GUATEMALA

Recorded adult per capita consumption (age 15+)

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

Lifetime abstainers

Estimates from key alcohol experts show that the proportion of adult males and females who had been abstaining (last year before the survey) was 45% (males) and 62% (females). Data is for after year 1995.2

Heavy and hazardous drinkers

Data from the 2003 World Health Survey. Total sample size $n = 4755$; males $n = 1824$ and females $n = 2931$. Population aged 18 years and above.1
According to the 2003 World Health Survey (total sample size $n = 1136$; males $n = 776$ and females $n = 360$), the mean value (in grams) of pure alcohol consumed per day among drinkers was 3.9 (total), 5.2 (males) and 1.0 (females).\(^1\)

**Heavy episodic drinkers**

<table>
<thead>
<tr>
<th></th>
<th>Total</th>
<th>Male</th>
<th>Female</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>1.3%</td>
<td>3.4%</td>
<td>0.2%</td>
</tr>
</tbody>
</table>

Data from the 2003 World Health Survey. Total sample size $n = 4755$; males $n = 1824$ and females $n = 2931$. Population aged 18 years and above. Definition used: at least once a week consumption of five or more standard drinks in one sitting.\(^1\)

**Youth drinking (lifetime abstainers)**

<table>
<thead>
<tr>
<th></th>
<th>Total</th>
<th>Male</th>
<th>Female</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>77.9%</td>
<td>57.7%</td>
<td>89.5%</td>
</tr>
</tbody>
</table>

Data from the 2003 World Health Survey. Total sample size $n = 933$; males $n = 342$ and females $n = 591$. Population aged 18 to 24 years old.\(^3\)

A 1994 survey among 688 students (aged 12 to 19 years old) in Guatemala City found the rate of lifetime prevalence of alcohol use to be 26.5%.\(^3\)

**Youth drinking (heavy episodic drinkers)**

<table>
<thead>
<tr>
<th></th>
<th>Total</th>
<th>Male</th>
<th>Female</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>1.7%</td>
<td>4.8%</td>
<td>0.0%</td>
</tr>
</tbody>
</table>

Data from the 2003 World Health Survey. Total sample size $n = 933$; males $n = 342$ and females $n = 591$. Population aged 18 to 24 years old. Definition used: at least once a week consumption of five or more standard drinks in one sitting.\(^1\)

Note: These are preliminary, early-release, unpublished data from WHO’s World Health Survey made available exclusively for this report. Some estimates may change in the final analyses of these data.

**Traditional alcoholic beverages**

*Chicha* is an indigenous fermented beverage made from sugar-cane. This beverage is used in traditional Indian rituals and is called *boj* by the inhabitants of Alta Verapaz in the northern part of the country. The Pokomam, who live in the central highlands, and the Ixil, who live in the south-western highlands, have a lightly distilled beverage called *guaro* and *kuxa*, respectively.\(^4\)

*Aguardiente* is a strong, distilled beverage made from sugar-cane and frequently used in public ceremonies.\(^4\)
**Cuxa** is the clandestine counterpart of *aguadiente* and is produced and consumed in Nahuala, a highland Guatemalan Maya community. The primary ingredients for the traditional concoction are raw brown sugar, wheat chaff or other plant material, yeast and saltpetre.5

**Unrecorded alcohol consumption**

The unrecorded alcohol consumption in Guatemala is estimated to be 2.0 litres pure alcohol per capita for population older than 15 for the years after 1995 (estimated by a group of key alcohol experts).2

**Mortality rates from selected death causes where alcohol is one of the underlying risk factors**

The data represent all the deaths occurring in a country irrespective of whether alcohol was a direct or indirect contributor.

**Chronic mortality**

![Chronic Mortality Graph]

Note: Chronic mortality time-series measured on two axes, ischaemic heart disease on right axis and the other causes on the left.

**Acute mortality**

![Acute Mortality Graph]

Source: WHO Mortality Database

Note: Caution should be exercised when interpreting the results as death registration level is incomplete.
Morbidity, health and social problems from alcohol use

Alcohol was involved in approximately 50% of the 430 traffic accidents in 1986.\(^6\)

In Guatemala, it is believed that the main reason for social violence in the country was men’s consumption of alcohol, caused by intra-family conflict, family disintegration, parental example, poverty and lack of employment.\(^7\)

Observers cite the negative effects of alcohol – economic expense, sexual transgressions, and quarrels – as largely attributable to the consumption of aguardiente, not boj. There are at least three reasons for this. Firstly, aguardiente is much more potent than boj. Secondly, aguardiente is more expensive, causing greater economic hardships for poor families. Thirdly, the money from the sale of boj remains in the community, whereas the money from the sale of aguardiente leaves the community. Alcohol consumption to the point of intoxication can result in spousal abuse, especially among Indians and poor ladinos.\(^4\)

### Country background information

<table>
<thead>
<tr>
<th>Total population 2003</th>
<th>12 347 000</th>
<th>Life expectancy at birth (2002)</th>
<th>Male</th>
<th>63.1</th>
</tr>
</thead>
<tbody>
<tr>
<td>Adult (15+)</td>
<td>7 037 790</td>
<td>Female</td>
<td>69.0</td>
<td></td>
</tr>
<tr>
<td>% under 15</td>
<td>43</td>
<td>Probability of dying under age 5 per 1000 (2002)</td>
<td>Male</td>
<td>57</td>
</tr>
<tr>
<td></td>
<td></td>
<td>Female</td>
<td>50</td>
<td></td>
</tr>
<tr>
<td>Urban</td>
<td>40</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Rural</td>
<td>60</td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>


### References