



## Total alcohol per capita (age 15+ years) consumption

<b>Abbreviated name</b>	Total alcohol per capita (age 15+ years) consumption
<b>Indicator name</b>	Total alcohol per capita (age 15+ years) consumption
<b>Domain</b>	Risk factors
<b>Subdomain</b>	NCDs and nutrition
<b>Associated terms</b>	Noncommunicable diseases
<b>Definition</b>	Total alcohol per capita is the total amount (sum of recorded alcohol per capita three-year average and unrecorded alcohol per capita) of alcohol consumed per adult (15+ years) in a calendar year, in litres of pure alcohol. Recorded alcohol consumption refers to official statistics (production, import, export, and sales or taxation data), while unrecorded alcohol consumption refers to alcohol which is not taxed and is outside the usual system of government control. In circumstances in which the number of tourists per year is at least the number of inhabitants, tourist consumption is also taken into account and is deducted from a country's recorded alcohol per capita.
<b>Numerator</b>	Sum of recorded and unrecorded alcohol consumed in a population during a calendar year, in litres.
<b>Denominator</b>	Mid-year resident population aged 15+ for the same calendar year.
<b>Disaggregation/ additional dimension</b>	Age, sex, other relevant sociodemographic stratifiers where available
<b>Method of measurement</b>	<p>Recorded consumption: Recorded alcohol per capita (15+ years) consumption of pure alcohol is calculated as the sum of beverage-specific alcohol consumption of pure alcohol (beer, wine, spirits, other) from different sources. The first priority in the decision tree is given to government statistics, the second are country-specific alcohol industry statistics in the public domain (Canadian, IWSR-International Wine and Spirit Research, OIV-International Organisation of Vine and Wine, Wine Institute, historically World Drink Trends), and third is the Food and Agriculture Organization of the United Nations' statistical database (FAOSTAT). For countries where the data source is FAOSTAT, unrecorded consumption may be included in the recorded consumption.</p> <p>Unrecorded consumption: The first priority in the decision tree is given to nationally representative empirical data, often from general population surveys in countries where alcohol is legal. The second priority are specific other empirical investigations, while the third is expert opinion.</p>
<b>Method of estimation</b>	Sum of recorded and unrecorded alcohol consumed in a population during a calendar year.
<b>Measurement frequency</b>	Annual
<b>Monitoring and evaluation framework</b>	Outcome
<b>Preferred data sources</b>	Administrative reporting systems for recorded alcohol per capita, and survey data for unrecorded alcohol per capita. The priority of data sources for recorded alcohol per capita consumption should be given to government statistics on sales of alcoholic beverages during a calendar year or data on production, export and import of alcohol in different beverage categories. For countries where government data on sales or production are not available, the preferred data source would be country-specific and publicly available data from the private sector, including alcohol producers, or country-specific data from FAOSTAT which may also include estimates of unrecorded alcohol consumption. For main categories of alcoholic beverages, "beer" includes malt beers, "wine" includes wine made from grapes, "spirits" include all distilled beverages, and "other" includes one or several other alcoholic beverages – such as fermented beverages made from sorghum, maize, millet, rice, or cider, fruit wine, fortified wine, etc. Data sources for unrecorded alcohol consumption include survey data, FAOSTAT data, other data sources such as customs or police data, and expert opinion.
<b>Other possible data sources</b>	Data sets of FAO and United Nations Statistics Division
<b>Further information and related links</b>	<p>Draft comprehensive global monitoring framework and targets for the prevention and control of noncommunicable diseases, including a set of indicators. Agenda item A66/8, Sixty-sixth World Health Assembly, 20–28 May 2013. Geneva: World Health Organization; 2013 (<a href="http://apps.who.int/ebwha/pdf_files/WHA66/A66_8-en.pdf?ua=1">http://apps.who.int/ebwha/pdf_files/WHA66/A66_8-en.pdf?ua=1</a>, accessed 29 March 2015).</p> <p>Global health risks: mortality and burden of disease attributable to selected major risks. Geneva: World Health Organization; 2009 (<a href="http://www.who.int/healthinfo/global_burden_disease/GlobalHealthRisks_report_full.pdf">http://www.who.int/healthinfo/global_burden_disease/GlobalHealthRisks_report_full.pdf</a>, accessed 29 March 2015).</p> <p>Global strategy to reduce the harmful use of alcohol. Geneva: World Health Organization; 2010 (<a href="http://www.who.int/substance_abuse/alcstratenglishfinal.pdf?ua=1">http://www.who.int/substance_abuse/alcstratenglishfinal.pdf?ua=1</a>, accessed 29 March 2015).</p> <p>Rehm J, Baliunas D, Borges GL, Graham K, Irving H, Kehoe T et al. The relation between different dimensions of alcohol consumption and burden of disease - an overview. <i>Addiction</i>. 2010;105(5):817–43.</p>