YOUNG PEOPLE ARE ASIA’S KEY TO CURBING THE RISE OF NONCOMMUNICABLE DISEASES

MAY 2016

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ACKNOWLEDGMENTS

This data appendix was produced by Toshiko Kaneda, Ph.D., senior research associate at the Population Reference Bureau (PRB). The author thanks PRB staff, Kristin Bletsch, research associate, Hanna Christianson and Matthew Rigsby, program assistants; Hania El Banhawi and Liselot Koenen, PRB interns; Haena Lee at University of Chicago, and Dier Hu for their assistance with data.

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www.younghealthprogrammeyhp.com

AstraZeneca
Young Health Programme
A global community investment initiative
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Data Appendix to
Young People Are Asia’s Key to Curbing the Rise of Noncommunicable Diseases

This data appendix provides data sources and all the data points underlying the noncommunicable diseases (NCD) risk-level coding for young people across Asia presented in the accompanying data sheet, Young People Are Asia’s Key to Curbing the Rise of Noncommunicable Diseases, and policy report, Addressing Noncommunicable Disease Risk Factors Among Young People: Asia’s Window of Opportunity to Curb a Growing Epidemic. The data description provides the information on source, year, age, and size of the sample per risk factor, when data are available, for the 28 countries included in the above publications.

Data points presented for each risk factor are for the indicators listed below. When the indicator definitions differ from those listed below, they are specified in the data description.

**TOBACCO USE:**
- Cigarettes: Percent smoking cigarettes in the past 30 days.
- Other tobacco products: Percent using other tobacco products in the past 30 days.
- Any products: Percent using any tobacco products in the past 30 days.

**ALCOHOL USE:**
Percent having any drink containing alcohol in the past 30 days.

**PHYSICAL INACTIVITY:**
Percent NOT engaging in physical activity for at least 60 minutes per day on five out of the last seven days. In some countries, the measure pertains to seven out of the last seven days, which is indicated as “7-day cut-off” in the data description. Surveys usually report physical activity levels rather than inactivity levels, so data presented here are 100 percent minus the percent reported to be physically active.

**OVERWEIGHT:**
Percent overweight or obese. The standard used to classify overweight status—which also includes those who are obese—varies across data sources. When no definition appears in the data description, overweight status is classified as Body Mass Index (BMI) greater than one standard deviation from the median for the BMI for age and sex according to the World Health Organization (WHO) Child Growth Standards. This overweight standard is used in the Global School-Based Student Health Survey (GSHS), the source most frequently used to document the overweight status in this publication.

**LIST OF ACRONYMS FOR DATA SOURCES:**

**Multi-Country Surveys**
- DHS: Demographic and Health Surveys
- GSHS: Global School-Based Student Health Survey
- GYTS: Global Youth Tobacco Survey

**Country-Specific Surveys**
- CASPIAN: Childhood and Adolescence Surveillance and Prevention of Adult Noncommunicable Disease Study, Iran
- CNSSCH: Chinese National Survey on Students’ Constitution and Health, China
- HEACPFTC: Healthy Exercise for All Campaign—Physical Fitness Test for the Community, Hong Kong, China
- KYRBWS: Korea Youth Risk Behavior Web-Based Survey, South Korea
- NHS: National Health Survey, Singapore
- NPFHS: National Physical Fitness and Health Surveillance, China
- NSPACEH: National Survey of Physical & Athletic Capacity and Exercise Habit, Japan
- SDUS: Survey of Drug Use Among Students, Hong Kong, China
- SHS: Students’ Health Survey, Singapore
- SRUSDS: Survey Research on Underage Smoking and Drinking Situation, Japan
- STEPS-N: STEPwise Approach to Chronic Disease Risk Factor Surveillance in Nepal, Nepal

**DATA YEAR:**
The data sheet and data appendix include the most recent data available since 2005 with sample sizes larger than 400. Exceptions are when data from GYTS are used, even when they are older than the data available on tobacco use from other surveys, if the latter do not provide details on tobacco use.

**NATIONAL DATA:**
All data refer to nationally representative sample (or similar) of the young people in the age group specified who are in schools (if from school-based surveys) or in the population (if from household survey), unless otherwise noted. *(Asterisk) next to the risk factor name in the data description indicates subnational data. The name of the city/region where the subnational data are collected appears in brackets in the data description.

**AGE GROUP:**
The age groups for the sample used are 13-to-15-year-olds for all the risk factors whenever possible. When data are not available for this age group, data for the age groups (or grade levels or schools) closest are presented to facilitate comparison across countries.

**SAMPLE SIZE:**
The sample size presented is for the age group specified. However, the sample size for the GSHS data points are for ages 13-17.

**SURVEY TYPE:**
GYTS and GSHS are both school-based surveys. DHS is a household survey. Types of surveys for other data sources appear in the data description.

For full citations, see Data Sources, page 13.
**Data Appendix**

**EAST ASIA**

### China

**Tobacco Use:** GYTS, 2014, ages 13-15, n=155,117

**Alcohol Use:** [Beijing, Shanghai, and Guangzhou], Lu et al. (2015), 2013, grades 7 & 8, n=6,575

**Overweight:** CNSCH, 2010, ages 13-18, n=237,062 (for ages 7-18), Working Group on Obesity in China Criteria

**Physical Inactivity:** NPFHS, 2010, ages 13-16, n=52,080, 7-day cut-off

### China, Hong Kong

**Tobacco Use:** GYTS, 2009, ages 13-15, n=637

**Alcohol Use:** SDUS, 2014/15, secondary school ages, n=77,271, no data by sex

**Overweight:** HEACPFTC, 2014/15, ages 13-15, n=2,517 (for ages 13-19), International Obesity Task Force Criteria

**Physical Inactivity:** HEACPFTC, 2011/12, ages 13-19, n=2,517, 7 day cut-off

### China, Macau

**Tobacco Use:** GYTS, 2010, ages 13-15, n=1,064

**Alcohol Use:** n/a

**Overweight:** n/a

**Physical Inactivity:** n/a
Data Appendix

EAST ASIA

Japan

Tobacco Use: SRUSDS, 2012, ages 12-14, n=8,804
Alcohol Use: SRUSDS, 2012, ages 12-14, n=8,804
Overweight: NSPACEH, 2014, ages 12-14, n=1,055,154, Percentage Overweight Criteria
Physical Inactivity: NSPACEH, 2014, ages 12-14, n=1,013,159, 7-day cut-off

Korea, North

Tobacco Use: n/a
Alcohol Use: n/a
Overweight: n/a
Physical Inactivity: n/a

Korea, South

Tobacco Use: KYRBWS, 2014, grades 7-9, n=36,156
Alcohol Use: KYRBWS, 2014, grades 7-9, n=36,156
Overweight: KYRBWS, 2014, grades 7-9, n=36,156, based on Korean National Growth Charts
Physical Inactivity: KYRBWS, 2014, grades 7-9, n=36,156, 7-day cut-off
Mongolia

**Tobacco Use:** GSHS, 2013, ages 13-15, n=5,393

**Alcohol Use:** GSHS, 2013, ages 13-15, n=5,393

**Overweight:** GSHS, 2013, ages 13-15, n=5,393

**Physical Inactivity:** GSHS, 2013, ages 13-15, n=5,393

Taiwan

**Tobacco Use:** GSHS, 2012, ages 13-15, n=6,801

**Alcohol Use:** GSHS, 2012, ages 13-15, n=6,801

**Overweight:** GSHS, 2012, ages 13-15, n=6,801

**Physical Inactivity:** GSHS, 2012, ages 13-15, n=6,801

SOUTHEAST ASIA

Brunei

**Tobacco Use:** GSHS, 2014, ages 13-15, n=2,599

**Alcohol Use:** GSHS, 2014, ages 13-15, n=2,599

**Overweight:** GSHS, 2014, ages 13-15, n=2,599

**Physical Inactivity:** GSHS, 2014, ages 13-15, n=2,599, 7-day cut-off
### Cambodia

**Tobacco Use:** GYTS, 2010, ages 13-15, n=1,637  
**Alcohol Use:** GSHS, 2013, ages 13-15, n=3,806  
**Overweight:** GSHS, 2013, ages 13-15, n=3,806  
**Physical Inactivity:** GSHS, 2013, ages 13-15, n=3,806

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### Indonesia

**Tobacco Use:** GYTS, 2014, ages 13-15, n=4,317  
**Alcohol Use:** GSHS, 2007, ages 13-15, n=3,116  
**Overweight:** GSHS, 2007, ages 13-15, n=3,116  
**Physical Inactivity:** GSHS, 2007, ages 13-15, n=3,116, 7-day cut-off

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### Laos

**Tobacco Use:** GYTS, 2011, ages 13-15, n=4,061  
**Alcohol Use:** GSHS, 2015, ages 13-15, n=3,683  
**Overweight:** GSHS, 2015, ages 13-15, n=3,683  
**Physical Inactivity:** GSHS, 2015, ages 13-15, n=3,683, 7-day cut-off

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Data Appendix

SOUTHEAST ASIA

Malaysia

**Tobacco Use**: GYTS, 2009, ages 13-15, n=3,021

**Alcohol Use**: GSHS, 2012, ages 13-15, n=25,507

**Overweight**: GSHS, 2012, ages 13-15, n=25,507

**Physical Inactivity**: GSHS, 2012, ages 13-15, n=25,507

Myanmar

**Tobacco Use**: GYTS, 2011, ages 13-15, n=1,652

**Alcohol Use**: GSHS, 2007, ages 13-15, n=2,806

**Overweight**: GSHS, 2007, ages 13-15, n=2,806

**Physical Inactivity**: GSHS, 2007, ages 13-15, n=2,806

Philippines

**Tobacco Use**: GYTS, 2011, ages 13-15, n=3,708

**Alcohol Use**: GSHS, 2011, ages 13-15, n=5,290

**Overweight**: GSHS, 2011, ages 13-15, n=5,290

**Physical Inactivity**: GSHS, 2011, ages 13-15, n=5,290
Singapore

**Tobacco Use**: SHS, 2012, ages 13-16, sample size unknown

**Alcohol Use**: NHS, 2010, ages 18-29, n=789, defined as drinking alcohol on 1 or more days a week, household survey

**Overweight**: NHS, 2010, ages 18-29, n=789, BMI>=25, household survey

**Physical Inactivity**: SHS, 2012, ages 13-16, sample size unknown

Thailand

**Tobacco Use**: GSHS, 2015, ages 13-15, n=5,894

**Alcohol Use**: GSHS, 2015, ages 13-15, n=5,894

**Overweight**: GSHS, 2015, ages 13-15, n=5,894

**Physical Inactivity**: GSHS, 2015, ages 13-15, n=5,894, 7-day cut-off

Timor-Leste

**Tobacco Use**: GYTS, 2013, ages 13-15, n=1,908

**Alcohol Use**: n/a

**Overweight**: DHS, 2009/10, ages 15-19, n=2,952, BMI >=25, household survey

**Physical Inactivity**: n/a
Data Appendix
SOUTHEAST ASIA

Vietnam

Tobacco Use: GSHS, 2013, ages 13-15, n=3,331
Alcohol Use: GSHS, 2013, ages 13-15, n=3,331
Overweight: GSHS, 2013, ages 13-15, n=3,331
Physical Inactivity: GSHS, 2013, ages 13-15, n=3,331

SOUTH ASIA

Afghanistan

Tobacco Use: GSHS, 2014, ages 13-15, n=2,579
Alcohol Use: n/a
Physical Inactivity: GSHS, 2014, ages 13-15, n=2,579, 7-day cut-off

Bangladesh

Tobacco Use: GYTS, 2013, ages 13-15, n=3,186
Alcohol Use: GSHS, 2014, ages 13-15, n=2,989
Physical Inactivity: GSHS, 2014, ages 13-15, n=2,989, 7-day cut-off
Data Appendix
SOUTH ASIA

Bhutan

Tobacco Use: GYTS, 2013, ages 13-15, n=1,378
Alcohol Use: [Thimphu], Norbu and Pemgpaen (2014), 2011, grades 7-12, n=423, no data by sex
Overweight: n/a
Physical Inactivity: n/a

India

Tobacco Use: GYTS, 2009, ages 13-15, n=10,112
Alcohol Use: DHS, 2005/06, ages 15-19, n=37,819, no frequency specified, household survey
Overweight: GSHS, 2007, ages 13-15, n=8,130
Physical Inactivity: GSHS, 2007, ages 13-15, n=8,130, 7-day cut-off

Iran

Tobacco Use: GYTS, 2007, ages 13-15, n=1,153
Alcohol Use: n/a
Overweight: CASPIAN, 2011/12, ages 6-18, n=13,486
Physical Inactivity: [Khoramabad] Sanaeinamab et al. (2013), no data year, ages 12-14, n=1,551, 7-day cut-off
### Maldives

**Tobacco Use:** GYTS, 2011, ages 13-15, n=1,494  
**Alcohol Use:** n/a  
**Overweight:** GSHS, 2014, ages 13-15, n=3,493  
**Physical Inactivity:** n/a

### Nepal

**Tobacco Use:** GYTS, 2011, ages 13-15, n=1,602  
**Alcohol Use:** STEPS-N, 2012/13, ages 15-29, n=972, household survey  
**Overweight:** STEPS-N, 2012/13, ages 15-29, n=972, BMI>=25, household survey  
**Physical Inactivity:** STEPS-N, 2012/13, ages 15-29, n=972, defined as not engaged in high-level physical activity using Global Physical Activity Questionnaire, household survey

### Pakistan

**Tobacco Use:** GSHS, 2009, ages 13-15, n=5,192  
**Alcohol Use:** n/a  
**Overweight:** GSHS, 2009, ages 13-15, n=5,192  
**Physical Inactivity:** GSHS, 2009, ages 13-15, n=5,192
Data Appendix
SOUTH ASIA

Sri Lanka

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References


Data Sources

Multi-Country Surveys


GSHS  World Health Organization (WHO) and Centers for Disease Control and Prevention (CDC), Global School-Based Student Health Survey, accessed at www.who.int/chp/gshs/en/.


Country-Specific Surveys

CASPAN  Ministry of Education and Training, Iran, Ministry of Health and Medical Education, Iran, Isfahan University of Medical Sciences, and Tehran University of Medical Sciences, Childhood and Adolescence Surveillance and Prevention of Adult Noncommunicable Disease Study, (2011-12).


NPFHSS  Ministries of Education and Health, People’s Republic of China, and National Committee on Sports, National Physical Fitness and Health Surveillance.


Other Country-Specific Studies


The Population Reference Bureau INFORMS people around the world about population, health, and the environment, and EMPowers them to use that information to ADVANCE the well-being of current and future generations.

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