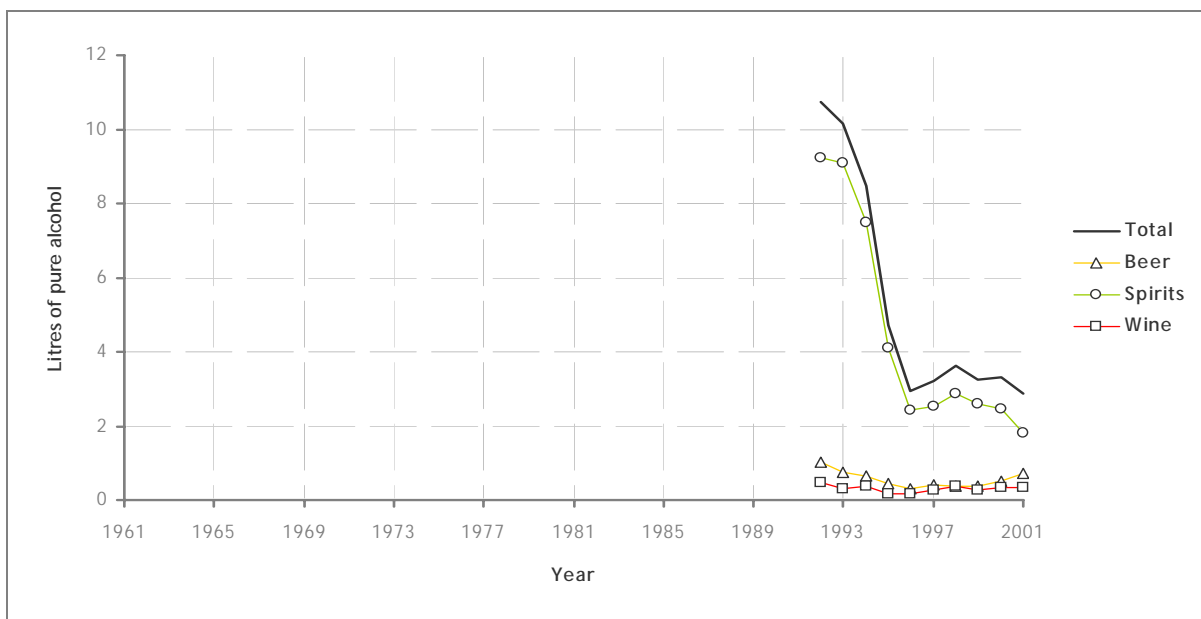


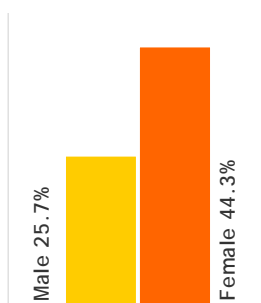
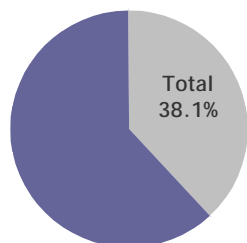
# KAZAKHSTAN

## Recorded adult per capita consumption (age 15+)



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

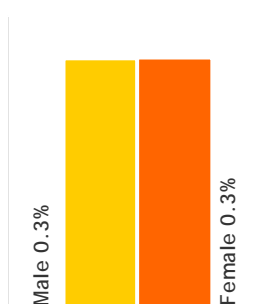
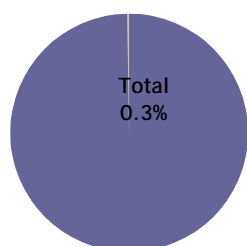
## Lifetime abstainers



Data from the 2003 World Health Survey. Total sample size  $n = 4466$ ; males  $n = 1539$  and females  $n = 2927$ . Population aged 18 years and above.<sup>1</sup>

Estimates from key alcohol experts show that the proportion of adult males and females who had been abstaining (last year before the survey) was 10% (males) and 27% (females). Data is for after year 1995.<sup>2</sup>

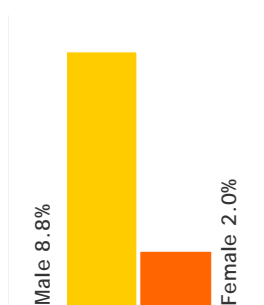
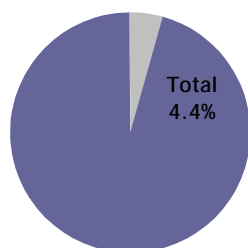
## Heavy and hazardous drinkers



Data from the 2003 World Health Survey. Total sample size  $n = 4466$ ; males  $n = 1539$  and females  $n = 2927$ . 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.<sup>1</sup>

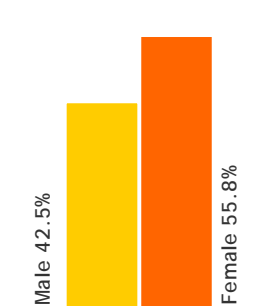
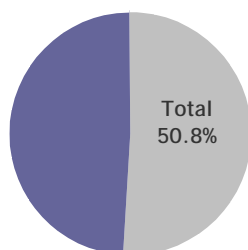
According to the 2003 World Health Survey (total sample size  $n = 2894$ ; males  $n = 1170$  and females  $n = 1724$ ), the mean value (in grams) of pure alcohol consumed per day among drinkers was 2.9 (total), 4.2 (males) and 2.1 (females).<sup>1</sup>

### Heavy episodic drinkers



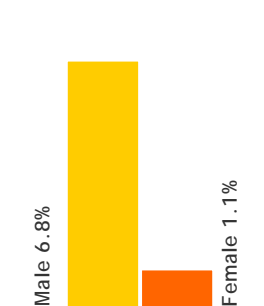
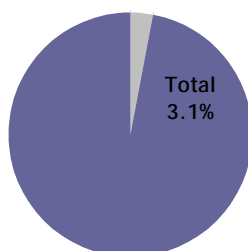
Data from the 2003 World Health Survey. Total sample size  $n = 4466$ ; males  $n = 1539$  and females  $n = 2927$ . Population aged 18 years and above. Definition used: at least once a week consumption of five or more standard drinks in one sitting.<sup>1</sup>

### Youth drinking (lifetime abstainers)



Data from the 2003 World Health Survey. Total sample size  $n = 384$ ; males  $n = 139$  and females  $n = 245$ . Population aged 18 to 24 years old.<sup>1</sup>

### Youth drinking (heavy episodic drinkers)



Data from the 2003 World Health Survey. Total sample size  $n = 384$ ; males  $n = 139$  and females  $n = 245$ . Population aged 18 to 24 years old. Definition used: at least once a week consumption of five or more standard drinks in one sitting.<sup>1</sup>

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.

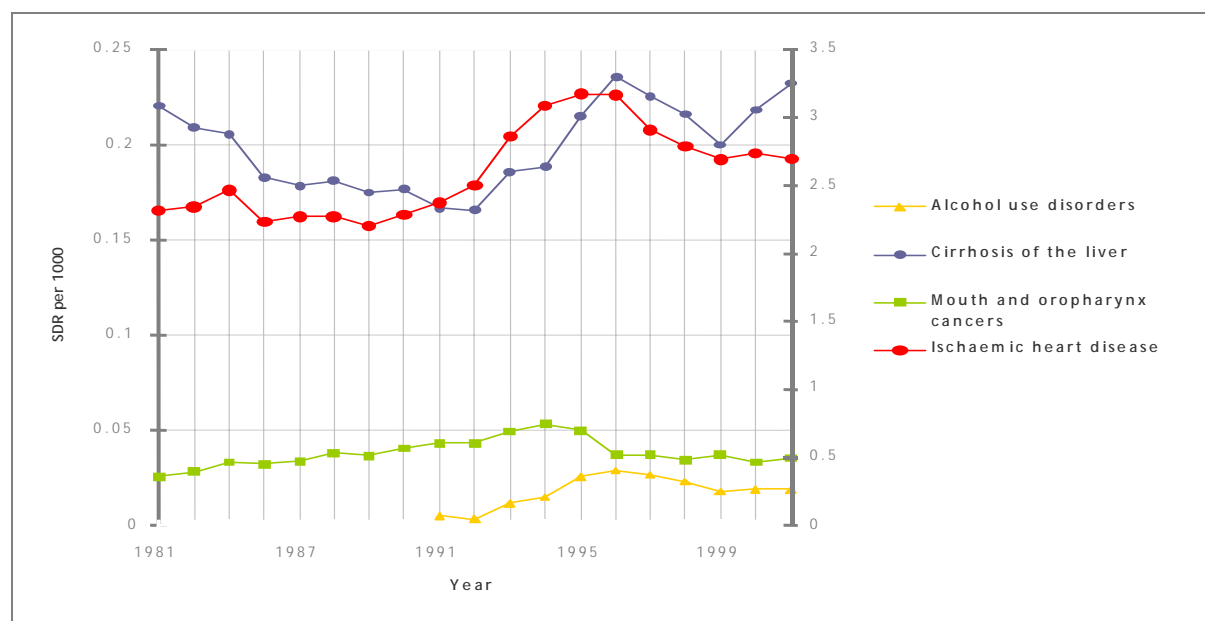
### Unrecorded alcohol consumption

The unrecorded alcohol consumption in Kazakhstan is estimated to be 4.9 litres pure alcohol per capita for population older than 15 for the years after 1995 (estimated by a group of key alcohol experts).<sup>2</sup>

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

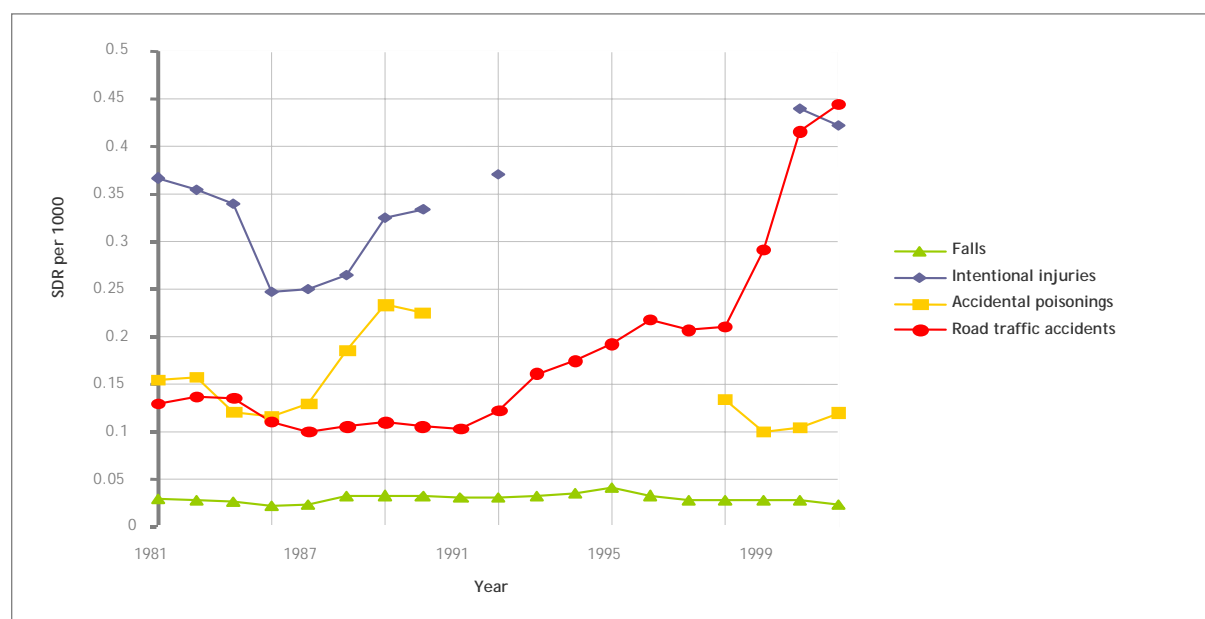
The data represent all the deaths occurring in a country irrespective of whether alcohol was a direct or indirect contributor.

### Chronic mortality



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

### Acute mortality



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

The number of juvenile alcoholics in Kazakhstan is rapidly increasing despite the state's efforts to curb the nation's alcohol drinking habit. A national centre designed to introduce a healthier lifestyle to Kazakhstan reports that this year 610 children in the country were diagnosed as alcoholics. In 1999, only 29 such cases were recorded. Juvenile alcoholism is growing at a much higher rate compared to alcoholism among adults, especially in the southern and northern regions of the country. If adult alcoholism has quintupled in 10 years (from 46 to 258 alcoholics per 100 000), among children under 14 years of age, it has grown tenfold. Among those aged 14 to 18 years old, more than 400 per 100 000 are believed to be alcoholics.<sup>3</sup>

The rate of alcoholic psychosis incidence per 100 000 population was 257.36 in 2001 and 349.11 in 2002.<sup>4</sup>

The SDR per 100 000 population for chronic liver disease and cirrhosis was 32.58 in 2001 and 34.18 in 2002.<sup>4</sup>

The number of alcohol-related road traffic accidents per 100 000 population was 8.57 in 2000 and 12.19 in 2001.<sup>4</sup>

### Country background information

<b>Total population 2003</b>	15 433 000	<b>Life expectancy at birth (2002)</b>	Male	58.7
Adult (15+)	11 574 750		Female	68.9
% under 15	25	<b>Probability of dying under age 5 per 1000 (2002)</b>	Male	38
<b>Population distribution 2001 (%)</b>			Female	28
Urban	56	<b>Gross National Income per capita 2002</b>	US\$	1510
Rural	44			

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

### References

1. 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.
2. Alcohol per capita consumption, patterns of drinking and abstention worldwide after 1995. Appendix 2. *European Addiction Research*, 2001, 7(3):155–157.
3. *Kazakhstan: focus on the rise in juvenile alcoholism*. Integrated Regional Information Networks (IRIN). December 2003 ([http://www.plusnews.org/report.asp?ReportID=38237&SelectRegion=Central\\_Asia](http://www.plusnews.org/report.asp?ReportID=38237&SelectRegion=Central_Asia), accessed 24 February 2004).
4. European health for all database. World Health Organization, Regional Office for Europe (<http://hfadb.who.dk/hfa>, accessed 26 February 2004).