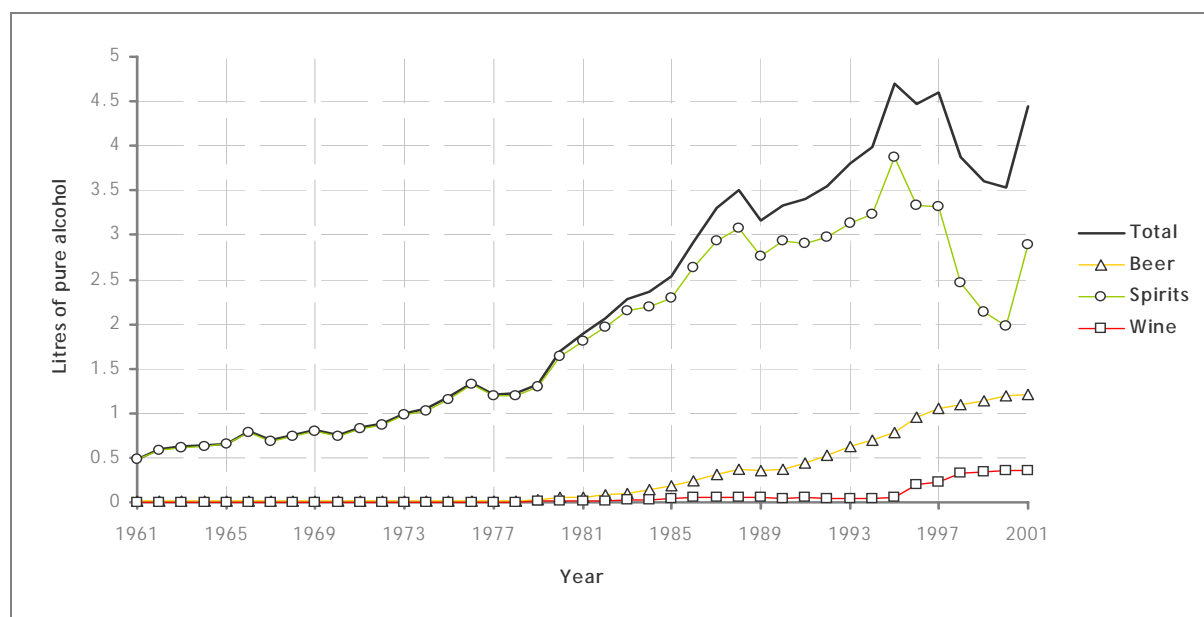


CHINA

Recorded adult per capita consumption (age 15+)

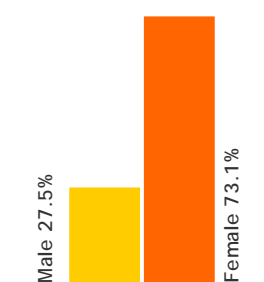
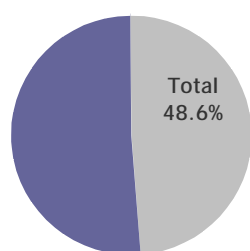


Sources: FAO (Food and Agriculture Organization of the United Nations), World Drink Trends 2003

A 2001 WHO-sponsored survey of 24 992 subjects aged 15 years or older across five areas in China (Sichuan Province in south-west China, Jilin Province in the north-east, Anhui Province in the east, Shandong Province in the north and Hunan Province in the central south) revealed that the average (\pm SD) annual consumption per capita in pure alcohol among all respondents was 4.47 (\pm 10.93) litres. Men drank 13.4 times more than women. The average annual consumption in pure alcohol for male, female and total 1-year drinkers was 10.1, 1.5 and 7.6 litres respectively.¹

Anecdotal evidence suggests that people living in Northern China have higher levels of alcohol consumption than those in the south, that urban residents drink lower-strength beverages than do rural residents, and that some minority ethnic groups, such as those of Tibetan and Mongolian background, drink more than other ethnic groups.²

Last year abstainers in Gansu, Henan and Shandong

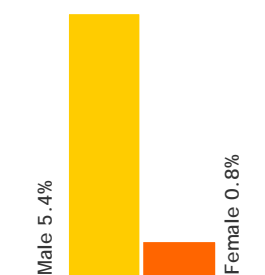
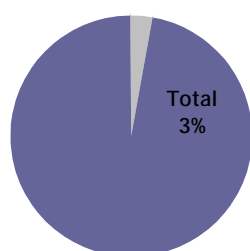


Data from the 2000–2001 Multi-Country Survey Study. Total sample size $n = 9301$; males $n = 4961$ and females $n = 4340$. Sample population aged 18 years and above.³

According to the 2003 World Health Survey (regional survey; total sample size $n = 3952$, males $n = 1936$ and females $n = 2016$; sample population aged 18 years and over), the rate of lifetime abstainers was 73.7% (total), 56.2% (males) and 90.2% (females).⁴

A 2001 WHO-sponsored survey of 24 992 community residents (males $n = 13 992$ and females $n = 11 000$) aged 15 years or older living in five areas of China found that the rate of last year abstainers was 41% (total), 25.1% (males) and 61.2% (females).¹

Heavy and hazardous drinkers (regional survey)



Data from the 2003 World Health Survey. Total sample size $n = 3952$; males $n = 1936$ and females $n = 2016$. Sample population aged 18 years and above. Definition used: average consumption of 40 g or more of pure alcohol a day for men and 20 g or more of pure alcohol a day for women.⁴

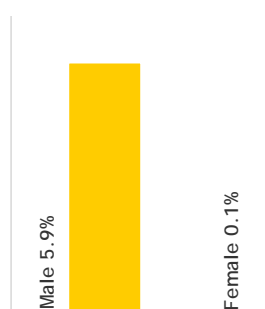
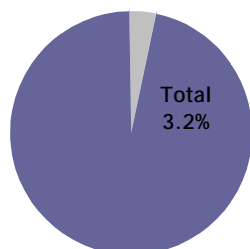
The 2000–2001 Multi-Country Survey Study (regional survey; total sample size $n = 9301$, males $n = 4961$ and females $n = 4340$; sample population aged 18 years and above) found that the rate of high risk drinking was 8.3% (total), 13.8% (males) and 2.1% (females). High risk drinking was defined as consumption of five or more standard drinks for males and three or more standard drinks for females on a typical drinking day.³

In a 2001 WHO-sponsored survey of 24 992 community residents (males $n = 13 992$ and females $n = 11 000$) aged 15 years or older living in five areas of China, heavy drinkers accounted for 6.7% of the sample and consumed 55.3% of the total alcohol consumption. Heavy drinking was defined as consumption of more than 50 ml (40 g) of pure alcohol per day.¹

A survey conducted in 1999 in Beijing found the rate of heavy drinking to be 6.9% (total), 14.9% (males) and 0.3% (females). Heavy drinking was defined as consuming five or more standard drinks a day for men and three or more standard drinks a day for women.⁵

According to the 2003 World Health Survey (regional survey; total sample size $n = 1058$, males $n = 867$ and females $n = 191$), the mean value (in grams) of pure alcohol consumed per day among drinkers was 13.4 (total), 15.6 (males) and 3.9 (females).⁴

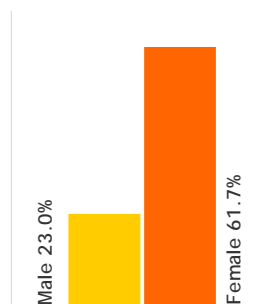
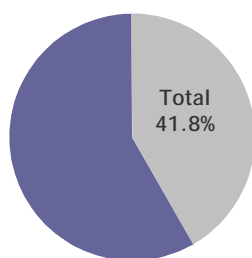
Heavy episodic drinkers (regional survey)



Data from the 2000–2001 Multi-Country Survey Study. Total sample size $n = 9301$; males $n = 4961$ and females $n = 4340$. Sample population aged 18 years and above. Definition used: at least once a week consumption of six or more standard drinks in one sitting.³

According to the 2003 World Health Survey (total sample size $n = 3952$, males $n = 1936$ and females $n = 2016$; sample population aged 18 years and over), the rate of heavy episodic drinking among the total population was 3.8% (total), 7.5% (males) and 0.3% (females). Heavy episodic drinking was defined as at least once a week consumption of five or more standard drinks in one sitting.⁴

Youth drinking (last year abstainers, regional survey)

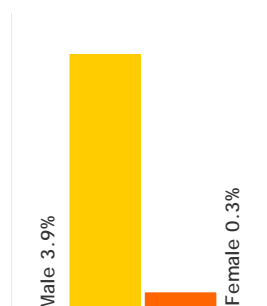
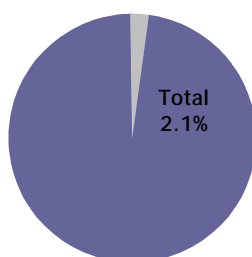


Data from the 2000–2001 Multi-Country Survey Study. Total sample size $n = 1463$; males $n = 753$ and females $n = 710$. Sample population aged 18 to 24 years. For the age group 15 to 19 years (subsample $n = 377$), the rate of last year abstainers was 48.3% (total), 32.2% (males) and 66.9% (females).³

According to the 2003 World Health Survey (total sample size $n = 316$, males $n = 166$ and females $n = 150$; sample population aged 18 to 24 years), the rate of lifetime abstainers was 81.4% (total), 72.2% (males) and 91.5% (females).⁴

A cluster sample from a south-west province from China of nine districts or cities (18 schools were selected randomly and a total of 2649 students with mean age 17.1 +/- 0.9 years completed a self-report questionnaire) showed that the rate of lifetime prevalence of alcohol use was 66.1%, and that 15.2% of the sample were current users of alcohol.⁶

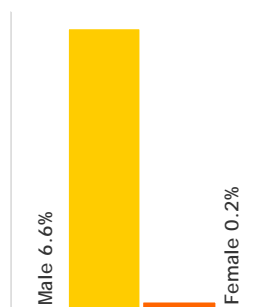
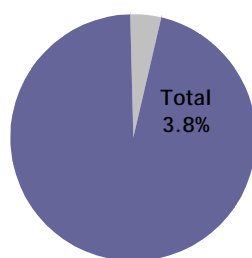
Youth drinking (heavy episodic drinkers, regional survey)



Data from the 2000–2001 Multi-Country Survey Study. Total sample size $n = 1463$; males $n = 753$ and females $n = 710$. Sample population aged 18 to 24 years old. For the age group 15 to 19 years (subsample $n = 377$), the rate of heavy episodic drinkers was 1.3% (total), 2.5% (males) and 0.0% (females). Definition used: at least once a week consumption of six or more standard drinks in one sitting.³

According to the 2003 World Health Survey (total sample size $n = 316$; males $n = 166$ and females $n = 150$; sample population aged 18 to 24 years), the rate of heavy episodic drinking among the total population was 0.6% (total), 1.2% (males) and 0.0% (females). Heavy episodic drinking was defined as at least once a week consumption of five or more standard drinks in one sitting.⁴

Alcohol dependence in five Chinese provinces



Survey conducted in 2001 of 24 992 community residents (males $n = 13 992$ and females $n = 11 000$) aged 15 years or older living in five areas of China. DSM-III-R measure was used.¹

A 1993/1994 study of 23 513 community household residents aged between 15 to 65 years old (males $n = 11\ 972$ and females $n = 11\ 541$) found the point prevalence rate of DSM-III-R alcohol dependence to be 3.4% (total), 6.6% (males) and 0.1% (females).⁷

In a large-scale community survey in Shatin, Hong Kong Special Administrative Region (age group 18 to 64 years old), a modified Self-Reporting Questionnaire and the Diagnostic Interview Schedule (version III) were used as the screening and diagnostic instruments, respectively. The rate of alcohol dependence was found to be 4.6% (total), 8.9% (males) and 0.6% (females).⁸

According to the 2000–2001 Multi-Country Survey Study (regional survey; total sample size $n = 9423$; sample population aged 15 years and above), the rate of last year alcohol dependence was 5.2% (total), 9.2% (males) and 0.6% (females). Alcohol dependence was measured using ICD-10 criteria.³

Note: The Multi-Country Survey Study was not nationally representative and was carried out in the provinces of Gansu, Henan and Shandong. The World Health Survey was also not nationally representative and was carried out in Hubei, Zhejiang, Hebei, Guangdong, Shaanxi, Gansu, Jiangsu, Shanxi and Sichuan provinces and Shenzhen city. These are preliminary, early-release, unpublished data from WHO's Multi-Country Survey Study and World Health Survey made available exclusively for this report. Some estimates may change in the final analyses of these data.

Traditional alcoholic beverages

Alcoholic beverages in China have a long history. Wine was said to have been invented during the Xia Dynasty, around the 21st century B.C. Traditional alcoholic beverages can be classified as follows: white liquor, yellow wine, fruit wine and flavoured wine.⁹

The **white liquors** are distilled from fermented grains, usually sorghum. They have an alcoholic content of 50% to 60%. The most well-known white liquors are *Mou-tai*, *Wu-nia-yeh* (*Wuliangye*) and *Feng* (*Fenjiu*) wines.⁹

The **yellow wines** are the name for all grain-based, non-distilled wines. They have an alcoholic content of 15% to 20%. The famous yellow wines are *Shao-xing* and *Mi* wine.⁹

Rice wine is the general designation for all fermented drinks produced from cereals in China, with an ethanol content usually of 15% to 16%. **Yellow rice wine (paddy wine)** is rich in amino acids and is colloquially known as 'liquid egg cake'. It has an alcohol content of between 12% to 18%.²

The **fruit wines** are fermented from fruit juice, including plums, tangerines, lychees, crabapples, and cherry. They have an alcoholic content of 10% to 20%.⁹

Medicinal liquor is produced, which incorporates traditional herbs and is used to treat a variety of ailments, including arthritis. Traditional Chinese medicine considers alcohol 'a leader of medicines' that 'can guide other medicines to the place of disease'.²

Unrecorded alcohol consumption

The unrecorded alcohol consumption in China is estimated to be 1.0 litre pure alcohol per capita for population older than 15 for the years after 1995 (estimated by a group of key alcohol experts).¹⁰

In a 2001 WHO-sponsored survey of 24 992 community residents (males $n = 13\ 992$ and females $n = 11\ 000$) aged 15 years or older living in five areas of China, it was shown that 7.1% of respondents reported that they had consumed unrecorded alcoholic beverages in the three months prior to the interview (most frequently rice wine and paddy wine), the amount of unrecorded alcoholic beverage (in pure alcohol) accounted for 14.9% of overall alcohol consumption in the five areas studied. The amount of unrecorded alcoholic beverage consumption varied e.g. in the Shandong Province, 24.1% of respondents had consumed unrecorded alcoholic beverages in the prior three months and the proportion of these beverages was 29.9% of the overall alcohol consumption.¹

Morbidity, health and social problems from alcohol use

Official statistics indicate that there were 616 971 road accidents, killing 98 853 and injuring 418 721 people in the year 2000, up 49%, 12% and 46% respectively from the previous year. Most accidents are associated with driver behaviour, speed and alcohol intake.¹¹ According to a China daily, with an increase in the number of automobiles, the effect of alcohol on drivers will be more noticeable. It is already estimated that half of all traffic crashes involve drivers who have been drinking.¹² The number of drunk driver fatal road traffic accidents (RTAs) is 0.29–1.48% of the total RTAs in China, and the number of deaths 1.85–3.02% of total deaths.¹³

An inmate survey in Tianjin, a large city in China, in 1991 found that 50% of offenders who committed aggravated assault and 43.3% who committed robbery drank before offending.¹⁴

A study conducted in 2001 indicated that the incidence of certain physical diseases, such as gastritis/ulcer and insomnia, increased with increased alcohol consumption.¹

A large prospective study showed that *Trichomonas vaginalis* (a sexually transmitted infection) occurred at an increased rate in women who drank alcohol, suggesting alcohol might play a part in this, and probably other, sexually transmitted diseases.¹⁵

A 1993/1994 study of 23 513 community household residents (15–65 years old) found the following rates of DSM-III-R alcohol-related disorders among the total population sampled: acute intoxication (2.637%), uncomplicated withdrawal (0.434%), withdrawal delirium (0.043%), alcohol-related dementia (0.072%), alcohol-related amnesia (0.128%), personality disorder (0.119%) and hallucinosis (0.026%).⁷

Country background information

Total population 2003	1 304 196 000	Life expectancy at birth (2002)	Male	69.6
Adult (15+)	1 004 230 920		Female	72.7
% under 15	23	Probability of dying under age 5 per 1000 (2002)	Male	31
Population distribution 2001 (%)			Female	41
Urban	37	Gross National Income per capita 2002	US\$	940
Rural	63			

Sources: Population and Statistics Division of the United Nations Secretariat, World Bank World Development Indicators database, The World Health Report 2004

References

- Hao W et al. Drinking and drinking patterns and health status in the general population of five areas of China. *Alcohol and Alcoholism*, 2004, 39(1):43–52.
- Cochrane J. Alcohol use in China. *Alcohol and Alcoholism*, 2003, 38(6):537–542.
- Ustun TB et al. WHO Multi-Country Survey Study on Health and Health System Responsiveness 2000–2001. In: Murray CJL, Evans DB, eds. *Health Systems Performance Assessment: Debates, Methods and Empiricism*. Geneva, World Health Organization, 2003.
- Ustun TB et al. The World Health Surveys. In: Murray CJL, Evans DB, eds. *Health Systems Performance Assessment: Debates, Methods and Empiricism*. Geneva, World Health Organization, 2003.
- WHO Monica Project. 1999. In: *WHO Global NCD InfoBase*. Geneva, World Health Organization.
- Zhimin L et al. The use of psychoactive substances among adolescent students in an area in the south-west of China. *Addiction*, 2001, 96(2):247–250.
- Hao W et al. Alcohol consumption and alcohol-related problems: Chinese experience from six area samples, 1994. *Addiction*, 1999, 94(10):1467–1476.
- Chen CN et al. The Shatin community mental health survey in Hong Kong. II. Major findings. *Archives of General Psychiatry*, 1993, 50(2):125–133.
- Lin R. *Trend and market of traditional alcoholic beverages from China* (http://ift.confex.com/ift/2002/techprogram/paper_10107.htm, accessed 1 April 2004).
- Alcohol per capita consumption, patterns of drinking and abstention worldwide after 1995. Appendix 2. *European Addiction Research*, 2001, 7(3):155–157.
- Abeygunawardena P et al. *Report and recommendation of the president to the board of directors on a proposed loan to People's Republic of China for the Shanxi Road Development II Project*. Asian Development Bank, November 2002 (http://www.adb.org/Documents/RRPs/PRC/rrp_prc_34097.pdf, accessed 1 April 2004).
- Newman I. Cultural aspects of drinking patterns and alcohol controls in China. *The Globe Special Issue 4*, Global Alcohol Policy Alliance, 2001–2002.
- Wang Z, Jiang J. An overview of research advances in road traffic trauma in China. *Traffic Injury Prevention*, 2003, 4(1):9–16.
- Zhang L et al. Alcohol and crime in China. *Substance Use and Misuse*, 2000, 35(3):265–279.
- Zhang Z.-F. Epidemiology of *Trichomonas vaginalis*: a prospective study in China. *Sexually Transmitted Diseases*, 1996, 23(5):415–424.