



# TOBACCO CONTROL:

## a comprehensive approach at country level in the Russian Federation

By: Galina Sakharova, Nikolay Antonov & Oleg Salagay





**WHO European Office for the  
Prevention and Control of  
Noncommunicable Diseases**

**9 Leontyevsky Pereulok  
125009 Moscow, Russian Federation  
Email: [NCDoffice@who.int](mailto:NCDoffice@who.int)**

**Website:  
[www.euro.who.int/en/NCDoffice](http://www.euro.who.int/en/NCDoffice)**

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# ABSTRACT

At the end of the 20th and beginning of the 21st century, the Russian Federation was among the countries with highest prevalence of tobacco-smoking. The government's efforts to reduce tobacco-smoking did not lead to any reduction in the tobacco epidemic in the country. At the same time, tobacco companies' actions in the early 2000s contributed to further increases in prevalence of tobacco use in the Russian Federation. Consequently, the government immediately joined WHO's efforts to combat the tobacco epidemic by taking an active part in the development and further implementation of the WHO Framework Convention on Tobacco Control (FCTC). The adoption and the implementation of the FCTC has resulted in significant positive results over a short period in a country with very high prevalence of tobacco use. A steady annual reduction in tobacco use since 2005 is evidenced by sales declines for tobacco products. The most significant decline in tobacco sales was registered in 2014, the first year after the law took effect, when tobacco products sales declined from 395.5 billion in 2005 to 319.9 billion.

# KEYWORDS

Smoking  
Tobacco  
Tobacco control  
WHO FCTC  
Russian Federation

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## ABOUT

## THE AUTHORS

**Galina Sakharova** is: professor and head of the Scientific and Methodological Centre for Abandonment of Tobacco, Federal Medical–Biological Agency of the Russia Federation; professor of the Department of Pulmonology and Respiratory Medicine of the Institute of Additional Professional Training, Federal Medical–Biological Agency of the Russia Federation; a member of the National Coordinating Council for Tobacco Control at the Ministry of Health of the Russian Federation; and Ministry of Health expert on tobacco control.

**Nikolay Antonov** is: professor and deputy director of the Research Institute of Pulmonology, Federal Medical–Biological Agency of the Russia Federation; head of the Department of Pulmonology and Respiratory Medicine of the Institute of Additional Professional Training, Federal Medical–Biological Agency of the Russia Federation; a member of the National Coordinating Council for Tobacco Control at the Ministry of Health of the Russian Federation; and Ministry of Health expert on tobacco control.

**Oleg Salagay** is: director of the Department of Public Health and Communications of the Ministry of Health; head of the Department of Biomedical Law of the National Research Medical University; a member of WHO bilateral cooperation working groups for Brazil, China, India, the Russian Federation and South Africa; and president of the Bureau of the Conference of the Parties to the WHO Framework Convention on Tobacco Control.

# ACRONYMS, ORGANIZATIONS AND FEDERAL LAWS

## Acronyms used

FCTC	(WHO) Framework Convention on Tobacco Control
GATS	Global Adult Tobacco Survey
GYTS	Global Youth Tobacco Survey
USSR	Union of Soviet Socialist Republics

## Federal organizations cited

Gospozhnadzor	Main Directorate of State Fire-fighting Service
Konfop	Interrepublican Confederation of Consumer Societies
Roskomnadzor	Federal Service for Supervision of Telecom, Information Technologies and Mass Communications
Rospotrebnadzor	Federal Service for Supervision of Consumer Rights Protection and Human Well-being
Rosstat	Federal State Statistics Service
Roszdrazhnadzor	Federal Service for Supervision of Health Care

## Main federal laws cited

Federal Law No. 15-FZ	on protecting the health of citizens from the effects of second-hand tobacco smoke and the consequences of tobacco consumption
Federal Law No. 51-FZ	on the accession of the Russian Federation to the WHO Framework Convention on Tobacco Control
Federal Law No. 87-FZ	on restriction of tobacco-smoking
Federal Law No. 115-FZ	to further protect the health of citizens from the consequences of tobacco consumption
Federal Law No. 268-FZ	on technical regulations for tobacco products
Federal Law No. 274-FZ	amending the Code of Administrative Offenses of the Russian Federation
Federal Law No. 456-FZ	(amending Article 19 of Federal Law No. 15-FZ) banning the wholesale and retail trade of snus within the territory of the Russian Federation
Federal Law No. 530-FZ	on amendments to certain legislative acts of the Russian Federation to strengthen efforts to address trafficking in counterfeit goods and smuggling of alcoholic beverages and tobacco products



# EXECUTIVE SUMMARY

At the end of the 20th and beginning of the 21st century, the Russian Federation was among the countries with highest prevalence of tobacco-smoking. The government's efforts to reduce tobacco-smoking did not lead to any reduction in the tobacco epidemic in the country. At the same time, tobacco companies' actions in the early 2000s contributed to further increases in prevalence of tobacco use in the Russian Federation. The smoking prevalence increase was especially dramatic among young adults and women. Consequently, the government immediately joined WHO's efforts to combat the tobacco epidemic by taking an active part in the development and further implementation of the WHO Framework Convention on Tobacco Control (FCTC). Given the high prevalence of tobacco use, tobacco companies' vigorous interference and the total lack of information at the time, the only correct course of action was to adopt a comprehensive package of tobacco-control measures. Only this approach, it was believed, would bring real progress in combating tobacco use, and it proved to be successful during the first years of implementation.

An action plan to join and implement the FCTC was developed, in accordance with FCTC Article 5. After joining in 2008, the government entrusted the Ministry of Health with leading and coordinating tobacco control. The National Coordination Council on Tobacco-control was established, also in accordance with Article 5 of the FCTC, to develop and implement comprehensive multisectoral strategies and laws. It comprised officials from 12 relevant ministries and government agencies, representatives of the State Duma, the Public Chamber of the Russian Federation and the WHO Russian Federation country office, experts from leading medical research institutes and representatives of public organizations. A representative of the Ministry of Health was appointed chair. Representation of public health and scientific research organizations and communities subsequently was greatly expanded due to the need to involve new experts in various aspects of tobacco control.

The Coordination Council's main objective was to ensure that the Russian Federation met its obligations under the WHO FCTC. All subsequent work to develop and adopt a national strategy, federal law and legislative acts for tobacco control was conducted by the Coordination Council.

From the beginning, the Ministry of Health and the Coordination Council charted a course toward comprehensive implementation of FCTC provisions. A national strategy on combating

tobacco use for 2010–2015 was adopted in 2010, setting out the medium-term goals to be achieved by 2015:

- a 10–15% reduction in prevalence of tobacco consumption;
- a 50% reduction in the proportion of citizens exposed to the effects of tobacco smoke, with achievement of full protection in education, medical, sports and cultural settings and in all enclosed spaces;
- increased public awareness about the health risks associated with tobacco use;
- coverage of 90% of the population with anti-smoking campaigns;
- a gradual increase in tax on tobacco products; and
- the establishment of an equal excise rate for filter and non-filter cigarettes, including an increase in ad valorem and specific excise tax rates that would bring them to the average level of countries of the WHO European Region.

Immediately after the adoption of the national strategy, the Coordination Council began to develop Federal Law No. 15-FZ on protecting the health of citizens from the effects of second-hand tobacco smoke and the consequences of tobacco consumption. After submitting the draft to the State Duma in 2012, the work was continued by a group consisting of representatives of the Ministry of Health, the Coordination Council, ministries and government agencies, special committees of the State Duma, public organizations, leading medical research institutes, and public health and entrepreneurship associations.

The federal law was signed by the President of the Russian Federation on 23 February 2013 and became fully effective on 1 June 2014. It provides for: a complete ban on tobacco-smoking in public places, including adjacent areas of medical, education, sports and cultural institutions; a ban on the sale of oral forms of smokeless tobacco; a total ban on advertising, promotion and sponsorship of tobacco products and the process of their consumption; and annual increases in the prices of tobacco products. Regional authorities were granted the right to further strengthen the measures to protect the public from the effects of tobacco use. The technical regulations for tobacco products and the federal law on advertising were amended accordingly. Penalties described in the Code of Administrative Offenses and the Criminal Code of the Russian Federation were introduced for violations of each provision of the law.

Beginning in 2003, the Russian Federation carried out wide-scale advocacy work at every level of tobacco control aimed at increasing public awareness of the serious health risks of tobacco use, the need to adopt the most stringent measures to protect citizens from its effects, and the significant economic and health impact for the country. These efforts were

accomplished despite relentless and growing tobacco industry interference. Given the high prevalence of tobacco consumption in the Russian Federation and the scale of the plans for tobacco control, awareness-raising campaigns sought to target smokers and non-smokers, health-care workers, public officials and decision-makers. Public organizations, medical communities, medical research institutions and non-profit organizations contributed greatly to this effort, supported by mass media campaigns from the Ministry of Health. Information materials for decision-makers and public officials were based on scientific evidence and results of representative epidemiological studies. Results from the Global Adult Tobacco Survey of 2009 were also important.

The most successful anti-smoking mass-media campaigns by public and non-profit organizations were carried out in cooperation with regional and local authorities and repeated over the course of several years. Representatives of nongovernmental organizations, scientific and medical communities and institutions actively participated in discussions on the draft federal law during parliament hearings, conferences and working sessions and through mass-media interviews. This created an environment in which social norms could be changed to reduce the acceptability of tobacco use and promote healthy lifestyles. It was also instrumental in changing health-care workers' attitudes, which historically and traditionally viewed tobacco use as little more than a habit. General practitioners were now obliged to provide cessation support and treat tobacco dependence. All this led to the adoption of the most comprehensive tobacco-control law possible and achieved significant positive results in the first years of implementation.

According to results from the Global Youth Tobacco Survey conducted in the Russian Federation among students aged 13–15 years in 2004 and 2015, the greatest positive dynamics were seen in: a two-fold reduction in tobacco use (by up to 15%); reduction in the number of potential smokers (the number of non-smoking adolescents who believed they might take up smoking in the future) by 10%; and a two-fold reduction in adolescents exposed to second-hand smoke at home and public places (by up to 35%). These met the targets set in the national tobacco-control strategy for 2015.

Efforts to create the most effective tobacco-control law in the Russian Federation continue. The development and enactment of a mechanism to monitor tobacco use and assess the effectiveness of anti-tobacco measures aimed at preventing exposure to second-hand smoke and reducing tobacco consumption will become key elements of this work. Ongoing monitoring activities will include representative youth and adult surveys and collection of information from regulatory authorities, departments and agencies responsible for implementation of Federal Law No. 15-FZ. The country conducted its second Global

Adult Tobacco Survey in 2016, which will allow trends in tobacco control to be identified and enable further improvements in the law. This integrated approach allows tobacco-control measures simultaneously to be developed and strengthened proportionally; only comprehensive implementation of the whole package of balanced tobacco-control measures can bring success.

Interim data point to the need to further strengthen tobacco-control measures in relation to improving smoking-cessation rates and treatment of tobacco dependence, increasing public awareness of the health risks, and imposing severe restrictions on government officials' interactions with the tobacco industry and its representatives or other organizations established by, or affiliated to, tobacco companies. Tobacco tax rates remain lower than the average rates in the Region, despite price increases on tobacco products steadily surpassing those on food products. This calls for further strengthening of this tobacco-control measure.

Overall, adopting and implementing the full range of FCTC provisions has yielded significant positive results over a short period in a country with very high prevalence of tobacco use. A steady annual reduction in tobacco use since 2005 is evidenced by sales declines for cigarettes and papirosy. The most significant decline in tobacco sales was registered in 2014, the first year after the law took effect, when cigarettes and papirosy sales declined from 395.5 billion in 2005 to 319.9 billion.



# HISTORICAL BACKGROUND

16TH CENTURY

Tobacco was first introduced to Russia in the 16th century. It briefly gained popularity among the nobility (1) but the attitude toward tobacco very quickly changed and it was officially banned. The Russian Orthodox Church was instrumental in imposing the ban, as tobacco was deemed a demonic and ungodly potion.

17TH CENTURY

Until the end of the 17th century, tsars issued numerous decrees providing harsh punishments for those caught distributing or using tobacco, including one from Tsar Mikhail Fedorovich in 1632 banning the importation of tobacco: sellers could face death and confiscation of their estate, and buyers torture and public corporal punishment. Attitudes hardened even more after the fire of Moscow in 1634, which razed about 5000 homes, was believed to have been caused by smoking. Legal sales and manufacture of products began only in the second half of the 17th century. Tobacco was legalized by Tsar Peter the Great, who established the rules for its distribution in 1697. The smoking ban continued in Moscow for a long time, however, due to the high risk of fire.

20TH CENTURY

Smoking on the streets of Moscow was banned at the beginning of the 20th century. Police enforced the ban strictly and fined anyone with a cigarette in their hand, but it was lifted after 1917.

1920s

Tobacco was considered a harmful substance not due to it being a risk factor for illness, but primarily because of the serious risk of fire. Smoking became fashionable among the educated elite, the so-called smoking intelligentsia, during the 1920s, but they soon began to ponder the health consequences, with some smokers making self-directed attempts to quit. The most famous smoker in the Union of Soviet Socialist Republics (USSR) was the poet Vladimir Mayakovsky (1893–1930), who succeeded in quitting smoking without help. One of the most prominent members of the artistic avant-garde of the 1910s and 1920s, Mayakovsky was a heavy smoker who invariably had a cigarette or papirosy in his mouth when taking photographs or posing for artists.

He suddenly decided to quit smoking, and the result was unexpectedly favourable. Mayakovsky wrote his poem "I am happy!" in 1929. Using all his poetic talent, he described his feelings and the changes he associated with abandoning cigarettes:

Today  
my  
And night  
without a single

I breathe,  
like an elephant,  
gait  
is light,  
flew by,  
like a wonderful dream,  
cough or spit.

Mayakovsky's poem is still used to inspire smokers to quit tobacco.

1980s

Official attitudes about tobacco being a leading health risk factor began to form in the second half of the 20th century. The Cancer Research Centre and International Agency for Research on Cancer held the first conference on tobacco as a major health hazard in Moscow in 1985. The conference recommended adopting national regulations for nicotine and tar yields in cigarette smoke, which were introduced for the first time in 1988 with tar yields at 19 mg and nicotine at 1.5 mg per cigarette. To support public health promotion, prevention and reduction of morbidity, the Ministry of Health of the USSR ordered in 1986 that the population be medically examined and classified smoking as a health risk factor (2).

2000s

Awareness of health harms from smoking and exposure to second-hand smoke began to increase in the 1980s, particularly among health-care workers. WHO's work on developing the Framework Convention on Tobacco Control (FCTC) (3) had a great influence on the development of legislation in the field of tobacco control. In 2001, Federal Law No. 87-FZ on restriction of tobacco-smoking was adopted. The law was developed at a time when the tobacco industry was particularly strong, bolstered by the arrival of transnational tobacco companies, so had to withstand much pressure from the tobacco lobby. It nevertheless represented the first major step towards tobacco control in the Russian Federation.

The law set the legal basis for introducing tobacco-smoking bans to reduce morbidity and introduced new limits for harmful substances in the smoke of filtered (14 mg of tar and 1.2 mg of nicotine) and unfiltered (16 mg and 1.3 mg) cigarettes. It also introduced health-warning and information messages about tar and nicotine content on packaging.

The main health warning and additional text on the risks of tobacco-smoking were to occupy no less than 4% of the principal display areas of any package (pack) of tobacco products. The retail trade of cigarettes and papirosy was prohibited in health-care facilities, cultural institutions, sports facilities, and in territories and premises intended for providing education services (selling was also prohibited within 100 m of the boundaries of areas designated for education services). Retail trade of cigarettes with fewer than 20 in a single pack and sales of individual cigarettes and papirosy were banned. A ban on the sale of tobacco products to people under 18 years was introduced for the first time.

The law also addressed the banning of smoking in public places. Smoking was prohibited in workplaces, on urban and commuter public transport and aircraft flights of less than three hours' duration, in fully enclosed sports facilities, health-care facilities and cultural institutions, and on and within educational and state agency premises. It failed, however, to introduce a complete ban and allowed smoking in designated areas, for which regulations were not adopted.

A separate article was devoted to educating the public about harm from tobacco-smoking. Regular education and information for the public through the mass media and programmes was made mandatory. Tobacco-smoking was banned from new TV films, movies and theatre performances, unless integral to the artistic concept, and public and political figures were forbidden to smoke when in media settings. Enforcement was limited due to failure to provide sufficient legal accountability for violations, resulting in several amendments being introduced between 2001 and 2006: the requirement to obtain a license when manufacturing cigarettes and other tobacco products was abolished in 2004; a complete ban on outdoor advertising of tobacco products was introduced in 2005; and display of the maximum retail price on a pack of cigarettes was introduced in 2006.

# PREVALENCE OF TOBACCO USE IN THE RUSSIAN FEDERATION

Health consequences of smoking received little attention in the USSR at a time of rapid growth in the domestic tobacco industry: the result was a relatively high smoking prevalence (4), mostly among men. Social attitudes towards female smoking were very negative, so it remained very low. No representative epidemiological studies on smoking prevalence in the USSR were conducted until the end of the 1990s. Increased prevalence during that period could only be estimated by volume of total tobacco products produced (Table 1).

TABLE 1.  
Production of tobacco products, USSR

Tobacco products	1913	1940	1975
Papirosy and cigarettes, billion pieces	24.5	102.5	364.3
Smoking tobacco, thousand tons	11.9	26.1	1.2
Makhorka ( <i>Nicotiana rustica</i> ), thousand tons	87.3	92.1	15.5

The USSR exported virtually no export cigarettes and papirosy, so all tobacco products were manufactured for domestic consumption. The increase in production therefore attested to the high prevalence of tobacco-smoking: prevalence among men remained high and did not drop below 60%.

Rapid growth of the tobacco industry in the Russian Federation in the 1990s was accompanied by extensive marketing of tobacco products to women and young people, which quickly led to an increase in use among these groups. Epidemiological studies at that time described the prevalence of smoking among population segments. Table 2 shows combined data from studies of prevalence of tobacco use among men and women between 1992 and 2004 (4,5). Table 3 presents data on prevalence among young people aged 11–17 years (4).

TABLE 2.  
Prevalence of tobacco use among men and women, Russian Federation, 1992–2004

Sex	1992 (%)	1998 (%)	2004 (%)
Men	62.0	63.2	62.6
Women	4.6	9.7	20.3

Source: Gerasimenko et al. (4); Maslennikova & Oganov (5).



TABLE 3.

Prevalence of tobacco use among schoolchildren aged 11–17 years, Russian Federation, 1986–1999

Source: Gerasimenko et al. (4).

Sex	1986 (%)	1992 (%)	1996 (%)	1999 (%)
Boys	20.4	21.5	21.5	27.5
Girls	5.4	12.3	12.4	13.6

The first representative studies on tobacco-use prevalence in the Russian Federation were conducted under the Global Tobacco Surveillance System: the Global Youth Tobacco Survey (GYTS) among school students aged 13–15 years in 2004; the Global Health Professionals Survey in 2006; and the Global Adult Tobacco Survey (GATS) in 2009.

The 2004 GYTS (6) showed an increase in smoking prevalence among boys of up to 30.1% (continued cigarette smoking) and to 24.4% for girls; 61.5% of boys and 48.1% of girls had smoked at least once. More than 71% of minors could buy cigarettes in stores without limitations or age restrictions, while 62.4% had one or both parents who smoked. Almost 42% of adolescents believed that smoking was harmful to their health: 65.5% of adolescent smokers wanted to quit smoking, and 78.1% had made a quit attempt in the past year.

The 2009 GATS (7) found that 60.2% of men and 21.7% of women smoked, with 16.6% (7.3 million) starting under the age of 15 years. Fifty-nine per cent (26 million) were highly dependent on nicotine, more than 32% had made quit attempts in the past 12 months, and over 60% were planning or thinking of quitting in the future. Only 31% received smoking-cessation advice from health-care providers. Among those who had attempted to quit in the past 12 months, only 11.2% had succeeded. The survey showed a high prevalence of passive smoking in bars, nightclubs and restaurants (78–90%). Prevalence of exposure to second-hand smoke was found to be 18% in public institutions, 11.1% in schools and 10.2% in health-care facilities; more than 9 million women (25.7%) and 13 million men (45.7%) were exposed to second-hand smoke in their workplaces, and 20 million women (33%) and 19 million men (36.7%) at home. The total of adults exposed to passive smoking was approximately 60 million (53.8%).

# TOBACCO-CONTROL LEGISLATION IN THE RUSSIAN FEDERATION

The FCTC (3) was developed under the auspices of WHO in response to the globalization of the tobacco epidemic. Adopted by the Fifty-sixth World Health Assembly in May 2003, it is an international treaty that entered into force on 27 February 2005, when its provisions became legally binding for its Parties.

## Russian Federation accession to the FCTC

The Russian Federation was actively involved in the development of the FCTC but did not initially become an official Party, as it was unable to meet the 29 June 2004 signature deadline. The Ministry of Health and Social Development played an important role in the country's accession to the FCTC. It established a working group of ministry officials and independent experts that prepared a draft of the federal law and other documents required for accession for approval by relevant ministries and agencies, including the ministries of foreign affairs, finance, justice, internal affairs and agriculture, and federal customs and taxation services. The most difficult hurdle was to gain approval for the draft federal law from the ministries of agriculture, which had the closest ties to the tobacco industry, and finance, which referred to uncertainty over financial obligations of the countries that were Parties to the FCTC. Through the strenuous efforts of the Ministry of Health working group, the required documentation was approved by all ministries and agencies in 2008. Federal Law No. 51-FZ on the accession of the Russian Federation to the FCTC was signed by the President of the Russian Federation on 24 April 2008, making the Russian Federation an official Party.

At the outset, the Ministry of Health plotted a course for full implementation of FCTC provisions. In accordance with Article 5 of the FCTC, the ministry established the National Coordination Council on Tobacco Control with broad powers to ensure the country met its FCTC obligations. The Coordination Council included Ministry of Health officials, representatives of ministries, government agencies, the State Duma, the Public Chamber of the Russian Federation and WHO, experts from leading medical research institutes, and representatives of public organizations and medical communities. The Deputy Minister of Health was appointed chair and the Department of Health Protection and Sanitary-Epidemiological Well-being in the Ministry of Health was assigned regulatory oversight. The main focus of the Coordination Council was developing and adopting a national tobacco-control strategy and federal law.

## National tobacco-control strategy

The first draft of a national strategy, developed in accordance with the main FCTC provisions, was submitted for approval to ministries and agencies in April 2009. As anticipated, adoption was hindered by the tobacco lobby. The GATS conducted in 2009/2010 by the Ministry of Health, WHO, Federal State Statistics Service [Rosstat] and the Pulmonary Research Institute was instrumental in securing adoption, particularly as it showed that prevalence of tobacco-smoking in the Russian Federation was highest of the 16 countries with the most smokers. The Minister of Health personally reported the results of the survey to the Prime Minister before official publication.

The national strategy on creation of a public policy to combat tobacco consumption from 2010 to 2015 was approved by the federal government under Government Order No. 1563-p of 23 September 2010. It outlined medium-term goals (for achievement by 2015) of: a 10–15% reduction in tobacco-consumption prevalence; prevention of consumption by children, adolescents and pregnant women; a 50% reduction in the proportion of citizens exposed to the effects of tobacco smoke, with achievement of full protection in education institutions, medical, sports and cultural organizations, and all enclosed spaces; an increase in public awareness about health risks associated with the consumption of tobacco; coverage of 90% of the population by anti-smoking campaigns; and a gradual increase in tax on tobacco products, establishing an equal excise rate for filter and non-filter cigarettes (including an increase in ad valorem and specific excise tax rates to bring them to the average level of WHO European Region countries).

## Federal tobacco-control law

The development of the federal tobacco-control law began immediately after adoption of the national strategy. Two options were discussed: one was to improve and finalize the existing federal law on restriction of tobacco-smoking; and the other was to develop a completely new law. Analysis showed that many amendments to the existing law aiming to align it to the FCTC and strengthen tobacco control in the country had already been submitted for approval to the State Duma. The high number of amendments became the determining factor for selecting the option of developing a new law.

The First Global Ministerial Conference on Healthy Lifestyles and Noncommunicable Disease Control, held in Moscow under WHO auspices in April 2011, had a major effect on ensuring the law would support full FCTC implementation. A meeting during the conference between Prime Minister Vladimir Putin and WHO Director-General Margaret Chan emphasized that the Russian Federation had no intention of reducing health-care spending despite the economic crisis and was ready to continue following WHO recommendations on promoting



healthy lifestyles. The Prime Minister took development of the federal law on tobacco-control under his personal control.

A draft of the new law on protecting the health of citizens from the effects of second-hand smoke and the consequences of tobacco consumption, developed by the Coordination Council, was submitted by the government to the State Duma on 30 October 2012. Discussion engaged civil society, which the strong tobacco lobby immediately tried to influence. From the beginning of development of the law, the Ministry of Health indicated that it would push for incorporating the maximum number of FCTC provisions and act to prevent weakening of the law's main provisions. The State Duma Committee on Health was appointed to review the proposed law, with the Committee on Economic Policy, Innovative Development and Entrepreneurship as co-reviewer.

A State Duma working group was established, consisting of representatives from relevant committees and commissions, ministries and agencies, independent experts from leading medical research institutions, medical communities, and public and business associations. The working group was subjected to enormous pressure from tobacco companies and other business entities: members from the Federation of Restaurateurs and Hoteliers, for example, argued that introducing a smoking ban would destroy the restaurant business and negatively affect the economy. Many media outlets ran stories on violation of smokers' rights, engaging well-known personalities and politicians who smoked. The tobacco industry opposed the draft law's ban on wholesale and retail trade of smokeless tobacco products within the territory of the Russian Federation, arguing that the development of new and less harmful tobacco products was already underway. It also strongly opposed legislative consolidation of tobacco price increases.

By passing this law, the government took it upon itself to end the tobacco epidemic, and not pass the task to tobacco consumers. The law defined the powers of federal state and executive agencies of the constituent entities of the Russian Federation and local self-government agencies in protection of population health from the effects of second-hand tobacco smoke and the consequences of tobacco consumption. It was approved at first reading in the State Duma in December 2012. State Duma deputies had 30 days to present amendments, during which 168 were forwarded. Some were aimed at strengthening the law, but most reflected the last attempt of the tobacco lobby to significantly weaken it. One hundred and sixteen were rejected, including those directed at creating loopholes for tobacco companies to continue sponsorship and promotion of tobacco products. Some called for a stricter definition of enclosed spaces in which tobacco-smoking was prohibited, some for reducing the display area of graphic warnings on packaging. Many were directed at: excluding information or statements about the health risks of exposure to second-hand

tobacco smoke; proposing that mandatory development of measures designed to prevent exposure to second-hand tobacco smoke and the effects of tobacco use take into account the opinions of tobacco users and non-users separately; and allowing tobacco-smoking indoors and on adjacent areas and premises of individual entrepreneurs and legal entities. Some of the amendments proposed that bans on smoking were not extended to areas adjacent to the organizations to which they belonged. There were also attempts to identify a target group of people who had made a conscious choice to smoke and permit them to set up specifically allocated sites for smoking in all public places.

President Putin signed the law on 23 February 2013. It came into effect on 1 June 2013, and the old law on restriction of tobacco-smoking was abolished.

Federal Law No. 15-FZ on protecting the health of citizens from the effects of second-hand smoke and the consequences of tobacco consumption became fully effective on 1 June 2014, incorporating all main provisions of the FCTC and consisting of 25 articles, among which the most important are:

- 1 organization of the implementation of measures directed at preventing the effects of second-hand tobacco smoke and reducing tobacco consumption;
2. a ban on tobacco-smoking in certain territories, premises and facilities;
3. price and tax measures directed at reducing the demand for tobacco products;
4. regulation and disclosure of the composition of tobacco products, and establishment of requirements for packaging and labelling of tobacco products;
5. educating and informing the public about harm from tobacco consumption and the harmful effects of second-hand tobacco smoke, with a ban on advertising and promotion of the sale of tobacco and tobacco sponsorship;
6. providing citizens with medical care directed at stopping tobacco consumption, treating tobacco dependence and the consequences of tobacco consumption, and preventing illegal trade in tobacco products and tobacco goods;

7. restrictions on trade in tobacco products and tobacco goods and bans on sale to, and consumption of, tobacco products for minors and involving children in tobacco consumption;
8. state control of the protection of citizens' health from the effects of second-hand tobacco smoke and the consequences of tobacco consumption; and
9. monitoring and evaluating the effectiveness of implementation of measures directed at preventing the effects of second-hand tobacco smoke and reducing tobacco consumption.

Other articles defined powers of federal state agencies, executive agencies of the constituent entities of the Russian Federation and local self-government agencies on protection of population health from the effects of second-hand tobacco smoke and the consequences of tobacco consumption, as defined in the Constitution and laws of the Russian Federation.

Amendments directed at strengthening protection of citizens have been introduced and are described in the following sections.

### Technical regulations for tobacco products

Legally binding requirements for products in the Russian Federation are established through technical regulations that include requirements for manufacturing processes, operation, storage, transportation, sale and disposal. The first technical regulations for tobacco products were adopted in 2008 (Federal Law No. 268-FZ of 22 December 2008), establishing requirements for, and rules for identification of, tobacco products, and rules and forms for assessment of tobacco products' compliance with the requirements. The technical regulations established new requirements for the content of tar, nicotine and carbon monoxide in cigarette smoke: tar may not exceed 10 mg and nicotine 1 mg per cigarette, and the content of carbon monoxide in smoke may not exceed 10 mg per cigarette.

The Council of the Eurasian Economic Commission developed and adopted (on 12 November 2014) Decision No. 107, the technical regulations of the Customs Union on tobacco products (CU TR 035/2014), which entered into force on 15 May 2016.

## Federal law on advertising

The existing law on advertising had to be amended in accordance with the article banning advertising, promotion of tobacco sales and tobacco sponsorship in Federal Law No. 15-FZ. Advertising of tobacco, tobacco products and smoking requisites, including pipes, hookahs, cigarette papers and lighters, was prohibited and advertisements could not contain a demonstration of smoking processes. Several Supreme Court and courts of arbitration decisions address the advertising ban.

## Enforcement mechanisms for Federal Law No. 15-FZ

Sanctions have been established for violation of every provision of Federal Law No. 15-FZ and the law on advertising. Federal Law No. 274-FZ of 21 October 2013 amended the Code of Administrative Offenses of the Russian Federation and introduced fines for individuals, officials and legal entities. Amendments defining administrative fines were introduced to nine Code articles. Federal Law No. 530-FZ of 31 December 2014 on amendments to certain legislative acts of the Russian Federation to strengthen efforts to address trafficking in counterfeit goods and smuggling of alcoholic beverages and tobacco products increased legal liability for the manufacture or sale of counterfeit goods. The Code was amended by the definitions of penalties for manufacture, acquisition, storage, transportation for the purpose of distribution, or sale of unmarked tobacco products subject to be labelled with special (excise) stamps, and with definitions of sanctions for similar violations on large and very large scales. Penalties for illegal movement of counterfeit tobacco products across the border of the Customs Union were established, and economic, legal, public health, medical, organizational, awareness-raising, and monitoring and oversight activities were developed and introduced to enforce federal law in the country. More details about the measures and activities are provided in the sections on specific tobacco-control measures.

Violations of federal laws and technical regulations are punishable by an administrative fine imposed by the Federal Service for Supervision of Consumer Rights Protection and Human Well-being [Rosпотrebnadzor], the Federal Service for Supervision of Health Care [Roszdravnadzor], the Main Directorate of State Fire-fighting Service [Gospozhnadzor], service agencies of the Ministry of Internal Affairs (police) or the Public Prosecutor's Office. These organizations' official websites have a whistleblowing function and violations can be reported at police stations. People can also whistleblow via the portals of their local, city and regional governments.



# TOBACCO-CONTROL MEASURES IN THE RUSSIAN FEDERATION

## Protect people from tobacco smoke

This measure aims to introduce and enforce tobacco-smoke-free zones in medical and education institutions and enclosed public places, including workplaces, restaurants and bars, and is embodied in Article 12 of Federal Law No.15-FZ. Smoking is prohibited in all public places, with the following exceptions: specially allocated places in the open air or isolated rooms equipped with ventilation systems in long-distance ships and apartment buildings (the latter with consent from all tenants); and platforms used exclusively for passengers of long-distance trains. Tobacco-smoking is prohibited in all other public places.

The head of Rospotrebnadzor clarified in April 2016 that outdoor terraces, outdoor cafes and restaurants do not constitute places where smoking is permitted. Smoking is therefore allowed only on the street, away from enterprises, institutions and organizations, bus stops and other places where people gather, and in private apartments. The law states that a mandatory sign on the prohibition of smoking shall be put up in places where smoking is banned. The ban applies to all tobacco-smoking products, including pipes and hookahs, but there is no ban on smoking non-tobacco blends out of a hookah in public places.

Penalties for violations of Federal Law No. 15-FZ provisions on prohibition of smoking in public places were defined in the Code of Administrative Offenses. Federal Law No. 274-FZ amended the Code by specifying the level of fines. Smoking in places where it is prohibited entails legal responsibility not only for smokers, but also for those obliged by law to provide adequate signage of the smoking ban (Table 4).

The Tula Office of the Ministry of Internal Affairs submitted 386 administrative reports for tobacco-smoking in places prohibited by law between 11 and 17 April 2016. Ninety-three administrative fines, totalling 1.2 million Rub, were levied in 2015 in the Orenburg region for failing to comply with requirements for signage prohibiting smoking and designating sites where smoking is prohibited.

It was essential to quickly and widely disseminate information about the ban on smoking in public places and administrative fines for violations. The Ministry of Health created a whistleblowing function on its website for citizens to report violations, raising people's awareness of reporting options. Many public organizations have taken an active stance on

**TABLE 4.**  
Level of fines for violations  
of Federal Law No. 15-FZ  
provisions

Violation	Fine for	Fine (Rub)
Prohibition of tobacco-smoking in specific areas, premises and sites	Citizens	500–1 500
Prohibition of tobacco-smoking in playgrounds	Citizens	2 000–3 000
Purchasing tobacco products for minors, gifting them cigarettes, or promoting the act of smoking among them	Citizens	1 000–2 000
Failure to comply with requirements for signage prohibiting smoking or signage placement	Officials	10 000–20 000
Failure to comply with requirements for signage prohibiting smoking or signage placement	Legal entities	30 000–60 000
Failure to observe obligations to monitor compliance with the norms of legislation	Individual businessperson	30 000–40 000
Failure to observe obligations to monitor compliance with the norms of legislation	Legal entity	60 000–90 000

this issue. The Interrepublican Confederation of Consumer Societies [Konfop], for instance, made an official complaint to the Moscow Interregional Transport Prosecutor’s Office about violations in Sheremetyevo Airport in Moscow and Koltsovo Airport in Ekaterinburg in the summer of 2014, resulting in Rospotrebnadzor and its department in Sverdlovsk region closing the smoking rooms in these airports.

A whistleblowing mobile application called “Smoke-free area” that can be downloaded for free onto any iOS- or Android-compatible mobile device was developed and released by the Ministry of Health in the spring of 2015. It provides citizens with a simple way of reporting violations, such as institutions permitting smoking in their premises. The application transmits the report directly to the appropriate supervisory public agency (Rospotrebnadzor, Roszdravnadzor or the Prosecutor’s Office) and the sender receives a response within a month.

An analysis of complaints submitted through the application shows that 31% were lodged against public dining facilities, 22% related to smoking in trains and apartment buildings, and 14% in taxis, trams, trolleys, buses and local trains. Fewer complaints were related to smoking in offices, administrative buildings, factories, education and medical facilities, government buildings, train stations and bus terminals. The application saves all complaints, so changes are easily trackable over time.

The ban on smoking in public places was of utmost importance for the Russian Federation, as the prevalence of passive smoking prior to its adoption had been very high. According

to the GYTS conducted in 2004 (6), more than 80% of adolescents aged 13–15 years had been exposed to second-hand smoke in indoor public places. The second round of the GYTS, conducted in 2015 (8), showed a significant (more than 2.5 times) reduction. About 85% of adolescents in 2004 and 90% in 2015 actively supported the ban on smoking in public places.

The GATS of 2009 (7) found that 53.8% of the adult population (about 60 million) had been exposed to passive smoking in public places. A second representative national GATS will be conducted in 2016, but epidemiological studies already show a significant reduction in prevalence of passive smoking and increased support for the ban on smoking in public places. A survey conducted by the Public Opinion Research Centre in April 2015, for example, found that 83% of respondents approved the introduction of the ban on smoking in public places, and fewer than 10% did not support anti-tobacco measures. The highest citizen approval was received for the bans on smoking on the premises of educational facilities (91%), public transport (90%), in premises and areas designated for sports activities (90%), and in cultural institutions (89%). A slightly lower approval rating was received for the ban on smoking on long-distance trains (67%) and in cafes, restaurants and bars (60%). The survey nevertheless revealed high implementation of the smoking ban in public dining facilities.

The Centre for Social Research conducted a survey of compliance with the requirements of Federal Law No. 15-FZ in public dining facilities (cafes, bars and restaurants) in 23 cities. Ten months after entry into law, compliance was high (93%). Of detected violations, smoking cigarettes or cigars in bars and nightclubs occurred more often than in cafes and restaurants (4.5% and 1% respectively). The main violation involved failure to provide a no-smoking sign at the entrance of (47.9%) and inside (61.1%) cafes, bars and restaurants.

The main argument of the Federation of Restaurateurs and Hoteliers and the tobacco industry against introducing the ban on smoking in public dining facilities was the threat of reducing sales by as much as 30% during the first three weeks of the ban's introduction. According to Rosstat, however, annual turnover of large, medium and small public dining businesses and individual entrepreneurs did not change in 2014, continuing to grow at the same pace as in previous years (Fig. 1 and 2).

### Warn about the dangers of tobacco

The purpose of the measure “warn about the dangers of tobacco” is to promote high health-risk awareness about the hazards of tobacco use among people of all ages, regardless of gender and place of residence. All groups of the population must become aware of the fact that tobacco use leads to suffering, health problems and premature death.

FIG. 1.

Turnover of public dining businesses, 2011–2014  
(million Rub, at current rates)

Source: Rosstat.

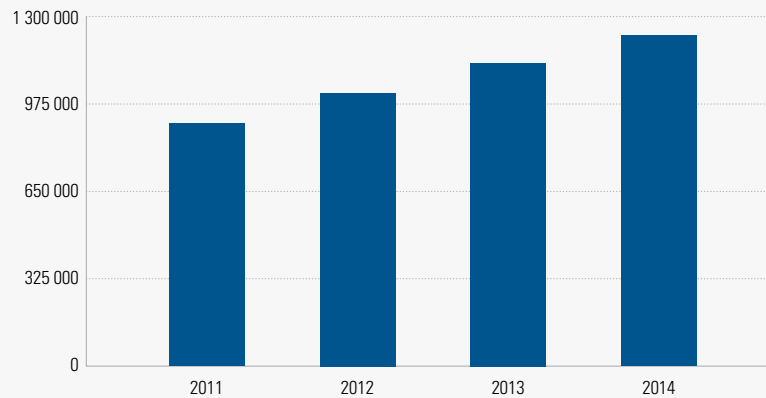
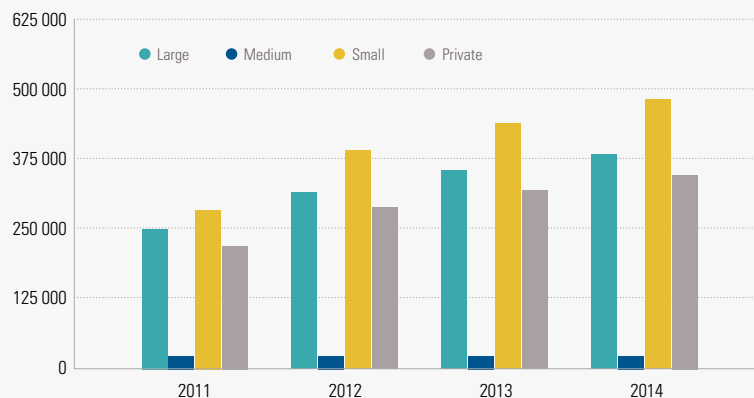


FIG. 2.

Public dining turnover by types of business entities: large, medium, small and private business (million Rub, at current rates), 2011–2014

Source: Rosstat.



The main areas of focus are preventing smoking initiation and increasing the motivation to quit smoking, supported by tobacco-cessation programmes and treatment for tobacco dependence. The objective of anti-smoking education and advertising campaigns is to change social norms on tobacco use, which is a big challenge in a society with high prevalence of smoking: a large percentage of the population uses tobacco, including many decision-makers who are responsible for implementing the anti-tobacco strategy. Changing health-care workers' attitudes towards tobacco use is another challenging task: their permissive attitude to smoking contributed to the high prevalence of tobacco-smoking in health-care settings and explains the lack of training on the hazards of tobacco use and treatment of tobacco dependence in health-care education curricula.

Article 15 of Federal Law No. 15-FZ prescribes that the population be informed about the dangers of tobacco use and the harmful effects of second-hand tobacco smoke. The Ministry of Health, the scientific and medical community and public organizations had conducted extensive work in this area prior to enactment of the law. Without this preliminary work, adoption of Article 15 would have required more time and effort.

### Educating health-care workers

The Ministry of Health and Pulmonary Research Institute have held a tobacco conference for doctors annually since 2004. One of the main objectives is to involve general practitioners

and primary-care and other physicians in providing patients with smoking-cessation support and tobacco-dependence treatment. It was essential to change the well established practice in the health-care system of addiction psychiatrists and mental health providers being exclusively responsible for treating tobacco dependence. Other objectives are to educate health-care providers about modern smoking-cessation approaches, disseminate information about the hazards of using all forms of tobacco, and raise health-care providers' awareness of being role models for patients and civil society.

The conference is timed to coincide with World No Tobacco Day and includes compulsory discussion of current tobacco-control questions identified by WHO. It therefore plays an important role in informing health-care professionals about the dangers of tobacco and raising their awareness. The first conference was attended by no more than 200 delegates, but the number of participants has grown each year and now totals 2000.

Scientific medical societies contribute significantly to the education of health-care professionals. Between 2006 and 2009, the Society of Pulmonologists produced a scientific journal for health-care professionals, *Russian Doctors Against Tobacco*, which aimed to motivate health-care workers to provide tobacco-cessation support to patients, educate about the dangers of tobacco and provide information about important tobacco-control events and global achievements. The Society of Gastroenterologists, Society of Cardiology, Society of Clinical Oncology and Respiratory Society have incorporated scientific symposia and training seminars in their annual congresses. Publication of scientific papers in society journals has raised the awareness of health-care professionals in various specialties about the hazards of tobacco use and informed them about approaches to providing smoking-cessation support for patients with a range of diseases. Media outlets interviewing physicians about the public health risks of smoking also represents an important advance.

"Health or tobacco?", the Russian Federation national forum organized by the Health Protection Committee of the State Duma with support from the Ministry of Health and WHO, was launched in 2007. It focuses on political, legal and scientific aspects of smoking in the country and takes its place in the global movement to promote healthy living. The forum convenes every two years on the eve of World No Tobacco Day; the latest, which took place in May 2015, discussed one of the major challenges of tobacco control in the Russian Federation – an increase in tobacco excise taxes – under the slogan: "Raise tobacco excise tax to save lives". It brings together representatives of various ministries and agencies entrusted with implementation of the provisions of Federal Law No. 15-FZ, promoting broad discussion of achievements and challenges in implementation and developing strategies to overcome them.

### **Raising public awareness**

The first advocacy campaign raising public awareness about health hazards associated with tobacco use was launched by the Pulmonary Research Institute in 2004 under the title: “If you smoke, check your lungs”. The aim was to inform the population about the dangers of tobacco use and promote early detection of bronchopulmonary disease. Smokers, including deputies and employees of the State Duma, were invited to have a pulmonary function test to check the carbon monoxide in their exhaled air. Results from the first 2000 tests showed that lung disease was twice as common in smokers as they had realized. Recommendations have been made to expand and broaden the scope of the campaign to other cities, as it has proved a positive motivational and informational tool for smokers and health-care professionals.

A significant turning point in raising public awareness came in 2009, with the adoption of a government resolution on implementing measures to promote healthy living that includes aspirations to reduce alcohol and tobacco consumption. A health campaign was launched to support the resolution, focusing on developing information materials for tobacco users, broadcasting TV and radio programmes on healthy lifestyles, designing and maintaining a healthy-lifestyle portal, and establishing a healthy-living national hotline. Three target groups were selected for information materials – smokers, young people and pregnant women – with brochures, leaflets and posters covering the following themes:

- Smoking during pregnancy: give the child a chance
- Smoking cessation without help
- What do we know about tobacco?
- Tobacco companies are luring young people
- Pregnancy and smoking are incompatible
- Tobacco destroys a child’s body
- Nicotine addiction is a disease.

The materials were made available on the Ministry of Health website and could be downloaded and printed in any region of the country.

The Health Russia Internet portal (9) was launched in 2009 to provide information on key risk factors, including tobacco. Over 450 articles on tobacco cessation and harmful effects of tobacco use have been posted and an average of 30 000 people visit the site each day. A special project on the portal called “May 31: day of quitting smoking – forever!” brought together more than 67 000 people who wanted to (or had already) quit smoking and were willing to share their experiences.

A national toll-free hotline was established in 2009, providing round-the-clock advice about healthy living. It received 40 000 calls in 2015, more than 62% of which were about the risks of tobacco use and prevention of tobacco dependence. Callers are transferred to counsellors at the Advisory Call Centre for Tobacco Cessation, established in 2011 at the St Petersburg Research Institute of Phthisiopulmonology of the Ministry of Health. The call centre provides the following services: reactive counselling (offering answers to questions and following-up for one month); proactive counselling (consultations on quit day and days 3, 7 and 14 after quitting); and proactive follow-up on day 30 and after three and six months following quitting. In 2015, 12 287 incoming calls (including 1611 emergency calls from individuals receiving monthly proactive smoking-cessation counselling) and 84 319 outgoing calls were made.

Federal Law No. 15-FZ has a provision establishing regional tobacco-cessation hotlines. Several regions, including the Republic of Tatarstan, Krasnoyarsk krai and Ryazan oblast, have followed the law and established their own hotlines.

Large-scale anti-smoking advertising and regular campaigns run by the Ministry of Health and constituent entities of the Russian Federation, such as “May 31: day of quitting smoking – forever!”, “SmokeFree” and “Arbat – smoke-free zone”, play an important role in informing the public about the hazards of tobacco. Advertising and information materials are distributed through all major mass-media outlets – TV, radio and the Internet – and via outdoor advertising. Anti-tobacco adverts in the Russian language, developed in partnership by the Ministry of Health, International Union Against Tuberculosis and Respiratory Diseases and the World Lung Foundation, are broadcast regularly on main TV channels and can be run by regional channels.

Experience has shown that one of the best ways to reduce smoking prevalence is using comprehensive community-wide programmes that employ multiple strategies to promote, support and develop non-smoking behaviours as a social norm. Epidemiological studies and evidence from the Cochrane Library show that to be effective, community-based programmes should be long-term, target a specific risk factor and be repeated regularly for at least five years (10). Short-term grants often provide one-time community-wide programmes, which unfortunately make little effective impact on smoking behaviour. Short-term campaigns should not be abandoned, but long-term campaigns over several years, supported by regional authorities and involving public organizations, should be the preferred strategy.

The “Healthy cities without tobacco” project developed by the Association of Healthy Cities, Districts and Settlements of the Russian Federation, which is party to the WHO Healthy





Cities project, provides an example of a long-term anti-smoking campaign. Established in 1996, the Association brings together more than 100 cities, with most taking an active part.

The regional medical social interagency campaign, “A summer without tobacco smoke”, held in Ryazan oblast since 2010, is a successful long-term campaign against tobacco. It will be run for the seventh time in 2016, with the number of registered participants growing each year. As the title suggests, participants are invited to spend their entire summer without tobacco smoke. Sports competitions are held, and prevention experts give advice on healthy lifestyles, the impact of smoking on health and strategies for quitting tobacco. All participants have vital lung capacity and exhaled carbon monoxide measurements, with 30% consistently demonstrating improvements in health indicators and lung volumes in the annual examination.

Public organizations, education institutions and medical research institutes greatly contribute to public education about the hazards of tobacco use. They organize local and regional annual conferences in almost every region, publish articles, create Internet sites and hold events in support of World No Tobacco Day. Unfortunately, the content for these campaigns is often downloaded by organizers from the Internet, where pro-tobacco content placed by the tobacco industry may be embedded. Tobacco companies have developed Internet-based promotional materials for many events and initiatives, such as a “Smoke-free class” competition, the school programme “My choice” and social programme “Responsible parents”, which masquerade as tobacco-control campaigns but aim to renormalize tobacco use in society.

Federal Law No. 15-FZ acts to prevent the spread of these campaigns by ensuring that all public-agency produced information materials about the dangers of tobacco use and harmful effects of second-hand smoke in the territories of the Russian Federation are subject to approval by the Ministry of Health. The most objective information about the dangers of tobacco use is provided by scientific research institutes through their media outlets (scientific journals and Internet sites). Among them is the research and information Internet project “We do not smoke here”, sponsored by the Moscow Scientific and Practical Centre of Addiction.

### **Tobacco health warnings**

The greatest information resource for smokers to learn about the health hazards of tobacco consumption is health warnings on tobacco packages. The first health warnings appeared on cigarette packs in accordance with Federal Law No. 87-FZ on restriction of tobacco-smoking in 2001. The main health warning on the risks of tobacco-smoking had to cover no less

than 4% of the principal display areas of any package of tobacco products. The technical regulations for tobacco products introduced new requirements for health warnings in 2008: the area occupied by the main health warning “Smoking kills” had to cover at least 30% of one of the principal display areas of the consumer packaging and an additional health warning of at least 50% of the other principal display area. Twelve options for additional health warnings were developed.

New mandatory requirements were established for tar, nicotine and carbon monoxide content in cigarette smoke, but use of terms like “low tar”, “light” and/or “ultra-light” was permitted. Order No. 490N of the Ministry of Health of 5 May 2012 on approval of warning labels on the dangers of smoking (accompanied by illustrations) mandated the use of graphic health warnings illustrating the consequences of smoking. These were to occupy 50% of the area and replaced text health warnings on the back of the pack. Twelve new graphic health warnings were designed. In accordance with Customs Union technical regulations on tobacco products, which entered into force on 15 May 2016, new rules on placement of health warnings were introduced. The most important provision is the exclusion of any terms, descriptors, trademarks and figurative or other signs that directly or indirectly create the false impression that a tobacco product is less harmful than others. Examples of these include expressions such as “low tar”, “light”, “ultra-light”, “mild”, “extra” and “ultra”. Displaying figures for emission yields (such as tar, nicotine and carbon monoxide) on the consumer packaging, and providing information suggesting that consumption of a particular tobacco product reduces the risk of disease, is less harmful to health than other products, or the risk associated with consumption is reduced due to absence or low levels of harmful substances emitted, are prohibited.

Each package must contain a health warning about the dangers of tobacco use. The warning should be placed in the upper part of the front and back sides of the principle display areas of the consumer packaging and cover at least 50% of those areas. The 12 health warning designs and specifications for their placement on packaging were approved on 17 March 2016 at a meeting of the Council of the Eurasian Economic Commission in Moscow. The lateral surface of the packaging should contain the following inscription: “Contains systemic poisons, and carcinogenic and mutagenic substances”. It should cover at least 17% of the lateral surface.

### **The effectiveness of public-information campaigns**

The second GYTS, completed in the Russian Federation in 2015 (8), showed a significant increase in young people’s awareness of the hazards of tobacco use. The number of young people who were aware of the dangers of tobacco use, were interested in this information and believed it, increased more than two-fold compared to the first GYTS in 2004.



The importance of public-information and anti-smoking media campaigns is confirmed by the increase in the number of calls to the national toll-free hotline. In August 2012, the Advisory Call Centre for Tobacco Cessation in St Petersburg received 3626 calls from residents; after the city held an anti-tobacco campaign in September 2012, calls increased to 19 515. The same trend was observed in 2014: in July, 5316 calls were received; after the campaign in August, the number was 10 588. Placement of outdoor anti-smoking billboards immediately increased the number of calls received by the hotline by nine times.

### **Enforce bans on tobacco advertising, promotion and sponsorship**

Federal Law No. 15-FZ Article 16 introduced a ban on advertising, promotion and sponsorship of tobacco products. The ban on advertising of tobacco, tobacco products and smoking accessories was introduced in accordance with the federal law on advertising, a key component of tobacco control as it has led to a ban on marketing of tobacco products. Inevitably, the adoption of this measure received strong opposition from the tobacco industry, meaning it was not possible to adopt a total advertising ban. The key loophole is the partial ban on demonstration of tobacco products and the process of consumption in audiovisual materials created and intended for adults (including TV and video, and theatre and entertainment performances). Demonstrations are permitted in cases where the activity is an integral part of the artistic design. Otherwise, the ban on advertising, promotion and sponsorship of tobacco products is comprehensive.

The most significant decision for the Russian Federation was the inclusion into the ban of tobacco, tobacco products and smoking accessories, including pipes, hookahs, cigarette paper and lighters. Violations of the ban by advertisers, advertising producers or distributors are punishable by administrative fines imposed by the Federal Antimonopoly Service of 3000–4000 Rub for citizens, 10 000–25 000 Rub for officials and 150 000–600 000 Rub for legal entities.

A total ban on the demonstration of tobacco products and the process of tobacco consumption has been introduced for audiovisual materials created and intended for children. The administrative fine for violation is set at 20 000–50 000 Rub for officials and 100 000–200 000 Rub for legal entities. Where adult audiovisual material demonstrates tobacco products or the consumption process, the broadcaster or organizer must provide public service announcements about the dangers of tobacco use immediately before or during the programme. Violations are punishable by fines imposed by the Federal Service for Supervision of Telecom, Information Technologies and Mass Communications (Roskomnadzor) or the Federal Antimonopoly Service of 10 000–20 000 Rub for officials and 100 000–200 000 Rub for legal entities.

The ban on advertising of tobacco products is supported by the population: overall, 80% approve a comprehensive ban, although the proportion reduces among smokers (69% versus 86% of non-smokers). Only 3% of the population does not support the ban. Despite the partial ban on demonstration of tobacco products and process of consumption in audiovisual programmes, the 2015 GYTS showed the number of adolescents who had seen a demonstration of the process on TV, in videos or other audiovisual formats had decreased by 10% since 2004.

To reduce demand for tobacco and tobacco products, free distribution among the public and price discounts are prohibited. Open display and advertising of tobacco products at points of sale have been banned since 1 June 2014. Cigarettes must be stored in covered tobacco units. All stores should display a tobacco products price list that is regulated by law: it must list tobacco products in alphabetical order and include their brand names and prices.

The Ministry of Health, in collaboration with civil society organizations, monitored compliance with the ban on open tobacco display and advertising at points of sale in two stages, the first prior to entry into force of the main provisions of the law in April and May 2014, the second after the bans were enacted in August and September 2014. More than 780 points of sale were monitored, among them chain supermarkets and convenience stores in Moscow, St Petersburg, Ekaterinburg, Kazan and Novosibirsk. The results showed that prior to the enactment of the ban, cigarettes were on display in about 97% of the monitored retail outlets. After enactment, 78% of sales outlets complied with the ban. Levels of compliance were approximately the same across cities, areas of different socioeconomic status and types of sales outlets. Monitoring of store compliance with the ban on advertising of tobacco products was also carried out, showing that levels of compliance had increased due to the ban on open display of tobacco products.

Sale or distribution of non-tobacco products under tobacco brands was observed in 3% of points of sale before 1 June 2014, but in none after enactment of the ban. Signs with price discounts for cigarettes were seen in 1.4% of points of sale before the ban, and none after. Brand representatives were seen handing out free gifts or gifts with purchase before the ban in 4% of the points of sale, and none after. Free-of-charge distribution of cigarettes before 1 June was observed in 3.2% points of sale, and after the ban in only 0.3%. A public opinion poll on tobacco-control measures conducted by the Public Opinion Research Centre in April 2015 showed that 67% of the population supported the ban on open display of tobacco products, with 20% undecided and only 5% not fully supportive.

Article 16 of Federal Law No. 15-FZ prohibits the organization and conduct of events for which a condition of participation is purchase of tobacco products. Organizing and conducting cultural, sports and other public events that result in direct or indirect inducement to purchase or consume tobacco products is also prohibited, as is tobacco sponsorship.

Article 19 of Federal Law No. 15-FZ introduces significant restrictions on trade in tobacco products and goods. It is forbidden to trade in tobacco products at fairs, exhibitions and kiosks, by retail delivery and distance trading and through machines or other means of trade. The number of places in which retail trade of tobacco products is permitted is strictly limited. It is prohibited on territories, premises and areas intended for providing educational, sports and medical services or occupied by state agencies, in hotels, and on the grounds and in the premises of train and bus stations and air, sea and river ports. Wholesale and retail sale of naswar and snus is now prohibited within the Russian Federation, as is the sale of tobacco products to and by minors.

Continuous monitoring of enforcement of Article 16 of Federal Law No. 15-FZ in the regions is carried out as part of federal state surveillance of consumer rights protection. In 2015, for example, 211 tobacco retail trade sites in Orenburg oblast were inspected, with 114 found to be violating legal requirements. Administrative fines were imposed on 75 people, of whom six had been selling tobacco products to minors.

### Offer help to quit tobacco use

Measures for stopping tobacco use are very important, as they help tobacco users quit to protect their health and prolong their life. Effective treatment of tobacco dependence can significantly improve public health and is more cost-effective than most interventions in the health system. Even though measures are aimed at individuals, they contribute to a more rapid decrease in prevalence of tobacco use and positively affect the implementation of other tobacco-control measures.

Historically, treatment of tobacco dependence in the Russian Federation fell exclusively within the purview of addiction psychiatrists. At the end of the 1990s, specialists (pulmonologists) at the Pulmonary Research Institute set out to tackle this problem. Clinical practice guidelines on comprehensive tobacco-dependence treatment and prevention of chronic obstructive pulmonary disease caused by smoking tobacco were developed in 2003 (11), introducing tobacco-dependence treatment to the daily clinical work of internal medicine physicians.

Tobacco-dependence treatment was included in clinical protocols for treatment of chronic bronchitis and chronic obstructive pulmonary disease, with the Ministry of Health organizing two-day training courses for regional doctors (delivered by the Pulmonary Research Institute) on use of the protocols between 2004 and 2009. This changed the attitude of health-care professionals and contributed to their engagement in tobacco-dependence treatment.

In 2010, the Ministry of Health adopted a 72-hour further-education programme for doctors (developed by the Pulmonary Research Institute and Medical Academy for Postgraduate Education) on medical assistance for smoking cessation and treatment for smokers, and approved guidelines for doctors on smoking-cessation assistance in clinical practice (12). Training for general practitioners on the approved guidelines also began in 2010, with doctors receiving certificates of state education from the Department of Pulmonology of the Institute of Advanced Training at the Federal Medical–Biological Agency. A distance-learning course was launched in 2016.

The Ministry of Health issued an order in 2009 for wellness centres to provide tobacco-cessation support. There are 754 wellness centres in the Russian Federation, including 501 for adults, 219 for children, 23 mixed and 63 mobile centres. Their main objectives are preventing noncommunicable diseases, identifying health risk factors (including tobacco) and promoting healthy lifestyles. All citizens can visit their nearest centre for examination and, if necessary, advice on tobacco cessation and recommendations on how to address other risk factors (such as reduced physical activity and unhealthy diet).

Wellness centres provide mainly psychological support for tobacco cessation, with tobacco-dependence treatment being delivered by doctors in clinics. Tobacco-dependence treatment consists of behavioural and pharmacological approaches. All types of nicotine-containing products and varenicline are registered in the Russian Federation. Nicotine-containing medications can be accessed over the counter, while varenicline requires a prescription. In accordance with Article 17 of Federal Law No. 15-FZ, medical care directed at stopping tobacco consumption is provided in medical institutions for all smokers free of charge. The treating physician is obliged to provide patients with tobacco-cessation advice and information on medical care regardless of the reason for the visit. The provision of medical care is overseen by the Ministry of Health and regional and local health authorities. Regional centres for medical prevention have been highly successful in encouraging smokers to quit and providing cessation motivation and support (13): organized at regional, krai, oblast, district and city levels, they form a wide network across the country and are independent specialized institutions whose main function is to prevent disease.





The Ministry of Health adopted a protocol for the organization and implementation of preventive actions for noncommunicable diseases and activities to promote healthy lifestyles in health-care organizations in 2015. The protocol decrees that tobacco-control interventions focused on prevention should be provided at all levels of the health-care system. The work is headed by the National Research Centre for Preventive Medicine, which develops guidelines for organizing preventive work, provides training for doctors, and holds scientific and practical conferences and organizational meetings. It also has a wellness centre.

A smoking-cessation support programme, using the most modern communications media, was developed in 2015 to increase smokers' motivation to quit and support them in tobacco cessation, particularly those trying to quit on their own. "QuitTogether!", a mobile service program (mCessation), was launched in June 2015 to provide information and psychological support to smokers ready to quit through mobile channels such as free text messages. "QuitTogether!" is a unique mobile application developed by leading specialists at the Health and Development Foundation, with support from the Ministry of Health, Pulmonary Research Institute specialists, leading psychologists and sociologists, and experts in the field of IT. Any smoker can subscribe to the service either from their mobile phone (by sending the message "I do not smoke" to number 5253) or online. The service is exclusively social in nature, does not pursue commercial benefit and does not endorse or promote any products or services. All services on the site are available free of charge to Russian Federation residents.

The site registered about 5000 users during its first six months. To assess the effectiveness of the service, 353 site users answered a questionnaire. The typical profile of a smoker who used the site was about the same as a traditional smoker who smoked 15 to 20 cigarettes a day (85% of respondents). Duration of smoking varied between five and 30 years, with up to 10 attempts to quit (85–90%). Eighty-four per cent reported that they had not smoked for over a month after using the service, and 16% up to a month. Eighty per cent found the most interesting and useful information on the site was tips on overcoming trigger situations, such as stress and conflict situations, interacting with and being around people who were smoking, and having a coffee or alcoholic drink. Site information for pregnant women had increased the number who had quit smoking during pregnancy by almost three-fold compared to the control group, who were not subscribers to the site.

Medical assistance for tobacco cessation is currently provided in special smoking-cessation clinics established in accordance with Ministry of Health Order No. 543n approving regulations on organizing primary medical and sanitary assistance for adults.

Clinics in the regions are established under the order of government agencies of constituent entities of the Russian Federation in the area of public health protection. They have standard

equipment, including a spirometer and carbon monoxide monitor, and are staffed by general practitioners who have taken additional training in supporting cessation. Smoking-cessation clinics are being established in all regions, including Ryazan oblast, the population of which is slightly above 1 130 000. Since 2013, Ryazan oblast has established 17 smoking-cessation clinics at outpatient departments and hospitals of cities and towns in the region. The clinics are predominantly staffed by general practitioners who have completed additional training in smoking cessation and medical treatment for smokers at the Pulmonary Research Institute and are equipped with pulmonary function test devices (spirometers) and breath carbon monoxide monitors; they also have access to the medical equipment available at the facility. Between 2014 and 2015, 12 937 smokers turned to the smoking-cessation clinics for advice and assistance, with around 30% quitting.

### Raise taxes on tobacco

Increasing the retail price of tobacco and tobacco products through higher taxes is the single most effective way of reducing smoking. Higher cigarette prices lead to a reduction in the number of smokers and force those who continue to use tobacco to reduce their daily consumption. Most important, this measure also serves to prevent smoking initiation in adolescents and young people.

Article 13 of Federal Law No. 15-FZ introduced measures to increase excise taxes on tobacco products. Excise taxes are established in accordance with national legislation on taxes and duties. Measures to influence the level of prices for tobacco products establish minimum retail prices for products or set prices below which tobacco products cannot be sold to consumers by retail trade enterprises, public dining and service establishments, and individual entrepreneurs. Minimum retail prices are established at 75% of the maximum retail price, defined by the procedure established in the Tax Code of the Russian Federation.

The excise tax policy for tobacco products is defined in the action plan for implementation of the concept of creating public policy on combating tobacco consumption between 2010 and 2015 and Federal Law No. 15-FZ, and is also set out in the main provisions of the tax policy of the Russian Federation for 2015–2017, approved by the government on 1 July 2014.

The minimum rate of excise tax on filter cigarettes was increased more than six times between 2007 and 2013, the specific excise tax 5.5 times, and the ad valorem tax by three percentage points. Rates for filter and non-filter cigarettes have been standardized since the beginning of 2012. Excise duty rates for tobacco and tobacco products will be indexed to inflation in 2015–2017, based on the current economic environment (the proposed index for rates of excise duties on cigarettes in 2017 is 10%). A gradual increase in the ad valorem

component of the combined excise tax levied on cigarettes and papirosy is proposed for between 2015 and 2017, from 9% of the cost of cigarettes (calculated on the basis of the maximum retail selling price) up to 10% of the maximum retail selling price. This increases the excise burden on expensive tobacco products to a greater extent than for cheaper ones. At the same time, work on reaching an agreement with the Member States of the Customs Union regarding the harmonization of excise duty rates levied on tobacco products continues. Annex 1 shows the rate of excise duty levied on tobacco and tobacco products, but rates may be different in 2016/2017, based on the results of additional analysis.

President Putin signed Federal Law No. 115-FZ, designed to further protect the health of citizens from the consequences of tobacco consumption, on 26 April 2016. This law prohibits the retail trade of more than 20 cigarettes in a single consumer package. It became necessary because five large international tobacco companies active in the Russian Federation sell consumer packages containing 25–30 cigarettes. Large packages seem more attractive to consumers, as they offer a cost-saving opportunity. The price per cigarette in large packs is 5–10% lower than in packs of 20, which violates the ban on price discounts. Selling tobacco products in large packs may also lead to reduced excise revenue for the federal budget; the excise tax levied on 1000 cigarettes in large packs is 5% lower than that on 1000 in a standard pack.

In line with the Eurasian Economic Union common customs tariff, combined rates of import customs duties, which are differentiated by product code in the Foreign Economic Activity Commodity Nomenclature for cigarettes, currently are relatively high. The rate for cigarettes containing tobacco, for instance, is 16.7% of the customs value but not less than €2.33 per 1000 cigarettes; for those manufactured from tobacco substitutes, the rate is 25% of the customs value but not less than €2.5 per 1000.

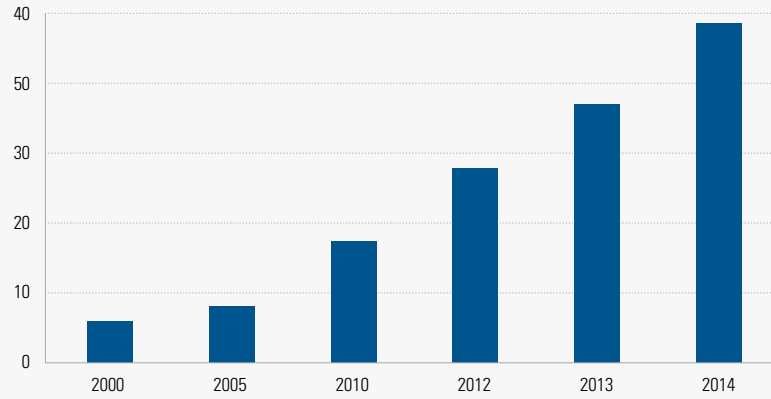
Tax rates continue to stay below the average level of European Region countries, but generally, the adopted fiscal policy supports substantial annual growth in tobacco prices. Fig. 3 shows annual cigarette price increases, which have become more significant since 2010 (after adoption of the national strategy).

Tobacco price increases surpassed food price increases for the first time in 2010 and consistently thereafter (Fig. 4).

Despite the decline in cigarette production in the Russian Federation between 2010 and 2015, increases in tobacco products have increased revenues for the federal budget (from 107.7 billion Rub in 2010 to 386 billion Rub in 2015) in excise tax on cigarettes (Fig. 5).

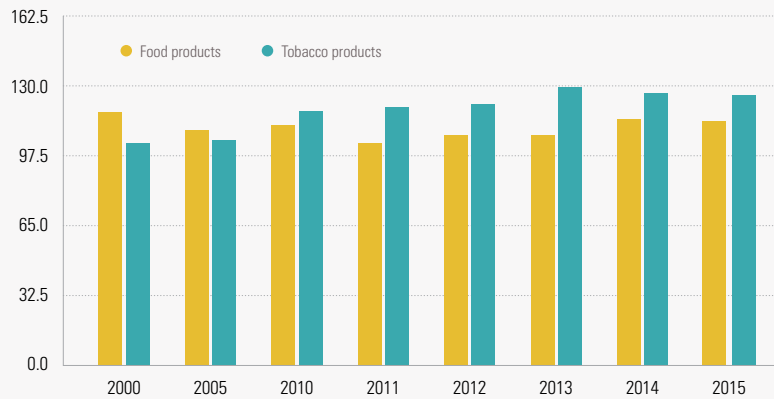
**FIG. 3.**  
Average consumer price for a pack of domestically produced filtered cigarettes (end of the year, Rub)

Source: Rosstat.



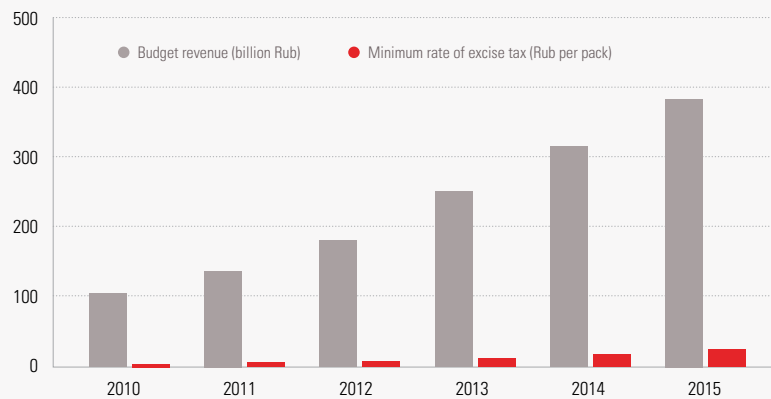
**FIG. 4.**  
Consumer price index for food products and tobacco products (December to December of the previous year, in percentage points)

Source: Rosstat.



**FIG. 5.**  
Federal budget revenues from excise taxes on cigarettes, Russian Federation

Source: Rosstat.



## Regional legislative opportunities

The Russian Federation consists of 85 regions (constituent entities), each with its own legislation (which must not contradict the Constitution of the Russian Federation and federal laws). Federal Law No. 15-FZ includes articles defining the powers of federal, constituent entity and local government agencies for protecting citizens from exposure to second-hand tobacco smoke and the consequences of tobacco consumption. It sets the requirement for

a uniform national policy in this area and allows (under Article 6) for additional measures to protect citizens' health from tobacco to be adopted. This very important feature enables regional governments to strengthen their anti-tobacco measures, including additional restrictive measures, without having to wait for approval from federal agencies.

The Republic of Tatarstan was the first constituent entity to take advantage of its right to introduce additional anti-tobacco measures in accordance with Article 6. Cabinet ministers introduced a ban on wholesale and retail trade in smokeless tobacco, including snus and snuff, within the territory of the Republic of Tatarstan through Resolution No. 905 of 24 November 2014. Fines for violation, effective from 1 January 2015, are set at 1000–2000 Rub for individuals, 3000–4000 Rub for officials and 20 000–30 000 Rub for legal entities. Deputies of the State Council of the Republic of Tatarstan introduced to the State Duma a legislative initiative to ban snus in the Russian Federation, which was passed as Federal Law No. 456-FZ (amending Article 19 of Federal Law No. 15-FZ) banning the wholesale and retail trade of snus within the territory of the Russian Federation on 30 December 2015. This law amended the Code of Administrative Offenses of the Russian Federation and set fines for individuals, officials and legal entities for violations.

Examples of regulatory legal acts of the Russian Federation introducing measures to strengthen the ban on tobacco-smoking in public places are provided in Annex 2.

## Monitor tobacco use

Monitoring of tobacco use in the Russian Federation is divided into two main areas:

- collecting representative periodic data about smoking prevalence and key indicators of tobacco use among young people and adults; and
- monitoring and evaluating implementation measures preventing exposure to second-hand tobacco smoke and reducing tobacco consumption.

They are interrelated, but also have their own characteristic and unique aspects for data-collection, processing and evaluation. The first generally involves representative surveys of young people and adults, and the second the collection of information from agencies responsible for implementation and monitoring of measures.

Given that the Russian Federation has more than 80 geographically distant regions with their own demographic, cultural, social and economic characteristics and which are empowered to introduce additional tobacco-control measures, it is essential that tobacco-use prevalence and effectiveness of implementation of measures are studied at national and

regional levels. Article 22 of Federal Law No. 15-FZ states that monitoring and evaluation of the effectiveness of implementation of measures must be performed at federal level by the Ministry of Health, Rosпотребнадзор and Rosstat. Constituent entities participate in monitoring and evaluation, in accordance with their legislation. It is therefore important that all constituent entities use standardized and evidence-based methods of data-collection and analysis in monitoring and evaluation (the Ministry of Health is developing a methodology). Objectives will include collecting data, determining the effect of measures for preventing exposure to second-hand tobacco smoke and reducing tobacco consumption at different stages of introduction and implementation, defining the causes of violations of restrictions and bans introduced by the law, and preparing proposals to improve planning, organization and implementation of interventions.

Rosпотребнадзор monitors the observance of citizens' rights in measures taken to protect citizens from exposure to tobacco smoke and the consequences of tobacco consumption. Rosпотребнадзор monitoring and oversight activities to the end of 2015 had resulted in 17 211 people being administratively charged for violating citizens' rights (compared to 13 675 offenders in 2014), including 1784 legal entities (1010 in 2014). Administrative fines for these offenses totalled 142.7 million Rub, which is 63% more than in 2014 (89.1 million Rub). Federal Law No. 15-FZ entered into full force on 1 June 2014, which may partly explain the increase in the number of fines in 2015, but the quality of monitoring and enforcement unquestionably has grown.

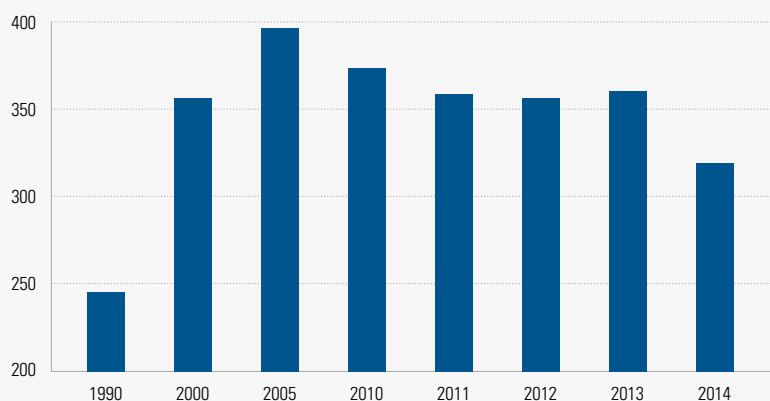
Rosздравнадзор carried out 687 inspections of medical institutions in 2014: violations of the law were discovered in 25%, with 186 administrative offense reports filed. In 2015, Rosздравнадзор carried out 1689 inspections; violations were found in 247 cases and 142 administrative offense reports were filed. Most offenses involved violating the ban on tobacco-smoking and failing to comply with requirements for signage prohibiting smoking.

Amendments to the Criminal Code of the Russian Federation were enacted in January 2015, establishing liability for smuggling alcohol and tobacco products. Detection and interdiction were placed under the jurisdiction of customs authorities, who initiated five criminal cases in 2015 under Article 194 of the Criminal Code (evasion of customs payments for illegal movement of tobacco products across the Eurasian Economic Union customs border).

Prevalence of tobacco consumption in the Russian Federation can indirectly be estimated based on sales of the most commonly used tobacco products – cigarettes and papirosy – which is monitored monthly and annually by Rosstat. Rosstat data suggest that sales have been decreasing since 2005 (Fig. 6). The greatest decrease was in 2014, probably as a result of enactment of Federal Law No. 15-FZ.

**FIG. 6.**  
Sales of cigarettes and papirosy, Russian Federation (total, billion pieces)

Source: Rosstat.



Monitoring of prevalence of tobacco use at national level is carried out within the framework of the Global Tobacco Surveillance System (which includes GYTS and GATS), in which the Russian Federation has participated since it was developed.

The two GYTS rounds in 2004 and 2015 revealed that young people exhibited similar trends in tobacco consumption across all five regions studied, despite differences in economic development and geographic location. Overall, the data indicate positive trends in the implementation of tobacco-control measures and tangible progress in tobacco use by teenagers of 13–15 years, demonstrated by a sharp decline in many indicators. The data also contributed to identifying new challenges that require tobacco-control policy to be updated.

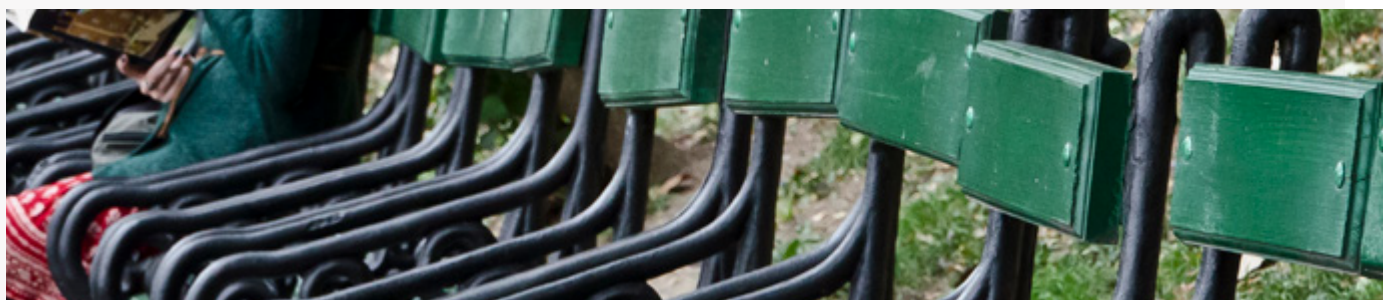
The most positive progress was seen in the following indicators: tobacco use decreased by 2–3 times (up to 15%); the number of potential smokers (non-smoking adolescents who believe they might take up smoking in the future) decreased by four times (up to 10%); and adolescents' exposure to second-hand smoke at home and in public places decreased 2–3 times (up to 35%). These trends can be regarded as an indicator of reduction in prevalence of active and passive smoking among young people in the Russian Federation.

A two-fold decrease in adolescents purchasing products in tobacco shops was seen, reflecting the positive effect of measures undertaken to reduce the availability of tobacco products to people under 18 years. Considerable potential for further strengthening of these measures over the entire territory of the Russian Federation remains.

Adolescents noted a significant reduction in the effectiveness of tobacco advertising in retail outlets and a decrease in the demonstration of tobacco use in TV and other productions (by 10%). Promotion of free tobacco products by tobacco company representatives in retail outlets decreased, but about 5% of adolescents indicated that this sales-stimulation strategy persists. These trends suggest that adolescents are still being subjected to tobacco company campaigns, although measures to reduce advertising and promotion of tobacco products have started to yield positive results.

Among the new trends in the five studied regions was the high percentage of adolescents using electronic cigarettes, which was comparable to the percentage who were cigarette smokers (ranging from 5% to 14%). This indicates a rapid spread of new nicotine and tobacco delivery systems in the Russian Federation. Although tobacco-control information is available extensively, information on electronic cigarettes is significantly lacking.

The results of the two rounds of GYTS show that the main targets for implementation of tobacco-control measures adopted in the concept of creation of a public policy on combating tobacco consumption between 2010 and 2015 were achieved: reduction in tobacco consumption by 10–15% (below 17%); reduction of exposure to second-hand smoke to less than 40%; and increases in awareness of the health hazards of tobacco use to over 90%.





The FCTC, developed under the auspices of WHO, is an essential response to the globalization of the tobacco epidemic. Tobacco is a risk factor for six of the eight leading causes of death; the root cause of the tobacco epidemic is nicotine addiction, which develops because of consumption of any form of tobacco or use of any nicotine delivery system.

Consequently, countering the tobacco epidemic is only possible through implementing comprehensive strategies that affect various components of tobacco-use behaviour: awareness of the hazards of tobacco use; social norms and rules of behaviour; nicotine addiction treatment; and availability of tobacco products.

The problem is exacerbated by these strategies having to be implemented against the backdrop of active interference from the tobacco industry, which strives to involve every population group in tobacco use and skilfully manipulates advertising and marketing campaigns to rapidly transition smoking from being a habit to becoming an addiction. The FCTC fully integrates strategies that lead to reductions in tobacco use, but they can only be effective if applied comprehensively. Achievement of tobacco-control goals requires coordination, a whole-of-government approach, engagement of academic institutions, professional associations and civil society organizations at country level, and coordinated support from international cooperation and development agencies.

Immediately after the adoption of the FCTC, the Russian Federation began laying the groundwork to adopt a comprehensive federal tobacco-control law. The FCTC contains a mechanism for successful execution of this objective. The Russian Federation followed it unfailingly, successfully passing all stages from accession to the FCTC to adoption of a national strategy, then passing the main Federal Law No. 15-FZ and other laws to implement FCTC provisions.

At the time of adopting the FCTC, prevalence of tobacco consumption in the Russian Federation was extremely high: almost half of the adult population smoked. The need to introduce a set of tobacco-control measures that would focus on addressing a variety of problems, facilitate implementation of other measures and reinforce their impact, was therefore pressing.



Federal Law No. 15-FZ has been in force for only three years, but positive trends are being seen. Prevalence of exposure to second-hand smoke has decreased significantly, and reductions in smoking prevalence among population groups and sales of smokeless tobacco and cigarettes have been achieved. Citizens' attitudes to tobacco consumption are also changing: smoking is no longer the norm, it is becoming increasingly less fashionable among young people, and smokeless public places are becoming standard.

Work on creating the most effective tobacco-control legislation in the Russian Federation continues. The current emphasis is on developing and maintaining an outcome assessment mechanism, enhancing existing legislation and identifying ways to counter new challenges from the tobacco industry. The outcome assessment mechanism being developed by the Ministry of Health is based on monitoring tobacco use and evaluating the effectiveness of measures designed to prevent exposure to second-hand tobacco smoke and reduce tobacco consumption in the country.

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# ANNEX 1. FISCAL YEARS 2015–2017: TAX RATES ON TOBACCO AND TOBACCO PRODUCTS

Tax rates for fiscal years 2015–2017 are shown in Table A1.1.

TABLE A1.1.

Fiscal years 2015–2017: tax rates on tobacco and tobacco products

Description of tobacco product	Tax rate		
	From 1 January to 31 December 2015	From 1 January to 31 December 2016	From 1 January to 31 December 2017
Pipe tobacco, smoking tobacco, chewing tobacco, snus, snuff and hookah tobacco (except tobacco used as a raw material for the production of tobacco products)	1 800 Rub per 1 kg	2 000 Rub per 1 kg	2 200 Rub per 1 kg
Cigars	128 Rub per 1 piece	141 Rub per 1 piece	155 Rub per 1 piece
Cigarillos, bidis and kretek	1 920 Rub per 1 000 pieces	2 112 Rub per 1 000 pieces	2 207 Rub per 1 000 pieces
Cigarettes, papirosy in consumer packaging (packed)	960 Rub per 1 000 pieces + 9.0% of the estimated value calculated on the basis of the maximum retail selling price, but not less than 1 250 Rub per 1 000 pieces	1 200 Rub per 1 000 pieces + 9.5% of the estimated value calculated on the basis of the maximum retail selling price, but not less than 1 600 Rub per 1 000 pieces	1 320 Rub per 1 000 pieces + 10.0% of the estimated value calculated on the basis of the maximum retail selling price, but not less than 1 760 Rub per 1 000 pieces
Cigarettes, papirosy without consumer packaging (unpacked)	1 250 Rub per 1 000 pieces	1 600 Rub per 1 000 pieces	1 760 Rub per 1 000 pieces

# ANNEX 2. EXAMPLES OF REGULATORY LEGAL ACTS OF THE RUSSIAN FEDERATION INTRODUCING A BAN ON TOBACCO-SMOKING IN PUBLIC PLACES

Examples of regulatory legal acts of the Russian Federation introducing a ban on tobacco-smoking in public places are shown in Table A2.1.

TABLE A2.1.

Examples of regulatory legal acts of the Russian Federation introducing a ban on tobacco-smoking in public places

No.	Constituent entity of the Russian Federation	Regulatory legal act	Legislative restrictions
1	St Petersburg	St Petersburg Law No. 46-13 of 29 January 2014 on protection of the health of citizens of St Petersburg from exposure to second-hand tobacco smoke and the consequences of tobacco use	In addition to the ban on smoking established by the Federal Law (Article 3), smoking is also banned in areas of communal use in shared apartments and dormitories.
2	Belgorod oblast	Law of the Belgorod oblast No. 241 of 4 December 2013 on regulation of certain issues in the field of protection of human health from exposure to second-hand tobacco smoke and the consequences of tobacco consumption	Under Article 4, tobacco-smoking is prohibited in: <ul style="list-style-type: none"> <li>- outdoor places at a distance of less than 15 m from the entrance to the premises occupied by public authorities and local self-government;</li> <li>- outdoor places at a distance of less than 15 m from the entrances to shopping facilities, areas designated for the provision of food services and personal services;</li> <li>- covered underpasses and overpasses;</li> <li>- outdoor places at urban and commuter public transport stops, and at a distance of less than 15 m from them, with the exception of passenger platforms; and</li> <li>- parking lots and underground garages.</li> </ul>
3	Voronezh oblast	Law of the Voronezh oblast No. 20-OZ of 6 March 2014 on regulation of certain issues in the sphere of health protection of citizens from exposure to second-hand tobacco smoke and the consequences of tobacco consumption in the Voronezh Oblast	Under Article 3, tobacco-smoking is prohibited: <ul style="list-style-type: none"> <li>- in accordance with the law of the Russian Federation and legislation of the Voronezh oblast in specially designated places of public events during such events;</li> <li>- at stopping points; and</li> <li>- in underpasses and overpasses.</li> </ul>

No.	Constituent entity of the Russian Federation	Regulatory legal act	Legislative restrictions
4	Ivanovo oblast	Law of the Ivanovo oblast No. 146 of 25 June 2015 on measures to protect the health of citizens from exposure to second-hand tobacco smoke and the consequences of tobacco consumption	<p>Under Article 4, tobacco-smoking is prohibited:</p> <ul style="list-style-type: none"> <li>- at stopping points located in cities and towns, and at a distance of less than 10 m from them;</li> <li>- in parks, public gardens and embankments (excluding specially designated outdoor places);</li> <li>- at locations of cultural, theatrical, concert, sports, social and political outdoor activities, identified by organizers as places where such events are held and during the time such activities are performed; and</li> <li>- in areas of communal use intended for citizens to accomplish their household, personal or other needs and in shared apartments.</li> </ul> <p>For the designation of areas where tobacco-smoking is banned, a sign is to be put up prohibiting smoking.</p>
5	Kemerovo oblast	Law of the Kemerovo oblast No. 133 of 22 December 2014 on protection of health of the Kemerovo oblast residents from exposure to second-hand tobacco smoke and the consequences of tobacco consumption	<p>Under Article 2, tobacco-smoking is prohibited in:</p> <ul style="list-style-type: none"> <li>- outdoor venues where cultural entertainment, theater and concert events are held during the time they are held; and</li> <li>- outdoor places at urban and commuter public transport stops, as well as at a distance of less than 15 m from the places where route vehicles stop, which are marked with the corresponding markings, and in their absence 15 m from the stop identifier.</li> </ul> <p>For the designation of areas where tobacco-smoking is banned, a sign is to be put up prohibiting smoking.</p>
6.	Kostroma oblast	Law of the Kostroma oblast No. 650-5-WKO of 31 March 2015 on regulation of certain issues in the field of protection of human health from exposure to second-hand tobacco smoke and the consequences of tobacco consumption in the Kostroma oblast	<p>Under Article 4, tobacco-smoking is prohibited in:</p> <ul style="list-style-type: none"> <li>- outdoor places at a distance of less than 15 m from the entrance to premises occupied by public authorities and local self-government;</li> <li>- outdoor places at a distance of less than 15 m from the entrance to premises intended for the provision of personal services, trade services and food services; and</li> <li>- outdoor places at urban and commuter public transport stops, as well as at a distance of less than 15 m from them, with the exception of passenger platforms.</li> </ul>
7	Kurgan oblast	Law of the Kurgan oblast No. 95 of 30 November 2015 on establishment of additional tobacco-smoking restrictions in certain public places and indoor areas in the Kurgan oblast	<p>Smoking is not permitted in the following public places and indoor areas:</p> <ul style="list-style-type: none"> <li>- at stopping points of urban and commuter public transport, as well as at a distance of less than 15 m from them;</li> <li>- in areas of communal use in shared apartments and dormitories (such as kitchens and bathrooms);</li> <li>- within the boundaries of parks, public gardens and embankments;</li> <li>- in parking lots and underground garages;</li> <li>- in outdoor places at a distance of less than 15 m from the entrances to the shopping facilities and areas designated for the provision of food services or personal services; and</li> <li>- in outdoor places at a distance of less than 15 m from the entrance to an apartment building, except for cases established by federal law.</li> </ul>

No.	Constituent entity of the Russian Federation	Regulatory legal act	Legislative restrictions
8	Orenburg oblast	Law of the Orenburg oblast No. 3307/907-V-OZ of 7 March 2015 on the establishment of additional tobacco-smoking restrictions in some public areas in the Orenburg oblast	Tobacco-smoking is prohibited at urban and commuter public transport stops, as well as at a distance of less than 15 m from them.
9	Khabarovsk krai	Law of the Khabarovsk krai No. 184 of 27 April 2016 on restriction of tobacco-smoking in some public areas in the Khabarovsk krai territory (not yet enacted)	<p>Under Article 2, tobacco-smoking is prohibited (except where tobacco-smoking is allowed in designated areas):</p> <ul style="list-style-type: none"> <li>- at a distance of less than 5 m from the entrance to premises occupied by public authorities and local governments of the municipalities of the krai;</li> <li>- at a distance of less than 5 m from the entrance to premises intended for the provision of personal services, trade services and food services;</li> <li>- at urban and commuter public transport stops, as well as at a distance of less than 5 m from them;</li> <li>- in covered underpasses and overpasses;</li> <li>- in parking lots; and</li> <li>- in parks, public gardens and embankments.</li> </ul>

# THE WHO REGIONAL OFFICE FOR EUROPE

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**World Health Organization  
Regional Office for Europe**

UN City, Marmorvej 51  
DK-2100 Copenhagen Ø, Denmark

Tel.: +45 45 33 70 00

Fax: +45 45 33 70 01

Email: [contact@euro.who.int](mailto:contact@euro.who.int)

Website: [www.euro.who.int](http://www.euro.who.int)