ALCOHOL CONSUMPTION

The health burden related to excessive alcohol consumption, both in terms of morbidity and mortality, is considerable. Alcohol use is associated with numerous harmful health and social consequences, including an increased risk of a range of cancers, stroke and liver cirrhosis. Alcohol also contributes to death and disability through accidents and injuries, assault, violence, homicide and suicide. WHO estimated that it causes more than 2.5 million deaths worldwide per year.

Definition

Alcohol consumption is defined as annual sales of pure alcohol in litres per person aged 15 years and over.

Overview

Alcohol consumption, as measured by annual sales, stands at 9.4 litres per adult on average across OECD countries, based on the most recent data available. Leaving aside Luxembourg where national sales overestimate consumption, France, Austria and Estonia reported the highest consumption of alcohol, with 12 litres or more per adult per year in 2011. Low alcohol consumption was recorded in Turkey and Israel, as well as in Indonesia and India, where religious and cultural traditions restrict the use of alcohol in some population groups.

Although average alcohol consumption has gradually fallen in many OECD countries over the past two decades, it has risen in several Northern European countries (Iceland, Sweden, Norway and Finland) as well as in Poland and Israel. There has been a degree of convergence in drinking habits across the OECD, with wine consumption increasing in many traditional beerdrinking countries and vice versa. The traditional wine-producing countries of Italy, Greece, Spain, Portugal and France, as well as the Slovak Republic, Switzerland and Hungary have seen per capita consumption fall by one fifth or more since 1990. Alcohol consumption in the Russian Federation, as well as in Brazil, India and China has risen substantially, although in the latter two countries per capita consumption is still low.

Variations in alcohol consumption across countries and over time reflect not only changing drinking habits but also the policy responses to control alcohol use. Curbs on advertising, sales restrictions and taxation have all proven to be effective measures to reduce alcohol consumption.

In 2010, the World Health Organization endorsed a global strategy to combat the harmful use of alcohol, through direct measures such as medical services for alcohol-related health problems, and indirect measures such as the dissemination of information on alcohol-related harm.

Comparability

The methodology to convert alcoholic drinks to pure alcohol may differ across countries. Official statistics do not include unrecorded alcohol consumption, such as home production. In some countries, for example Luxembourg, national sales do not accurately reflect actual consumption by residents, since purchases by non-residents may create a significant gap between national sales and consumption.

Sources

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Further information

Analytical publications

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- WHO (2011), Global Status Report on Alcohol and Health, World Health Organization, Geneva.

Statistical publications

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Online databases

• OECD Health Statistics.

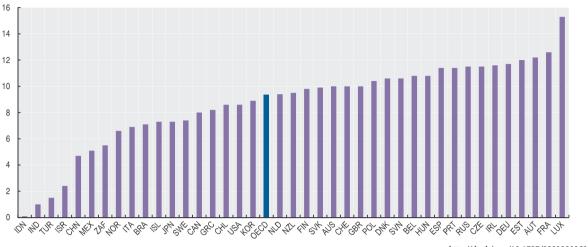
Websites

- OECD Health Data (supplementary material), www.oecd.org/health/healthdata.
- Health at a Glance, www.oecd.org/health/healthataglance.

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Alcohol consumption among population aged 15 and over

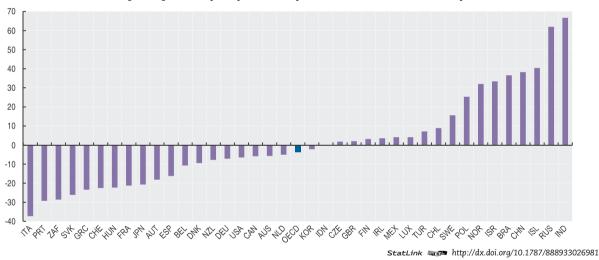
Litres per capita, 2011 or latest available year



StatLink http://dx.doi.org/10.1787/888933026962

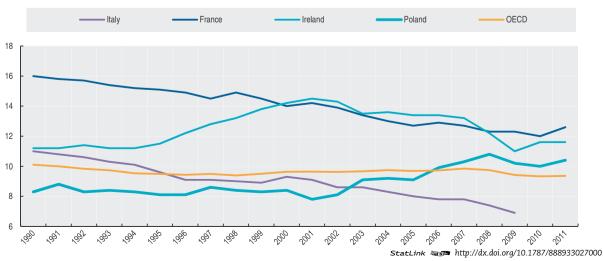
Change in alcohol consumption in litres per capita among population aged 15 and over

Percentage change in litres per capita over the period 1990-2011 or latest available period

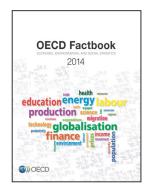


Trends in alcohol consumption among population aged 15 and over

Litres per capita



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