviors and norms in Bangladesh and similar socio-cultural contexts. By combining theory, empirical evidence, and practical recommendations, this study provides a comprehensive foundation for addressing alcohol-related discourse, risk, and intervention strategies in the digital age.

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