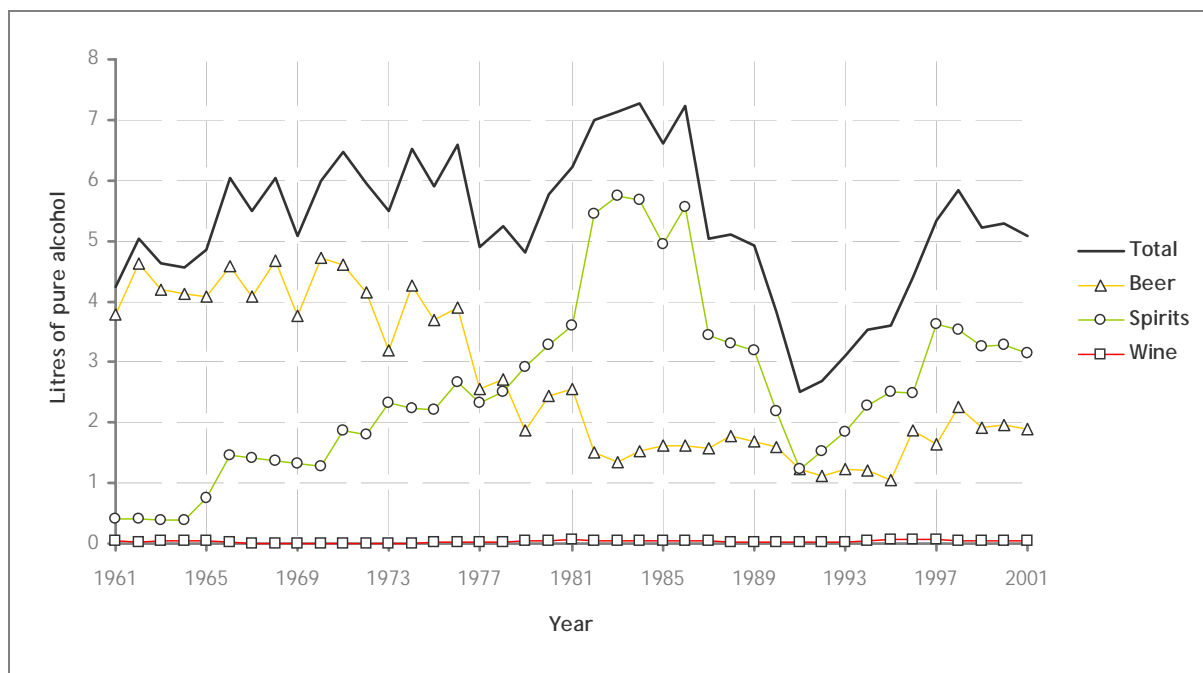


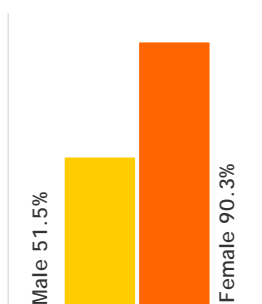
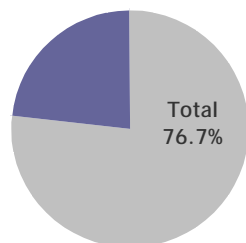
ZIMBABWE

Recorded adult per capita consumption (age 15+)



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

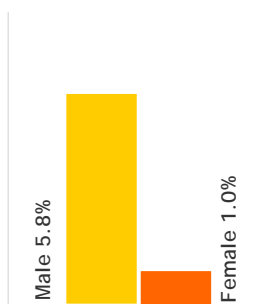
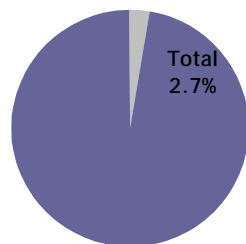
Lifetime abstainers



Data from the 2003 World Health Survey. Total sample size $n = 4027$; males $n = 1469$ and females $n = 2558$. Survey population aged 18 years and above.¹

Estimates from key alcohol experts show that the proportion of adult males and females who had been abstaining (last year before the survey) was 7% (males) and 36% (females). Data is for after year 1995.²

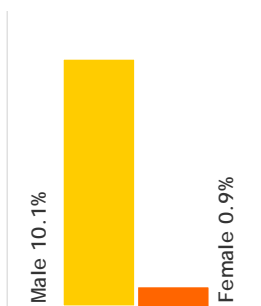
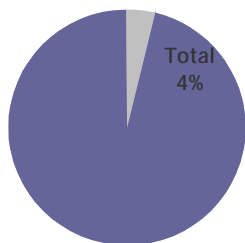
Heavy and hazardous drinkers



Data from the 2003 World Health Survey. Total sample size $n = 4027$; males $n = 1469$ and females $n = 2558$. Survey 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.¹

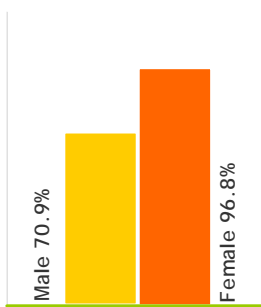
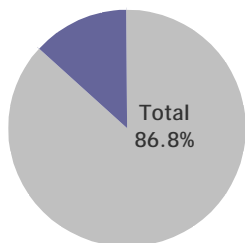
According to the 2003 World Health Survey (total sample size $n = 807$; males $n = 621$ and females $n = 186$), the mean value (in grams) of pure alcohol consumed per day among drinkers was 12.4 (total), 14.1 (males) and 6.1 (females).¹

Heavy episodic drinkers



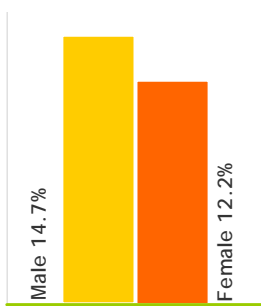
Data from the 2003 World Health Survey. Total sample size $n = 4027$; males $n = 1469$ and females $n = 2558$. Survey population aged 18 years and above. Definition used: at least once a week consumption of five or more standard drinks in one sitting.¹

Youth drinking (lifetime abstainers)



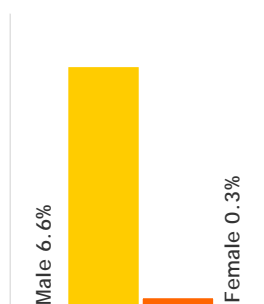
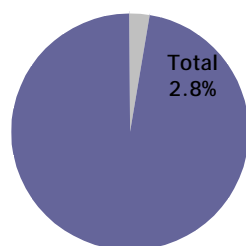
Data from the 2003 World Health Survey. Total sample size $n = 1055$; males $n = 424$ and females $n = 631$. Survey population aged 18 to 24 years old.¹

Youth drinking in Harare (last year prevalence)



A survey of 183 students aged 13–14 years old from urban schools in Harare.³

Youth drinking (heavy episodic drinkers)



Data from the 2003 World Health Survey. Total sample size $n = 1055$; males $n = 424$ and females $n = 631$. Survey 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 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 have changed from home-brewed *mahewu* and “opaque beer” to bottled “clear beer” and stronger alcoholic drinks. *Opaque beer* is a pulpy looking drink served in brown plastic 3-litre “scuds” (named after the scud missile) that are typically passed around to others who share a drink. They are widely regarded as a lower class beverage.⁴

In rural Zimbabwe, fermented beverages are commonly prepared at home from locally grown grains. Traditionally, these homemade beers were produced for use during special cultural events such as weddings, funerals and spirit-appeasing ceremonies. At the present time, these beers are still used in traditional ceremonies, but they are sold to fellow community members as part of regular social gatherings as well. The commonest types of traditional beer were a seven-day beverage called *doro rematanda*, a by-product of this seven day beer called *muchaiwa*, and a one-day beverage called *chikokiyana*. According to a study conducted to determine the concentrations of alcohol in these beverages, the mean alcohol concentration in traditional beer was found to be 4.1 g/100 ml compared to 2.8 g/100 ml in the muchaiwa and 3.6 g/100 ml in the one day brew, chikokiyana.⁵

Some traditional fermented beverages produced at household level in Zimbabwe include alcoholic beverages made from sorghum or millet malt (*doroluthwala* and *chikokivana*) and distilled spirits such as *kachasu*.⁶

In addition to home-brewed beer, alcohol industry and government officials agree that there is a strong enough market for kachasu, a name given to home-distilled products with 10% to 70% alcohol, to make it a major problem. Occasional newspaper reports of alcohol poisonings from kachasu point not only to the high alcohol content, but also the continued use of lethal additives to speed drinkers to their desired high.⁷

Mukumbi is a traditional Zimbabwean wine prepared from a fruit called mapfura by the Shona people of Zimbabwe and amaganu by the Ndebele.⁸

Chibuku – a traditional sorghum beer with an alcohol content of 4% is also consumed.

Unrecorded alcohol consumption

The unrecorded alcohol consumption in Zimbabwe is estimated to be 9.0 litres pure alcohol per capita for population older than 15 for the years after 1995 (estimated by a group of key alcohol experts).²

Morbidity, health and social problems from alcohol use

A study looking at survivors of gender violence in Zimbabwe found that consumption of alcohol was often involved in cases of domestic violence.⁹

According to the police, more than 1000 people die in alcohol abuse-related accidents every year. A further 3000 sustain minor to serious injuries. In a paper entitled ‘Drug Use, Abuse and Alcoholism in Zimbabwe’ published in October 2002, it was argued that alcoholism is one of Zimbabwe’s four top diseases. The paper states that at least three million people in Zimbabwe are alcoholics. The paper projects that in the next 20 years, alcoholism will be the country’s number one social problem.¹⁰

In a cross-sectional sample of 324 men recruited at beer halls in Harare to study the associations between alcohol use, sexual risk behaviour and HIV infection, it was found that 31% of the men reported having sex while

intoxicated in the previous six months. There was a significant association between having sex while intoxicated and recent HIV seroconversion.¹¹

Country background information

Total population 2003	12 891 000	Life expectancy at birth (2002)	Male	37.7
Adult (15+)	7 347 870		Female	38.0
% under 15	43	Probability of dying under age 5 per 1000 (2002)	Male	115
Population distribution 2001 (%)			Female	107
Urban	36	Gross National Income per capita 2002	US\$	*
Rural	64	*Estimated to be in the low income range (\$735 or less)		

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

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