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GATS | Russian Federation



Global Adult Tobacco Survey: Executive Summary 2016



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Introduction

Tobacco use is a major preventable cause of premature death and disease worldwide.¹ Globally, approximately 7 million people die each year from tobacco-related illnesses, and if current trends continue, this number is expected to increase to more than 8 million by 2030.² A systematic surveillance system is important to monitor tobacco use and evaluate tobacco prevention and control interventions.³ The Russian Federation signed and ratified the Framework Convention on Tobacco Control (FCTC) in 2008 and in line with FCTC the Russian Federation introduced the Framework for Implementing National Policy on Combating Tobacco Consumption, 2010 – 2015,⁴ and passed the law (No. 15-FZ) on Protecting the Health of Citizens from the Effects of Second-hand Tobacco Smoke and the Consequences of Tobacco Consumption⁵.

In the last decade, the Russian Federation has made significant progress in reducing tobacco use and implementing various tobacco control initiatives, including: implementing a 100% smoke-free policy in all public places; continued incremental increases in tobacco taxes; prohibiting all forms of tobacco advertising, promotion, and sponsorship; increasing anti-tobacco campaigns in various types of media (e.g., television, internet, and print media); implementing pictorial health warnings on cigarette packages; prohibiting the sale of snus and chewing tobacco; providing direct counseling for stopping tobacco use; and prohibiting the sale of all tobacco products to people younger than 18 years old.

The Global Adult Tobacco Survey (GATS) is a nationally representative household survey of persons age 15 years or older, and is a global standard to systematically monitor tobacco use and track key tobacco control indicators designed to produce national estimates overall, and by gender and residence. GATS was launched as part of the Global Tobacco Surveillance System (GTSS) and it was first implemented in the Russian Federation in 2009^{*}, and was repeated in 2016.

GATS enhances countries' capacity to design, implement and evaluate tobacco control programs. It will also assist countries to fulfill their obligations under the WHO FCTC to generate comparable data within and across countries. WHO developed MPOWER⁶, a technical assistance package of six evidence-based tobacco demand reduction measures contained in the FCTC that includes:



The 2016 GATS was administered through coordination of the Ministry of Health of the Russian Federation, Information and Publishing Center "Statistics of Russia", under the Federal State Statistics Services (Rosstat) and the Research Pulmonology Institute. Technical assistance was provided by the U.S. Centers for Disease Control and Prevention (CDC), the World Health

^{*} For further details on the 2009 GATS in the Russian Federation please refer to "Global Adult Tobacco Survey (GATS) Russian Federation 2009 Country Report"

Organization (WHO), the Johns Hopkins Bloomberg School of Public Health, and RTI International.

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Methodology

Similar to the survey conducted in 2009, the 2016 GATS used a multistage geographically clustered sample design to collect nationally representative data on Russians aged 15 years or older. One individual was randomly chosen from each selected household to participate in the survey. In 2009, there were a total of 11,406 completed individual interviews, with an overall response rate of 97.7%.

In 2016, there were a total of 11,458 completed individual interviews with an overall response rate of 98.2%. For comparisons, the same regions [60 regions] from GATS 2009 that were part of the sample were mapped with the GATS 2016 sample. Specifically, a total of 10,688 interviews from GATS 2016 data were included in the analysis to produce comparison estimates between 2009 and 2016. Therefore, the estimates produced using this reduced sample might be different from the estimates based on the full sample of GATS 2016.

GATS provides information on respondents' background characteristics, tobacco use (smoking and smokeless), cessation, secondhand smoke exposure, economics, media, and knowledge, attitudes and perceptions towards tobacco use.

Key Findings

GATS 2016

Tobacco Use: In 2016, 30.5% (36.4 million) of all adults reported current tobacco use in any form [49.8% among men and 14.5% among women]. Overall, 30.3% (36.3 million) of adults currently smoked tobacco [49.5% among men and 14.4% among women]. Overall, 26.1% (31.2 million) of adults currently smoked tobacco daily [43.9% among men and 11.3% among women].

Overall, 29.9% (35.8 million) of adults currently smoked cigarettes [48.8% among men and 14.2% among women] and 25.7% smoked cigarettes on a daily basis [43.1% among men and 11.3% among women]. Daily cigarette smokers smoked an average of 16.3 cigarettes per day [17.1 among men and 13.7 among women]. The overall average age of initiating daily cigarette smoking among ever daily smokers was 17.0 years old [16.8 years old among men and 17.2 years old among women].

Overall, 2.8% (3.3 million) of adults currently smoked waterpipe (calean) [4.1% among men and 1.7% among women], and the average duration of calean smoking session was 43.8 minutes. Also, 71.2% of current calean smokers shared the same pipe with others during the calean smoking session.

Overall, 0.4% (0.5 million) of adults reported current smokeless tobacco use [0.8% among men and 0.1% among women].

Electronic Cigarettes: In 2016, 79.9% of adults had ever heard of electronic cigarettes and 3.5% were current users of electronic cigarettes. However, among adults aged 15-24 years, 91.2% had ever heard of electronic cigarettes and 9.7% were current users of electronic cigarettes.

Smoking Cessation: In 2016, 56.2% of current tobacco smokers planned to or were thinking about quitting smoking [54.4% among men and 61.3% among women]; 35.0% of smokers[†] made a quit attempt in the past 12 months [33.4% among men and 39.3% among women].

Overall, 48.9% of smokers^{\dagger} stated they visited a health care provider in the past 12 months. Among those who visited a health care provider, 61.7% were asked if they smoked and 47.4% were advised to quit smoking.

Overall, 64.0% of daily tobacco smokers smoked within 30 minutes of waking up.

Exposure to Secondhand Smoke: An estimated 21.8% of adults (12.7 million) were exposed to secondhand smoke in enclosed areas at their workplace in the past month. In the past month, 23.0% of adults (27.3 million) were exposed to secondhand smoke at home. Among adults who visited public places in the past 30 days, levels of exposure to secondhand smoke were as follows: 42.5% in bars and nightclubs, 20.0% in restaurants, 10.5% in public transport, 8.9% in universities, 7.3% in cafés/cafeterias, 3.5% in government buildings/offices, 3.4% in healthcare facilities, and 3.1% in schools.

Economics of Tobacco Smoking:

The average (median) amount spent on 20 manufactured cigarettes was Rub 79.7 [Rub 79.6 by men and Rub 81.8 by women]. The majority (84.6%) of manufactured cigarette smokers last purchased cigarettes from a store.

Among daily cigarette smokers, average (median) monthly cigarette expenditure was Rub 1672.4 [Rub 1818.7 among men and Rub 1212.9 among women].

Advertising, Promotion, and Sponsorship: Among adults, 22.5% noticed any cigarette advertisement, promotion, or sponsorship, while 5.3% noticed it in stores where cigarettes were sold.

Overall, 81.8% of adults noticed anti-cigarette smoking information at any location, with 75.1% of adults having noticed anti-cigarette smoking information on television, and 19.2% at public transportation stations.

Almost all (97.2%) current smokers noticed pictorial warning labels on cigarettes packages; 35.9% thought about quitting smoking because of warning labels on packages.

Knowledge, Attitudes, and Perceptions: Among all adults, 90.8% believed that smoking causes serious illnesses: lung cancer (93.6%), heart attack (83.0%), stroke (81.1%), and bladder cancer (48.1%). Overall, 94.1% of adults believed that smoking is addictive.

Similarly, 81.8% of all adults believed that breathing other people's smoke causes serious illness in non-smokers [66.4% among smokers and 88.5% among non-smokers].

Among current smokers, 25.0% thought that some types of cigarettes could be less harmful than other types.

[†] Among current tobacco smokers and former tobacco smokers who have abstained from smoking for less than 12 months

Overall, 86.8% of adults favored a law prohibiting all advertisements for tobacco products.

GATS 2009 to 2016

- Tobacco use prevalence significantly decreased among adults from 39.4% in 2009 to 30.9% in 2016 [from 60.7% to 50.9% among males; from 21.7% to 14.3% among females]. This represents a 21.5% relative percent decline in tobacco use prevalence [16.0% decline for males; 34.0% decline for females].
- The prevalence of current cigarette smoking among adults significantly decreased from 38.8% in 2009 to 30.3% in 2016 [from 59.8% to 50.0% among males; from 21.4% to 14.1% among females].
- The percentage of former smokers[‡] among ever daily smokers (18.3% in 2009 to 24.7% in 2016) increased significantly. Additionally, the proportion of smokers[‡] who were advised to quit by a healthcare provider (31.7% in 2009 to 47.9% in 2016) increased significantly. However, there was no statistically significant difference in percentage of smokers[‡] who made a quit attempt in the last 12 months (32.1% in 2009 to 34.7% in 2016).
- The percentage of current cigarette smokers who thought of quitting smoking because of health warnings on cigarette packages increased significantly from 31.7% in 2009 to 36.0% in 2016.
- There was a significant increase in the percentage of adults who noticed anti-cigarette smoking information at any location (68.1% in 2009 to 81.3% in 2016).
- Exposure to secondhand smoke in homes (34.7% in 2009, 23.1% in 2016) and in the workplace (34.9% in 2009, 21.9% in 2016) declined significantly. Similarly, among adults who visited various public places in the last 30 days, a significant decline in exposure to secondhand smoke was reported in government buildings (from 17.0% in 2009 to 3.6% in 2016), restaurants (from 78.6% in 2009 to 19.9% in 2016), healthcare facilities (from 10.2% in 2009 to 3.4% in 2016), and public transportation (from 24.9% in 2009 to 10.8% in 2016).
- Among daily manufactured cigarettes smokers, average (median) cigarette expenditures per month increased from Rub 560.8 in 2009 to Rub 1671.0 in 2016, after adjusting for inflation. More than a three-fold increase was observed in the average (median) price of a pack of 20 manufactured cigarettes, increasing from Rub 24.5 in 2009 to Rub 79.7 in 2016.
- Exposure to any cigarette advertising, promotion, or sponsorship in the past 30 days declined significantly from 68.0% in 2009 to 23.1% in 2016. Similarly, it declined significantly at the point of sale, from 43.6% in 2009 to 5.5% in 2016.

[‡] Current non-smokers.

Conclusions[§]

Between 2009 and 2016, the GATS Russian Federation showed a significant decline in tobacco use prevalence, exposure to secondhand smoke, exposure to tobacco advertising, promotion, and sponsorship, and affordability of tobacco products. During the same period, an increase occurred in successful quit attempts and awareness of anti-smoking information.

This progress could be attributed to the Russian Federation law (No. 15-FZ) on Protecting the Health of Citizens from the Effects of Second-hand Tobacco Smoke and the Consequences of Tobacco Consumption passed in 2013. This law comprehensively addresses the following:

- A 100% smoke-free policy in all public places;
- Continued incremental increases of tobacco taxes;
- Prohibitions on all forms of tobacco advertising, promotion and sponsorship;
- Increase in anti-tobacco use campaigns in various types of media;
- Prohibition on the sale of snus and chewing tobacco;
- Strengthening the prohibition on sale of tobacco products to minors under age 18 years.

In addition, in 2012, the Ministry of Health issued a decree introducing pictorial health warnings on cigarette packages

GATS data from Russian Federation show that the tobacco control targets set in the national tobacco control strategy (Framework for Implementing National Policy on Combating Tobacco Consumption, 2010 - 2015) have been achieved. These data will continue to inform and strengthen the tobacco control efforts in the Russian Federation.

While the Russian Federation has reduced tobacco use since 2009, still more than 30% of Russians continued to use tobacco in 2016. The WHO FCTC outlines steps that can be taken to help end the tobacco epidemic. Periodic monitoring of tobacco use, proven tobacco control interventions, and continued vigilance on tobacco industry interference are important components in reducing tobacco use and tobacco related morbidity and mortality.

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[§] The findings and conclusion in this executive summary are those of the author(s) and do not necessarily represent the official position of the U.S. Centers for Disease Control and Prevention

		Gender		Residence		
Indicator	Overall (%)	Male (%)	Female (%)	Urban (%)	Rural (%)	
M: Monitor tobacco use and prevention policies						
Current tobacco users	30.5	49.8	14.5	30.6	30.1	
Current tobacco smokers	30.3	49.5	14.4	30.5	29.9	
Current cigarette smokers	29.9	48.8	14.2	30.0	29.8	
Current manufactured cigarette smokers	29.7	48.2	14.2	29.8	29.3	
Average number of cigarettes smoked per day (number) ¹	16.3	17.1	13.7	16.1	16.7	
Average age at daily smoking initiation (years) ²	17.0	16.8	17.2	16.9	17.2	
Former smokers among ever daily smokers	25.1	24.1	27.9	26.1	22.0	
P: Protect people from tobacco smoke						
Exposure to secondhand smoke at home at least monthly	23.0	25.5	20.9	24.2	19.4	
Exposure to secondhand smoke at work	21.8	28.1	15.7	22.0	20.8	
Exposure to secondhand smoke in public places: [†]						
Government buildings/offices	3.5	4.2	3.0	3.6	3.2	
Health care facilities	3.4	3.8	3.1	3.1	4.0	
Restaurants	20.0	21.6	18.5	21.1	11.6	
Public Transportation	10.5	10.7	10.3	10.8	8.9	
Schools	3.1	4.2	2.5	3.3	2.6	
O: Offer help to quit tobacco use						
Made a quit attempt in the past 12 months ³	35.0	33.4	39.3	34.1	37.7	
Advised to quit smoking by a health care provider ^{3,4}	47.4	50.9	39.6	47.6	47.0	
Attempted to quit smoking using a specific cessation method ³ :						
Pharmacotherapy (Nicotine Replacement Therapy)	20.1	21.6	16.4	19.0	23.0	
Counselling/advice	2.7	3.3	1.2	1.9	5.0	
Interested or planning to quit smoking ⁵	56.2	54.4	61.3	56.2	56.4	
W: Warn about the dangers of tobacco						
Believe that tobacco smoking causes serious illness	90.8	87.9	93.3	90.5	92.0	
Believe that breathing other peoples' smoke causes serious illness	81.8	75.2	87.3	81.3	83.4	
Noticed anti-cigarette smoking information at any location*	81.8	80.8	82.6	80.6	85.4	
Thinking of quitting because of health warnings on cigarette packages * ⁵ E: Enforce bans on tobacco advertising, promotion and sponsorship	35.9	35.7	36.5	33.7	42.6	
E: Enforce bans on tobacco advertising, promotion and sponsorship Noticed advertisements in stores where cigarettes are sold *	5.3	5.0	1 9	5.0	2 =	
Noticed advertisements in stores where cigarettes are sold *	5.3 22.5	5.9 25.3	4.8 20.2	5.9 23.7	3.5 19.2	
R: Raise taxes on tobacco	22.3	23.3	20.2	23.1	19.2	
Average (median) cigarette expenditure per month (Rubles) ⁶	1672.4	1818.7	1212.9	1672.9	1632	
Average (median) cost of a pack of manufactured cigarettes (Rubles) ⁶	79.7	79.6	81.8	79.9	74.4	
Last cigarette purchase was from a store ⁶	84.6	84.7	84.5	82.3	91.7	

Appendix Table 1: MPOWER Summary Indicators - GATS Russian Federation, 2016

Notes:

¹ Among current daily smokers, ² Among ever daily smokers, ³ Among past-year smokers (includes current smokers and those who quit in the past 12 months), ⁴ Among those who visited a health care provider in past 12 months, ⁵ Among current smokers, ⁶ Among current smokers of manufactured

cigarettes

* In the last 30 days, † Among those who visited the place in the last 30 days.

Appendix Table 2: MPOWER Summary Indicators, GATS Russian Federation 2009 and 2016

Indicator	2009			2016			Relative change		
	Overall	Male	Female	Overall	Male	Female	Overall	Male	Female
M: Monitor tobacco use and prevention policies	Percentage (95% CI)		Percentage (95% CI)			Percentage			
Current tobacco users	39.4 (38.0, 40.8)	60.7 (58.9, 62.4)	21.7 (19.7, 23.9)	30.9 (29.4, 32.4)	50.9 (48.8, 53.1)	14.3 (13.0, 15.8)	-21.5*	-16.0*	-34.0 *
Current tobacco smokers	39.1 (37.8, 40.5)	60.2 (58.4, 62.0)	21.7 (19.6, 23.8)	30.7 (29.3, 32.2)	50.6 (48.5, 52.7)	14.3 (12.9, 15.7)	-21.6*	-16.0*	-34.2*
Current cigarette smokers ¹	38.8 (37.4, 40.2)	59.8 (58.0, 61.5)	21.4 (19.4, 23.6)	30.3 (28.9, 31.7)	50.0 (47.9, 52.0)	14.1 (12.7, 15.5)	-21.9*	-16.4*	-34.3*
Current manufactured cigarette smokers	38.5 (37.2, 39.9)	59.3 (57.6, 61.0)	21.4 (19.3, 23.5)	30.0 (28.6, 31.4)	49.3 (47.3, 51.4)	14.1 (12.7, 15.5)	-22.1*	-16.8*	-34.2*
Average number of cigarettes smoked per day (number)	16.8 (16.3, 17.3)	18.3 (17.8, 18.9)	12.6 (11.8, 13.5)	16.3 (15.6, 16.9)	17.1 (16.5, 17.8)	13.5 (12.0, 14.9)	-3.4	-6.7*	6.7
Average age at daily smoking initiation (years) ²	16.6 (16.4, 16.8)	16.4 (16.2, 16.6)	17.0 (16.7, 17.3)	16.8 (16.6, 17.0)	16.7 (16.4, 16.9)	17.1 (16.8, 17.5)	1.3	1.5	1.0
Former smokers among ever daily smokers ³	18.3 (16.9, 19.9)	18.8 (17.2, 20.5)	17.1 (14.2, 20.5)	24.7 (22.9, 26.6)	23.4 (21.5, 25.5)	28.4 (24.8, 32.3)	34.7*	24.8*	66.3*
P: Protect people from tobacco smoke									
xposure to secondhand smoke at home at least monthly	34.7 (32.9, 36.5)	36.7 (34.5, 38.9)	33.0 (30.7, 35.3)	23.1 (21.2, 25.1)	25.9 (23.6, 28.2)	20.8 (18.9, 22.8)	-33.4*	-29.5*	-37.0*
Exposure to secondhand smoke at work 4, †	34.9 (32.4, 37.4)	45.7 (42.5, 48.9)	25.7 (22.9, 28.8)	21.9 (19.5, 24.5)	28.3 (25.1, 31.8)	15.8 (13.5, 18.5)	-37.3*	-38.0*	-38.6*
exposure to secondhand smoke in public places: 5. †									
Government buildings/offices	17.0 (15.3, 18.8)	21.2 (18.9, 23.8)	13.8 (12.0, 15.8)	3.6 (2.7, 4.7)	4.2 (3.0, 5.8)	3.1 (2.1, 4.5)	-79.0*	-80.2*	-77.5*
Health care facilities	10.2 (8.5, 12.1)	12.1 (9.8, 14.8)	9.1 (7.4, 11.2)	3.4 (2.7, 4.4)	3.8 (2.8, 5.2)	3.2 (2.4, 4.2)	-66.2*	-68.1*	-64.8*
Restaurants	78.6 (75.0, 81.8)	78.3 (74.0, 82.1)	78.8 (74.0, 82.9)	19.9 (16.2, 24.2)	21.8 (17.2, 27.3)	18.1 (14.0, 23.1)	-74.7*	-72.2*	-77.0*
Public Transportation	24.9 (22.5, 27.4)	24.5 (21.9, 27.2)	25.1 (22.5, 28.0)	10.8 (9.0, 12.8)	10.8 (8.8, 13.2)	10.7 (8.8, 13.0)	-56.7*	-55.7*	-57.3*
D: Offer help to quit tobacco use									
Made a quit attempt in the past 12 months ⁶	32.1 (30.2, 34.0)	29.4 (27.5, 31.4)	38.1 (33.7, 42.7)	34.7 (32.3, 37.1)	33.2 (30.6, 35.9)	39.0 (34.6, 43.7)	8.1	12.9*	2.5
Advised to quit smoking by a health care provider 6,7	31.7 (28.9, 34.6)	34.1 (31.0, 37.4)	27.4 (23.0, 32.3)	47.9 (43.4, 52.5)	52.0 (46.9, 57.1)	38.5 (33.0, 44.3)	51.1*	52.4*	40.4*
Attempted to quit smoking using a specific cessation method ⁶ :									
Pharmacotherapy (Nicotine Replacement Therapy)	20.1 (17.3, 23.3)	19.1 (16.2, 22.4)	21.8 (16.4, 28.4)	26.1 (22.3, 30.3)	27.6 (23.1, 32.5)	22.5 (17.7, 28.2)	29.9*	44.1*	3.3
Counselling/advice	5.7 (4.4, 7.3)	7.1 (5.3, 9.4)	3.3 (1.8, 6.0)	2.7 (1.7, 4.3)	3.4 (2.1, 5.4)	1.1 (0.4, 2.6)	-52.3*	-52.3*	-67.2*
nterested or planning to quit smoking	60.3 (57.9, 62.7)	55.8 (53.4, 58.2)	70.7 (66.3, 74.8)	56.2 (53.5, 59.0)	54.6 (51.5, 57.6)	61.1 (56.4, 65.6)	-6.8*	-2.2	-13.6*
W: Warn about the dangers of tobacco									
Believe that tobacco smoking causes serious illness	90.8 (89.6, 91.9)	88.0 (86.4, 89.5)	93.2 (91.8, 94.3)	90.8 (89.6, 91.9)	87.8 (86.0, 89.4)	93.3 (92.1, 94.3)	0.0	-0.3	0.2
Believe that breathing other peoples' smoke causes serious illness	81.9 (80.3, 83.4)	75.7 (73.4, 77.8)	87.0 (85.3, 88.6)	81.9 (80.1, 83.6)	75.1 (72.6, 77.5)	87.5 (85.8, 89.0)	0.0	-0.7	0.5
Noticed anti-cigarette smoking information at any location $^{^{\dagger}}$	68.1 (65.6, 70.5)	66.8 (64.2, 69.4)	69.1 (66.4, 71.7)	81.3 (78.6, 83.8)	80.3 (77.3, 83.0)	82.2 (79.3, 84.7)	19.5*	20.2*	18.9*
Thinking of quitting because of health warnings on cigarette packages $^{^\dagger}$	31.7 (28.9, 34.6)	31.6 (28.8, 34.5)	31.9 (27.4, 36.9)	36.0 (33.4, 38.8)	35.7 (32.7, 38.9)	37.0 (32.9, 41.2)	13.7*	13.1*	15.8
E: Enforce bans on tobacco advertising, promotion and sponsorship									
Noticed advertisements in stores where cigarettes are sold ^{8, †}	43.6 (41.0, 46.2)	46.1 (43.3, 48.9)	41.6 (38.8, 44.4)	5.5 (4.5, 6.8)	6.1 (4.9, 7.7)	5.0 (3.9, 6.4)	-87.3*	-86.7*	-87.9*
Noticed any cigarette advertisement, sponsorship or promotion †	68.0 (65.8, 70.2)	71.6 (69.3, 73.9)	65.0 (62.4, 67.5)	23.1 (20.6, 25.7)	25.9 (23.0, 29.0)	20.7 (18.2, 23.4)	-66.1*	-63.9*	-68.2*
R: Raise taxes on tobacco									
Average (median) cigarette expenditure per month (Rubles) ⁹	560.8 (535.7, 588.3)	604.4 (582.8, 641.7)	422.9 (395.4, 514.4)	1671.0 (1541.4, 1824.7)	1817.6 (1731.8, 1951.8)	1209.7 (1108.2, 1379.2)	198.0*	200.7*	186.0*
Average (median) cost of a pack of manufactured cigarettes (Rubles) 9	24.5 (23.2, 26.7)	21.9 (21.4, 24.7)	35.4 (30.2, 38.9)	79.7 (79.5, 80.0)	79.6 (79.4, 80.0)	81.8 (80.8, 85.7)	224.7*	263.3*	131.4*
Last cigarette purchase was from a store ⁹	69.0 (66.2, 71.7)	69.3 (66.4, 72.0)	68.5 (63.7, 72.9)	84.6 (82.1, 86.8)	84.7 (81.9, 87.2)	84.3 (79.9, 87.9)	22.6*	22.3*	23.1*

1 Includes manufactured cigarettes, hand-rolled cigarettes and papirosy. 2 Among daily smokers age 15-34 years. 3 Current non-smokers. 4 Among those who work outside of the home who usually work indoors or both indoors and outdoors. 5 Among those who visited the specific public places in the past 30 days. 6 Includes current smokers and those who quit in the past 12 months. 7 Among those who visited a health care provider in past 12 months. 8 Includes those who noticed cigarettes at sale prices; free gifts or discount offers on other products when buying cigarettes; or any advertisements or signs promoting cigarettes in stores where cigarettes are sold. 9 Among current manufactured cigarette smokers. † During the past 30 days. * p < 0.05

The relative change (R) of the two estimates in the survey years 2009 (r2009) and 2016 (r2016) is calculated as a percentage (R=(r2009 - r2016/r2009)). The relative changes are calculated using un-rounded prevalence estimates and might be different if calculated using rounded prevalence estimates shown in this table.

NOTE: Results for prevalence estimates, averages and 95% CIs are rounded to the nearest tenth (0.1). Current use refers to daily and less than daily use. Adults refer to persons aged 15 years and older. Data have been weighted to be nationally representative of all non-institutionalized men and women aged 15 years and older. Percentages reflect the prevalence of each indicator in each group, not the distribution across groups.

The WHO Regional Office for Europe

The World Health Organization (WHO) is a specialized agency of the United Nations created in 1948 with the primary responsibility for international health matters and public health. The WHO Regional Office for Europe is one of six regional offices throughout the world, each with its own programme geared to the particular health conditions of the countries it serves.

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