

## **TOBACCO CONTROL RELATED ACTIVITIES OF THE RUSSIAN PUBLIC HEALTH ASSOCIATION**

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The issues of tobacco smoking and other psychoactive substance use prevention and control are high on the agenda of the Association. The tobacco challenge is illustrated by the fact that tobacco market in Russia is estimated at 6 billion US dollars, the market of pharmaceuticals – at 2.5 billion, and federal budget income - at 18 billion.

Prevalence of tobacco smoking and consumption in Russia are increasing rapidly. This is caused by the activities of transnational tobacco companies after the opening of the national tobacco market in 1991. That coincided with the successful anti-tobacco efforts implemented in a number of developed countries and subsequent expansion of tobacco industry in transition economies and the developing world.

Smoking is especially unfavourable for the health of the Russian population because it is promoting the negative impact of prevalent risk factors of disease and premature death: high environmental pollution, stressful social environments, inadequate nutrition, severe climate etc. According to Russian and international experts, high prevalence of tobacco smoking is one of the key causes of high mortality and low life expectancy of population in Russia, especially among males.

Smoking results in considerable economic losses due to additional expenses related to treatment of patients, premature ageing and death among smokers.

Especially dangerous is the steep rise of prevalence of smoking among children, adolescents, youth and women.

Development of legislation is hampered by the strong opposition of the powerful interested parties, especially the tobacco industry and advertisers, as well as by passivity and ignorance on the issues of smoking among population-at-large and decision-makers. Policy makers and attentive population should be informed of the magnitude of the hazard and possible policy options in the public interests.

Among national counterpart institutions of RPHA in area of psychoactive substance use control are the Parliaments and Governments at the federal and local

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levels, research and academic institutions, non-governmental organisations, business groups promoting drugs for relieve from nicotine dependency, mass media, chapters of the Association at the administrative territories of Russia, schools.

RPHA' main foreign partner is Canadian Public Health Association. Among other partners are national public health associations – members of European Public Health Association and World Federation of Public Health Associations, as well as the National Institutes on Alcohol and Addictions and United States' Department of Health and Human Services, United States Agency for International Development.

In 1996 the Association published and distributed widely a Public Health Policy Report “Tobacco or Health in Russia?”, the widely used reference in Russia and abroad until present.

In 1996 the Association participated in the international workshop on tobacco control issues which Canadian Public Health Association organised at the International Development Research Council offices.

In 1997 the Association organised a Conference in Moscow on new evidence on tobacco problems and approaches for their control. It's recommendations were submitted to participants of the WHO-sponsored All-Russian conference “A Tobacco-free World”, held in Moscow that year.

In 1998 the Association convened an All-Russia Public Health Policy Forum “Health Education / Promotion Among Children, Adolescents and Youth in Russia”, supported by United States Agency for International Development. Part of that project was a social marketing survey in 10 Russian cities among schoolchildren, their parents and teachers, including alcohol and tobacco issues.

The Association had produced and distributed several health education materials on tobacco smoking prevention and control with support of Canadian Embassy in Moscow in 1998.

Several large conferences aimed at psychoactive substance use prevention and control were organised by the Association at the territories of Russia: Moscow, Ekaterinburg, Petrozavodsk, Lipetsk, Archangelsk.

The Association participates in policy development and the drafting of relevant legislation in the State Duma and local legislatures, as well as

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participating in concrete activities at the level of school populations. The RPHA also promoted participation of two Russians at the International policy conference “Children and Tobacco” (Washington, DC, March 1999). The delegates were members of the Committee on Protection of Population Health of the State Duma who were active in developing tobacco legislation for Russia.

More recently the Association implemented the project “Tobacco and Youth Initiative in Russia: understanding the dimensions of the problem and developing effective anti-tobacco strategies”. This work was carried out with the aid of a grant from Research for International Tobacco Control, and with the technical assistance of the Canadian Public Health Association. Part of this project was the survey of schoolchildren according to the approach of Global Youth and Tobacco Survey done by the Association in Moscow in 1999. Global Youth and Tobacco Study (GYTS) is a project put forward and funded by WHO/TFI and UNICEF in Barbados, China (4 provinces), Fiji, Jordan, South Africa, Sri Lanka, Ukraine (Kiev), Venezuela and Zimbabwe (Harare). A number of countries had been planning to join the project.

Project activities were implemented in close consultation with the experts of CPHA, CDC and WHO.

The Project Panel of experts included Russian experts from National Parliament, Ministry of Health, Ministry of Education and practically all governmental and non-governmental, research and academic institutions working on the issues of Smoking and Health in Russia with an emphasis on the children and youth, as well as representatives of mass media. Total number of members of the Panel exceeded 60, majority of them working on volunteer basis. No organizations were contracted by the RPHA for implementation of the project.

The Panel was established immediately after the project started. The list of the members and area of their expertise:

Dr A. Demine, RPHA President – chairman, head of the project;

Prof. A. Aleksandrov, head of laboratory at the Research Center of Preventive Medicine under Ministry of Health of Russia, prevention of non-communicable diseases;

Dr L. Bal, Public Movement "Za zdorovuyu Rossiyu", responsible for programs for children;

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Dr. L. Dartau, head of department of population studies, Institute of Management problems under Russian Academy of Sciences, expert on smoking;

Dr O. Ioffina, assistant professor, Chair of social medicine, Russian University of Friendship of Peoples (medical faculty);

Prof. E. Kakorina, head of a department, N.A. Semashko Research Institute on Hygiene, Health Care Economics and Management under Russian Academy of Medical Sciences, expert on population health issues;

Prof. G. Kalabin, Russian University of Friendship of Peoples (environmental faculty);

Prof. Ye. Koshkina, head of department, Research Center on Narcology under Ministry of Health of Russia; department of epidemiology;

Dr V. Kuznetsov, Leading specialist, Ministry of Education of Russia, responsible for school programs;

Prof. V. Levshin, head of department, Russian Oncological Center under Russian Academy of Medical Sciences, expert on smoking;

Dr G. Nosyreva, staff member of the Committee on Health Protection, State Duma of the Russia, responsible for preparation of the draft law on tobacco;

Dr I. Paronyan, researcher, Research Center on Narcology under Ministry of Health of Russia;

Prof. E Skvortsova, head of department on healthy lifestyles among children, Federal Research Institute on Health care organisation and informatisation, monitoring unhealthy behaviors among children and adolescents at the territories of Russia under Ministry of Health of Russia;

Dr G. Tkachenko, head of Center on overcoming smoking under Ministry of Health of Russia;

Dr V. Vladimirtsev, Russian Zemstvo Movement, Director of Health programs;

Dr K. Vyshinsky, researcher, Research Center on Narcology under Ministry of Health of Russia, department of epidemiology.

All these experts have been working on the issues of tobacco prevention and control. Some of them are authors of materials for the Public Health Policy Report on Smoking published by RPHA in 1996.

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Translation of the project materials (description of the project, draft of the questionnaire, outline of report) provided by WHO and CDC into Russian was done.

The first meeting of the Panel took place at the RPHA office in February 1999. Along with the study design, the specific issues, which were discussed were the possible sources of information and implementation of the project activities.

Preparation of the GYTS and a Report on smoking and health in Russia was commenced.

The questionnaire used in GYTS was prepared (translation, adaptation, discussion at the panel of experts) in February-March 1999.

Consultations on the scale and place of the GYTS were conducted by the head of the project with experts at CPHA, WHO, CDC and within Russia. It was decided to conduct the survey in Moscow according to the agreed design, and later to try to extend this experience to the territories of Russia.

A group of experts for the survey according to GYTS methodology was selected by the head of the project based on analysis of capabilities, available information and experience.

Representative of the GYTS head for Russia Dr Demine – Dr Vyshinsky - participated in *Bangkok meeting on the design and details of the GYTS on 8-12 March 1999*.

The objectives of the survey were:

- to document and monitor prevalence of tobacco use including: cigarette smoking, and current use of smokeless tobacco, cigars or pipes.
- to better understand and assess students' attitudes, knowledge and behaviours related to tobacco use and its health impact, including: cessation, environmental tobacco smoke (ETS), media and advertising, minors access, and school curriculum.

The GYTS attempted to address the following issues:

- determine the level of tobacco use;
- estimate age of initiation of cigarette use;
- estimate levels of susceptibility to become cigarette smokers;
- exposure to tobacco advertising;

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- identify key intervening variables, such as attitudes and beliefs on behavioural norms with regard to tobacco use among young people which can be used in prevention programs;
  - assess the extent to which major prevention programs are reaching school-based populations;
  - establish the subjective opinions of those populations regarding such interventions.

The survey methodology was suggested by WHO and CDC experts and later discussed at a working meeting of participants before the survey.

The main features of the survey for all participating countries are the following:

- GYTS is a school-based survey of students aged 13-15;
- multi-stage sample design with school selection proportional to enrolment size;
- classes chosen randomly within selected schools;
- anonymous and confidential self-administered questionnaire;
- requires 30-40 minutes to administrate in a class (without additional country-specific or optional questions);
- fieldwork conducted in 6-8 weeks;
- 51 tobacco-specific questions;
- possibility of optional questions;
- countries could add their own specific questions to the questionnaire.

At the second meeting of the Project Panel in Moscow in March 1999, issues of the survey were agreed. The sample was prepared with support from CDC. In April and May 1999 a survey of schoolchildren 13-16 years old was conducted in selected schools in Moscow according to methodology of GYTS. The bubble-sheets with necessary documentation were prepared, copied and mailed to CDC for processing in June.

Methods of Moscow survey. The 1999 Moscow GYTS is a cross-sectional school-based survey which employed a two-stage cluster sample design to produce a city representative sample of students in grades seven to ten.

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Data about schools were obtained from the District Educational Comitties on approval by the Moscow City Government Education Committee. In some cases an electronic database was available, sometimes enrolment data had to be copied out from school report registration books.

The questionnaire. A group of experts on tobacco from the first group of countries selected to undertake GYTS, and staff members of WHO/TFI and UNICEF, drafted the 51 questions of the “core” part of GYTS. In addition, each participating country was allowed to include questions on local tobacco use issues. In Moscow the Project Panel decided not to include any additional questions except for the one about most widely used brands of cigarettes.

51 core questions covered the following main topics and included information about:

1. Prevalence of tobacco use among young people:
  - How many young people have experimented with tobacco; smoked cigarettes; use various forms of tobacco products; smoke at school and public places;
  - Age at which young people begin tobacco use.
2. Tobacco-related knowledge and attitudes of young people and their parents:
  - Index of susceptibility – intention to remain non-smokers among young people who never smoked;
  - Perceived social benefits and health risks of tobacco use;
  - Extent of peer pressure on young people to begin tobacco use.
3. Role of the media and advertising in young’s people use of tobacco:
  - How receptive young people are to tobacco advertising and other tobacco-promoting activities.
4. Minor’s access to tobacco:
  - Where minors usually buy tobacco;
  - Refusals to sell cigarettes to young people because of age.
5. Tobacco-related school curriculum:
  - Perception of their school programs.
6. Environmental tobacco smoking:
  - Extent of exposure to tobacco smoke at home and other places;

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- Perception of harmful effects of ETS.
7. Cessation of tobacco use:
- Short-term and long-term likelihood that young tobacco users will quit.

The questionnaire was translated into Russian and checked in close cooperation with the representatives with ADIC-Ukraine, that performed the study in Kiev city, as long as some schools in Ukraine are Russian speaking.

#### Data Collection

Survey procedures were designed to protect the students' privacy by allowing for anonymous and voluntary participation. The self-administered questionnaire was administered in the classroom. Students recorded their responses directly on the answer sheets that were supplied directly by CDC and later mailed to CDC to be scanned by a computer and analysis of data, as well as construction of tables.

To undertake the GYTS in Moscow, in each of 10 districts of the city a district co-ordinator contacted the District Educational Committee, obtained official written survey permission and informed administrators of schools included into the sample about the survey. This was facilitated by support from the members of the Project Panel.

#### Sample description.

All Public schools except for special schools for students with disabilities containing grades 7-10 were included in the sampling frame. A two-stage cluster sample design was used to produce a representative sample of students in these schools.

**School Level** - The first-stage sampling frame consisted of all Regular schools containing grades 7-10. Schools were selected with probability proportional to school enrollment size. One hundred schools were selected. **Class Level** - The second sampling stage consisted of systematic equal probability sampling (with a random start) of classes from each school that participated in the survey. All classes in the selected schools were included in the sampling frame. All students in the selected classes were eligible to participate in the survey.

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Response rates: Schools- 99% 99 of the 100 sampled schools participated. Students- 4,091 (86.0%) of the 4,755 sampled students completed usable questionnaires. Overall response rate - 99% \* 86.0% = 85.2%

Weighting: A weight has been associated with each questionnaire to reflect the likelihood of sampling each student and to reduce bias by compensating for differing patterns of nonresponse. The weight used for estimation is given by:

$W = W1 * W2 * f1 * f2 * f3 * f4$  W1 = the inverse of the probability of selecting the school W2 = the inverse of the probability of selecting the classroom within the school f1 = a school-level nonresponse adjustment factor calculated by school size category (small, medium, large). f2 = a class-level nonresponse adjustment factor calculated for each school 0 = a student-level nonresponse adjustment factor calculated by class f4 = a post stratification adjustment factor calculated by grade

Use of the weighted results: The weighted results can be used to make important inferences concerning tobacco use risk behaviors of all Public Schools for grades 7-10.

The main challenges for undertaking the global youth tobacco survey in Moscow by RPHA were:

- to bring together the potential of experts and organizations working on the issue of tobacco smoking prevention and control,
- to harmonise their interests for the benefit of the public health in Russia and the project, and
- to emphasise the role of the fledgling national public health association as a relevant forum for dealing successfully with the issue of public concern.

Many RPHA chapters at the administrative territories of Russia were willing to join the project. However, the funding limits and lack of data necessary for drawing a representative sample at the territories prevented inclusion of territories in the project other than Moscow in 1999. If RPHA will succeed in obtaining additional funding, the used approach might be extended to other territories of the country.

Methodological and technical aspects of project did not pose a challenge due to comprehensive and friendly back-up provided by CPHA, WHO and US Centres for Disease Control and Prevention (CDC) on all the stages of the study. For

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example, experts of CDC have provided assistance in sample design and selection, training survey administrators, development of survey administrator handbook, printing and supplying answer sheets and other forms; scanning answer sheets; general data management; editing and weighting of data; and report preparation. At the training workshop in September, 1999 for countries that have completed the study, participants were taught to generate statistical tables and make comparisons using EPIINFO software.

RPHA observed methodological guidelines and CDC granted a diploma for Excellence in Data Collection to the RPHA.

Necessary data on schools was often available only as sets of school report forms and had to be copied out manually in order to create a district school data base, needed for drawing a sample.

Some school administration representatives were critical about sparing time from school curriculum or complained about too many surveys recently performed at the schools.

On the fieldwork stage the interviewers have encountered the problem of some school administration's representatives unwillingness to "advertise" deviant behaviour such as tobacco use. In their opinion, asking questions on smoking could increase students' interest to smoking and promote trying smoking or smoking more. The interviewers had to explain the innocence of questionnaire design approved by the City of Moscow Government Education Committee. It was also important to persuade directors to implement the survey in the selected classes, even if they seemed to be "not good enough" to them.

Cultural adaptation of survey materials was an important issue for adequate understanding of the questions by the students and validity of further inter-country comparisons. The questionnaire translation into Russian had been reviewed by the Project Panel and agreed amendments needed for it to fit the local cultural context were made.

Anonymity and confidentiality aspects were among the main issues of the GYTS methodology and received special attention during survey conducting. Students were told that they do not have to put their names on answer sheets, and that obtained data would be used only for general assessment of the situation in the city and would not be ever associated with their schools or grades. School

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administration, interested in school survey results, could afterwards receive only aggregated data for Moscow, but not for the specific students.

Ethical issues had to be always kept in mind when conducting a survey on such a sensitive issue as adolescent smoking. The design of the questionnaire always put forward as the first option negative answers and disapproving attitude towards smoking. After the survey the students in the classroom received a brief health message and schools were provided with methodological literature on smoking prevention.

RPHA at the advice of CPHA attempted inclusion into a wider UNICEF project on tobacco and youth. A grant proposal was prepared and submitted to UNICEF Headquarters, extensive consultations took place with CPHA, the UNICEF Headquarters and the UNICEF office in Moscow. However the proposal was not funded.

On June 22, 1999 a meeting of the leading experts was convened by the Russian Public Health Association on issues of tobacco smoking among children, adolescents and youth in Russia. The participants were addressed to by Mrs. P. Trites, representative of Canadian Public Health Association. Consultations with the Panel members took place. The members suggested issues that they might cover in their papers. Papers on selected aspects of smoking were commissioned by the RPHA for the purpose of the project. The papers prepared for the project are listed in the References section of the Report prepared for the Singapore meeting in September 1999.

The discussion at the RPHA Project Panel meeting centered around the structure of the report suggested by WHO. However proposals were voiced to implement large-scale practical programs among schoolchildren. The project head had agreed that after completion of the current project RPHA should seek funds for such format of activities.

The head of the project Dr Demine prepared the report "Tobacco or health in Russia: understanding dimensions of the hazard and developing effective anti-tobacco strategies with a special reference to the health of children, adolescents and youth", using available sources of information, including papers commissioned by the RPHA. The draft report was agreed with CPHA.

Two representatives of the project head for Russia – Dr Skvortsova and Dr Vyshinsky - participated in Singapore meetings and disseminated among the participants of the meetings the above mentioned report.

The activities in Singapore has included 2 meetings.

The first one was *The Global Youth Tobacco Survey follow-up meeting (23-27 September 1999, Singapore, Environment Building)*. The meeting consisted of two parts that worked simultaneously. The first part was for the countries that wanted to join the GYTS project and wanted to perform data collection soon. The part RPHA presented project materials at was for the countries that have already collected data: Barbados, China, Costa Rica, Fiji, Jordan, Russia (Moscow), South Africa, Sri Lanka, Ukraine (Kiev), Venezuela, Zimbabwe (Harare) and included:

- brief discussion of main methodological results, quality of collected data;
- learning to work with Epi Info (version 6.0) software for creating new variables, producing crosstables and calculating standard error and confidence intervals for GYTS survey. For this purpose during 4 days of Epi Info Workshop each participant has completed a set of assignments on a PC supervised by CDC experts;
- discussing main principles of result interpretation and further analysis; what differences should be considered to be valid and conclusions can be drawn; basic principles of writing a report and answering special GYTS questions.

Like most of participants, the Russian Public Health Association have received *Award for Excellence* certificate for exemplary compilation of data for the GYTS in the Russian Federation from WHO Tobacco Free Initiative and CDC Office on Smoking and Health.

Table.

Selected survey data for Moscow city

	Rates
Sample size	4,091
Ever smoked	67%
Current smokers	34%
Current frequent smokers	16%
Current smokers of other tbc. Products*	35%

First smoked 11 or younger	22%
Place where usually smoke cigarettes	In public spaces** 48%
Susceptibility index, never-smokers	19%
Health as main reason to stop smoking	60%
Best friends smoke	28%
Anti-smoking media message, 30 days	30%
At sport events, last 30 days	15%
TV or movie actors smoking	69%
Cigarette logos at sport/other programs	40%
Cigarette advertising on billboards	58%
In magazines or newspapers	26%
Bought in a store	63%
Taught about sm. Dangers at school	34%
Discussed at school why people smoke	23%
Discussed effects of smoking at school	31%
Likely to smoke in next 12 months	21%
Likely to smoke in next 5 years	17%

\* - chewing tobacco, snuff, dip, cigars, cigarillos, little cigars, pipe

\*\* - parks, shopping centers, street corners, etc.

Analysis of data collected in Moscow suggests that:

- prevalence of tobacco smoking in Moscow is very high: 66.77% ever smoked, 33.5% are currently smoking and 15.9% smoke frequently;
- many start smoking at an early age – 22.4% before 11 years old;
- most of school students are smoking cigarettes in public places (48.1%);
- very high proportion of Moscow school students (63.0%) purchase their cigarettes in a store or from street vendors;
- majority of smokers tried to quit in the past year (74.8%) and many want to stop smoking now (69.8%). At the same time very few ever received any help to quit smoking from a program or a professional (2.0%). The bulk (60.9%) received no help at all. This shows high demand for such service;

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- the survey has detected high prevalence of such facts as cigarette representatives offering a “free” cigarette to students, especially for smokers (24.7%);

- mass media advertising of tobacco reaches a large proportion of Moscow school students. Many see a lot of cigarette advertising in printed press (25.7%), in TV programs (40.2%), and especially – on billboards (58.4% – a lot, 35.9% – a few). At the same time anti-smoking messages are not seen by more students in Moscow, than in any other country (42.3% at sport events, 25.5 in past 30 days);

- it is necessary to point to drawbacks of education system’s activities related to tobacco use prevention among school students. In Moscow the proportion of those who remember being taught of dangers of smoking (33.7%), discussed reasons why people smoke (23.2%) and negative effects of smoking (31.3%) in any of the classes was very low.

It was expected to find many similarities between Russia and Ukraine that also has shown very high figures on most of tobacco-related variables. The two states share much in common typical for the post-Soviet space.

The other meeting was the *International Consultation on Tobacco and Youth (28-30 September 1999, Singapore, Sheraton Towers)*. The Conference was organized by WHO, Singapore Cancer Society, with support of Ministry of Education of Singapore, National youth organization and UNICEF.

Participants of the Conference received information on tobacco consumption among children and adolescents, youth in Brazil, China, India, Oman, Poland, South Africa. Presentations of representatives of U.K., Australia, New Zealand, USA and Norway were devoted to development of relevant policy issues. A report with results of GYTS and some international comparisons (8 countries) were introduced in a presentation made by Dr Leanne Riley (WHO) and Dr Ricardo Granero (Venezuela). It was stressed that a very promising and interesting international project was developed and successfully carried out during a very short period of time. It should be emphasized that Russia demonstrated the worst rates on practically all aspects of the problem in the group included into the report.

Based on the findings of the project and GYTS survey in Moscow and other countries and also presentations and discussions at the International Consultation,

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main measures that could help to improve smoking situation among school students of Moscow could be the following:

- regulation of cigarette sales to minors;
- prohibiting smoking in public places;
- limiting cigarette advertising, especially on billboards;
- regulation of free cigarette distribution;
- improving the quality of school anti-smoking programs;
- smoke-cessation assistance programs for school students.

Participants in the meeting were introduced to the practical implementation of an anti-smoking program among youth “Stop smoking!”, prepared by the students of high schools of Singapore. Participants received materials prepared for the plenary meeting as well as books published by the World Bank and the Ministry of Education of Singapore. The handbook for teachers on smoking prevention at schools is also of interest. As a follow-up of the meetings a program on training of teachers on prevention of smoking among children was presented by Professor Ann Charlton of Medical faculty of Manchester University.

The results of the project were analysed in Moscow by the members of the Project Panel. Recommendations on the structure of the report had been received. Publishing and disseminating materials of the project in Russian and in English was considered desirable.

Project activities reinforced RPHA visibility and expertise. The Russian Public Health Association submitted proposals to the new Federal Draft Law on Tobacco. The President of the Association participated in the meetings of the relevant working group at the State Duma of the Federal Assembly of the Russian Federation in September 1999. Materials derived from the project were used by the RPHA President, in meetings of the working group on the new draft law on smoking. The materials were submitted to the members of that group and other decision-makers in order to promote adequate policy development. The Project materials were communicated as well to the activists at the territories of Russia, and were used at the meetings and conferences. RPHA envisages the relevant aspects in the activities of the RPHA chapters.

Thus RPHA has been raising public awareness on the issue of smoking and youth, and plans to use the project materials further at the press conferences, in

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publications, during meetings with school officials. Research results are being used to inform anti-smoking campaigns aimed at youth and to allow the RPHA to develop its own anti-smoking materials.

The evidence collected have been distributed to colleagues working on the issue, and they used it in various audiences and activities, local legislatures as well as activities at the level of school populations.

The Project materials and results based on new information produced during the project were used by interested individuals and organisations at a number of RPHA activities:

- on 5 April, 2000 RPHA convened a large-scale conference “Smoking or health in Russia”. Conference participants were briefed on the progress of the preparation of the Federal law “On limiting smoking and consumption of tobacco products in Russia” by Dr G. Nosyreva, staff member of the Committee on Health Protection, State Duma of the Russia, responsible for preparation of the draft law on tobacco. RPHA President informed on the progress of the project and preparation of publication of the Report “Smoking or health in Russia” by RPHA;

- seminar on health promotion, convened by RPHA with support and participation of CPHA in Moscow in May 2000;

- seminar on qualitative methods of analysis of psychoactive substance abuse among children, convened by RPHA with support and participation of CPHA in Moscow in September 2000;

- development of cooperation with WHO-EURO officials from the Alcohol, Tobacco and Drugs Unit;

- preparation of paper for the WFPHA 9<sup>th</sup> international Congress “Challenges for Public Health at the Dawn of the 21<sup>st</sup> Century” held in Beijing on 2-6 September 2000;

- preparation of papers for the CPHA’s 91<sup>st</sup> Annual Conference, and Ontario Public Health Association’s 51<sup>st</sup> Annual Conference Health for all in the year 2000, Crown Plaza Hotel, Ottawa, Ontario October 22-25, 2000;

- translation of the book “Smoke and Mirrors”. The Association is implementing translation of the Canadian book “Smoke and Mirrors” by Dr. Rob Cunningham that will help us to control tobacco epidemic in Russia. This work is

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supported by Canadian Public Health Association and International Development Research Council.

All these opportunities were used to increase visibility of RPHA by distributing information materials and publications of RPHA among participants of the meetings.

RPHA further developed its collaboration with the experts on the issue and relevant NGOs acting in Russia. Among the latter were the Russian Zemstvo Movement, “Movement Against Tobacco”, Charitable Fund “Against Cancer”, “Vmeste Protiv Raka – Together Against Cancer”, “Regionalnaya obshestvennaya organizatsiya sodeistviya ukreplenyu zdorovya – Regional Public Organization Towards Health Strengthening”, which participated in tobacco-related activities of RPHA, including the project, conferences and meetings. RPHA activities also included the preparation of publication of the second edition of the “*Smoking or Health in Russia*” Public Health Policy Report (first edition in 1996) and the development of a relevant coalition. Certainly it will be desirable to complement with these activities the translation, publication and dissemination of the “Smoke and Mirrors” volume.

A section on tobacco use, prevention and control is planned for the RPHA Website, as well as developing links with several existing Websites on these issues. The Russian Public Health Association was implementing efforts to promote this important development. There are links to these sites at the RPHA Website <[www.glasnet.ru/~hefrus](http://www.glasnet.ru/~hefrus)>.

Project participants asked the RPHA to launch a large-scale project on smoking prevention and control among children, adolescents and youth: based on the evidence collected in the project. It is clear that the situation in this country is especially unfavourable in international comparison and deserves intervention. Taking into consideration the current social and economic situation in Russia, it will be hardly possible to mobilise sufficient resources within Russia. Therefore support of international organisations and donors is needed in order to produce tangible results in resisting the transnational tobacco industry.

In line with the global trend, recently there is developing a new trend in the strategy of transnational tobacco companies in Russia. In September 1999 a high ranking representative of British American Tobacco, in addressing the RPHA

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President, expressed willingness to know more about public health aspects of tobacco smoking in Russia. It was stressed that the official policy of British American Tobacco (BAT) is that smoking is a free, informed and responsible decision of an adult and minors must not smoke. In line with this BAT, jointly with the Government of Moscow, maintains street advertising for minors which states “Smoking? There Is No Time for This” and promotes sports instead of smoking. British American Tobacco also launched a PR campaign aimed at put 18+ stickers with the relevant information on each tobacco sales outlet. British American Tobacco representative expressed willingness to expand these efforts in collaboration with experts and organisations. It was suggested that Russian non-governmental organisations might become British American Tobacco’s counterparts because problems of effective use of resources had been encountered by British American Tobacco in attempts to develop similar activities with the governmental sector.

The Russian Public Health Association refuses to collaborate with the tobacco industry in a program funded by the latter. The Russian Public Health Association has prepared a written policy on this issue:

“The RPHA maintains a policy of non-collaboration with the tobacco industry. This policy is based on a belief that tobacco industry efforts to collaborate with anti-smoking messages aimed at youth education is merely a ploy to enhance public perceptions of the tobacco industry. These efforts might also be a public relations effort to improve their image and forestall increasingly tough legislative efforts to regulate the industry, and prevent being sued by insurance companies and individuals. Tobacco companies, seeing adults quit smoking, are looking down the road at the ultimate loss of profit unless a new generation of smokers can be recruited. This is supported by the fact is that up to 80% of new smokers in Russia come from young people under 18.

Tobacco companies exist for profit – not some altruistic societal good. Their aim is to silence potential critics – non-governmental organisations demanding legislation and regulators at the Government.

The question of collaborating with tobacco companies was raised at the UNICEF meeting in Mohonk. Several countries at that meeting had had the experience of tobacco companies approaching non-governmental organisations or

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Departments of Education with proposals to work together on youth related campaigns. Experience testifies that such collaboration, although tempting, is ultimately very unwise. Tobacco companies are taking advantage of the fact that many countries are challenged for cash. This allows the tobacco company to make a donation that ostensibly benefits youth related tobacco campaigns but in actual fact allows the tobacco company to ensure that it's ultimate interest, profit making, is protected.

International experience revealed that “preventive” programs advocated by tobacco industry is a gesture of collaborating with non-governmental organisations, schools etc. ultimately designed to protect their own interests. Such programs are weak and ineffective because they are designed to be such. It is clear that tobacco companies are interested in the pursuit of profit, and thus are not interested in reducing smoking among children because it could undermine the long-term viability of the industry. Tobacco industry advertisements are attractive to minors, are located close to schools. Available extensive internal industry documents, cited in publications, demonstrate that the industry's true intent is to advertise to children.

Tobacco companies are currently working with the Russian government officials on the draft of the tobacco legislation and have every possibility to prepare their opposition.

It might be that tobacco companies in Russia would suggest voluntary action, such as a voluntary code on advertising and package warnings, or discouraging retailers from selling tobacco to minors in an attempt to discourage government regulation. International experience suggests that this is a public relations attempt. Tobacco industry emphasises children's smoking as the only problem and discourages efforts aimed at smoking prevention and control among adults. However it is obvious that measures aimed at children will yield results in decline of tobacco-related diseases after 30 years, and measures aimed at adults, including increased taxes, legislation etc. could have an immediate positive impact.”

This forecast was correct. After crash of the draft of tobacco legislation in the new State Duma in 2000, transnational tobacco companies founded in Russia so-called Russian Public Council on the Problem of Adolescent Smoking. Its

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activities are sponsored by Philip Morris, and it managed to deceive and attract a number of experts to participate in its activities.

An urgent comprehensive policy response to tobacco smoking epidemic in Russia is required. The key recommendations put forward by the Association to the National Parliament and all interested parties, based on the experience of the project, follow:

The health advocates should aim at adopting a legislation to restrict tobacco advertising, lowering the tar and nicotine content in tobacco products and requiring an impressive health warning on the packaging of tobacco products.

In order to improve the population health in Russia, and first of all of children, adolescents and youth it is recommended that the federal and territorial governments:

- continue development of the state policy, bringing together authorities and all interested parties in the society (Ministries of Health, Education, Trade, Economics, Physical Culture and Sports, Interior etc.), on the basis of a combination of health education and legislative measures, with the aim of reducing the incidence (the number of new cases per year) of smoking among adolescents by 2005 at least by one half. It is necessary to help the non-smokers to escape the tobacco trap, to inspire the smokers to quit smoking and provide necessary help, and to protect the health and the rights of non-smokers;

- hold Hearings at the State Duma of the Federal Assembly of the Russian Federation with participation of all interested parties for the generation of a balanced and reliable assessment of the threats posed by tobacco smoking and relevant policy response;

- commission an official State Report on Smoking and Health and submit it to the Parliament to become a basis of a comprehensive tobacco policy. That Report should be published and disseminated widely for adequate information of the population, governmental and non-governmental organisations, health professionals on the tobacco-related risks and strategies for their control;

- acknowledge officially tobacco smoking as consumption of psychoactive substance, together with consumption of alcohol and drugs;

- acknowledge nicotine as a drug so that its turnover for the sake of health of population should be monitored by the state, taking into consideration the fact that

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dependencies of humans from tobacco, alcohol and drugs are included into the same category of «Impaired psychic and behaviour caused by intake of psychoactive substances» of the International Classification of Diseases of the Tenth Revision (ICD-10);

- implement measures aimed at change of attitudes of the population of Russia to tobacco, so that tobacco smoking will be treated as a socially unacceptable behaviour, not as a normative one;

- enforce implementation of the tobacco-related legislation by authorities and tobacco business;

- establish state surveillance of production and marketing of tobacco products, control of quality of tobacco products, contents of substances adverse for the health in tobacco products, as well as of consumption of tobacco and its public health impact in Russia;

- strengthen the resource basis of the anti-tobacco state bodies and public associations;

- prescribe sales of tobacco products from the age of 18 years on a basis of a document certifying the age of the buyer;

- increase retail prices of tobacco products;

- ban smoking in public places;

- expand collaboration between governmental and non-governmental organisations on the issues of tobacco smoking prevention and control;

- ban sponsorship of tobacco industry in relation to sports and entertainment events;

- introduce additional restrictions on advertising of tobacco products, e.g.. envisage restriction of advertising from 2000 on by black-and-white texts, without pictures or photos;

- ban sales of tobacco products packs with number of tobacco products units less than 20 pieces, presents to buyers of tobacco products for coupons contained in the packaging of tobacco products;

- to introduce by means of legislation the principle of payment of tobacco companies for the population health damage, caused by tobacco smoking, similarly to measures undertaken towards polluters of the environment;

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- promote lawsuits against tobacco business by individuals, public groups, health authorities and facilities, aimed at compensation of costs of treatment as well as payments of compensations to survivors in the families of individuals who died from diseases caused by smoking;

- urge tobacco business on a legal / voluntary basis to:

- stop marketing of tobacco products aimed at children, adolescents, youth and women;

- acknowledge the harm to health of citizens, caused by tobacco smoking, including risk of cancer and unhealthy dependency of a smoker from nicotine, with obligatory placement of relevant complete and reliable information at the packaging of tobacco products;

- earmark into a special fund money for compensation of health damage of consumers of tobacco products, as well as for implementation of health education among the population, first of all – among children and women;

- implement necessary measures so that the standards of activity (the rules of conduct) of tobacco business in Russia, defined by the necessity to protect population health, will be similar to those in countries successfully curbing the smoking epidemic, or even more strict.

The Ministry of Health of the Russian Federation should:

- inform, involve and inspire the health professionals of Russia, first of all physicians to quit smoking and to provide leadership and inspiration for the public movement for eradication of smoking;

- expand health education of the population with participation of mass media with an emphasis on the risk of development of dependency and diseases caused by smoking, including environmental tobacco smoke. To emphasise the fact that smoking precedes or accompanies use of other psychoactive substances – alcohol and drugs causing dependency and destroying the personality;

- provide education of health professionals on issues of resistance to smoking, quitting smoking, relieve from tobacco dependency with the use of permitted effective pharmaceuticals and alternative means, prepare and publish relevant guidelines and textbooks;

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- develop and endorse official documents regulating provision of medical care aimed at quitting smoking for various socioeconomic groups, including schoolchildren.

Non-governmental organisations should play a more important role in activities aimed at tobacco smoking prevention and control as well as documenting tobacco smoking impact first of all among children and women. International collaboration between non-governmental organisations should be further expanded.

The Russian Public Health Association should continue its efforts aimed at tobacco smoking prevention and control in Russia.

It is envisaged to publish the Report “Tobacco or Health in Russia”. There is a perceived need in such a publication in the country, first of all for the purposes of policy formulation at the Federal and regional levels, health education, training of specialists, development of relevant activities of NGOs in Russia, including RPHA chapters.

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