

**EG on Alcohol and Substance Abuse (ASA EG)**  
**Eighth working Meeting**  
**Murmansk, Russia**  
**3-4 April, 2014**

<b>Reference</b>	ASA 8/7/Info 1
<b>Title</b>	Drinking habits and alcohol related harms in ND Region – a qualitative study
<b>Submitted by</b>	ITA in Coordination with the Chair of the ASA EG
<b>Summary / Note</b>	The project purpose is to develop standardized comparative survey on alcohol use, patterns of drinking and alcohol dependence for Russian Federation. To develop a report presenting an overview of individual country profiles and comparative analysis of the alcohol situation on a regional basis
<b>Requested action</b>	For discussion and advise

**Project concept**

<b>Submitted by</b>	
<b>Name of the Lead Applicant</b>	National Research Center on Addiction Ministry of Public Health of the Russian Federation
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<b>Project concept</b>	
<b>Project title</b>	<b>Drinking habits and alcohol related harms in RF</b>
<b>Thematic area(s) covered</b>	Health
<b>Geographical area(s) covered</b>	<i>Russian Federation</i>

<b>Objectives</b>	<p><u>Overall objective:</u> To provide policy makers with knowledge and information that lead to a more informed and evidence based policy making to reduce alcohol's health and economic burden</p> <p><u>Specific objectives:</u></p> <ul style="list-style-type: none"> <li>(i) To develop standardized comparative survey on alcohol use, patterns of drinking and alcohol dependence for Russian Federation.</li> <li>(ii) To collect and analyse data on Public attitudes to alcohol policy, harm to others, unrecorded and illicit alcohol and alcohol related harm and alcohol policy responses</li> <li>(iii) To develop a report presenting an overview of individual country profiles and comparative analysis of the alcohol situation on a regional basis</li> </ul>
<b>Type of activities to be implemented</b>	<ul style="list-style-type: none"> <li>a) Literature review</li> <li>b) Focus groups</li> <li>c) Finalizing comparative survey methodology</li> <li>d) Survey</li> <li>e) Expert Group meetings</li> <li>f) Development of the report with the recommendations for the NDPHS Partner Countries</li> </ul>
<b>Target group(s)</b>	General Population
<b>Final beneficiaries</b>	Policy makers, local authorities, health personnel
<b>Estimated results</b>	<p>Increased effectiveness of health policies across NDPHS partner countries in the alcohol field by the provision of standardized methodologies facilitating selection of appropriate health policies and their evaluation.</p> <p>Reduced alcohol's health burden to Russia resulting from application of evidence-based alcohol policies</p>

<b>Main activities</b>	Literature review, focus groups, survey, comparative report with specific conclusions and recommendations
<b>Duration of the project (months)</b>	24
<b>Partners of the Lead Applicant</b>	The Institute of Psychiatry and Neurology (Poland) , <i>National Institute for Health Development ( Estonia)</i> , <i>State Mental Health Center (Lithuania)</i> , <i>Narcological Center ( Murmansk)</i> , <i>NGO - “Medicine . Science . Law”</i>
<b>Estimated total cost and main types of expenditure (EUR)</b>	360 000
<b>EU financing requested (EUR)</b>	300 000
<b>Estimated own contribution by the project partners (EUR)</b>	60 000
<b>Funding sought from the EU (EUR)</b>	300 000

## Description of the project (1 page)

Harmful use of alcohol, illicit drugs, tobacco, and other psychoactive substances is one of the major public health concerns within the Northern Dimension (ND) area and has severe impact on public health systems. The burden of psychoactive substance use is enormous not only for the affected individuals, but for the whole society.

NDPHS Expert Group on Alcohol and Substance Abuse (ASA EG) objective is to promote sustainable development of comprehensive policies and actions in the entire region to prevent and minimize harm from tobacco smoking, alcohol and drug-use to individuals, families, and society. In 2011, the ASA EG has developed a thematic report, which gave an overview of Alcohol Policies in NDPHS partner Countries, including Russia. The report was disseminated and discussed among the Policy makers and the Ministries of Health of Partner countries.

Among the several conclusions from the first thematic report of the ASA EG were:

- a) Clear definition of alcohol-related terms, particularly in the area of alcohol policy, common methods to measure alcohol consumption, and good monitoring in order to gain information on levels and patterns of alcohol consumption, including unrecorded consumption, are necessary for developing a reliable alcohol policy
- b) It is essential that the data on alcohol consumption are collected by the countries. Given the significance of alcohol consumption to health, continuous monitoring of alcohol consumption is necessary both for the development of evidence based policy responses, and assessment of the impact of proposed interventions

Based on these recommendations, it was decided to propose comparative studies and facilitate cross-country comparison.

The ASA Experts Group will initiate and support qualitative study on social meaning of concepts used in public debate on alcohol including drinking patterns, alcohol related harms and perception of alcohol policy.

The work will be organized in the following way

### 1. Literature review

The literature review will cover the period 2005-2012. The following key words will be used: alcohol survey, drinking survey and then alcohol consumption, unrecorded alcohol consumption, context of drinking, heavy drinking, binge drinking, episodic heavy drinking, drunkenness, alcohol dependence, alcoholism. The identified methodological approaches will be categorized according to cultural and technical similarities/differences. Survey questions, ways of questionnaires administration, sampling methods, and other methodological aspects will be under consideration.

### 2. Drafting a comparative methodology

Based on literature review a draft of model methodology will be constructed by the

experts of the ASA EG, consisted of representatives from 10 countries supported by an external experts Jacek Moskalewicz and Janusz Sierosławski (Institute of Psychiatry and Neurology, Poland). Jacek Moskalewicz has got substantial experience as a co-coordinator of European EU co-funded project: Standardizing Measurement of Alcohol Related Troubles (SMART) which aimed at developing standardized comparative survey methodologies on heavy drinking, binge drinking (episodic heavy drinking), drunkenness, context of drinking, alcohol dependence and unrecorded consumption. He is now coordinator of large European drinking survey under EU Joint Action on Alcohol. Janusz Sierosławski is ASA EG expert representing Poland and he was also involved in implementation of SMART and is involved in European drinking survey under EU Joint Action on Alcohol

### 3. Focus groups

The study will consist of five focus group discussions, which will be held to understand better the cultural meanings of major concepts under study (drinking, a drunk, harm for others, unrecorded consumption, and so on). Each focus group will consist of 5-8 persons from predefined sub-populations (normal drinkers, heavy drinkers, local level alcohol policy makers, alcohol prevention activists, alcohol sellers).

There will be one group representing urban population, one group – rural population and one comprising of persons suffering from alcohol related problems. Participants will be recruited among respondents of the pilot survey. Detailed recruitment criteria will be elaborated at the first meeting of the ASA EG.

Major themes to be discussed include: understanding of major research concepts like alcoholic beverage, standard unit, binge drinking, drunkenness, alcoholism et cetera and feedback to the results of the pilot survey.

### 4. Population survey in Russia

The Population survey will be implemented in the North West Region of Russian Federation. Without a survey in the Northern part of Russia a picture of alcohol consumption, drinking patterns and related problems in the ND Region would be incomplete and consequently would fail to offer regional recommendations.

The survey will be implemented using the same methodology including questionnaire as methodology used in the European survey implemented in the scope of Joint Action on Alcohol. The country specific questions developed on the basis of qualitative study will be also added. The survey will be implemented on the probabilistic sample of adult inhabitants of Northern Region of Russia and possible in Moscow. Data will be collected using face-to face interview methods. The data will be comparable with data collected in the same time in 18 European countries participating in Work Package 4 - Joint Action on Alcohol. During the data collection it is planned to involve the Non-Commercial Partnership “ Medicine . Science . Law” . This organization has a long history of cooperation with NRC on Addiction and multiple international, Federal-level and regional organizations in conducting various research , practical and educational activities , and has qualified personnel

The output of the survey will be report with recommendations for alcohol policy. The Russian data will be included in European Comparative Report developed in the scope of Joint Action on Alcohol.

## 5. Meetings

Three 2-day meetings of researchers are foreseen. The first one will be held in the beginning of the project to agree on methodology of data collection and analyses including the focus group scenarios. The second one will be held in the middle of the project implementation to discuss first results, to agree on further analyses and national report design. The third one will be held at the end of the project to discuss comparative conclusions and recommendations on the basis of national reports. It is also planned that the representatives from the Russian Institution will participate in 4 meetings of the group of Working Package 4, of the EU Joint Action on reducing Alcohol related harm.

## Relevance of the project (max 3 pages)

Alcohol is one of the main health determinants in Europe, including ND countries. It is estimated that about 58 millions of EU adult citizens are heavy drinkers, of whom some 23 million are dependent on alcohol. One of the most important social determinants of the harm done by alcohol are the social and cultural inequalities between and within countries and detrimental drinking patterns.

One of the most important social determinants of the harm done by alcohol is due to inequalities between and within countries. Several researches estimated that alcohol is responsible for a difference in the crude death rate of approximately 90 extra deaths per 100,000 people for men and 60 per 100,000 for women (as well as 16,000 DALYs per million people for men and 4,000 DALYs per million for women) in the newer EU Member States, compared with the older 15 Member States. EU15. For males dying between the ages of 20 and 64 years, injuries are responsible for nearly half (46%) of the difference in life expectancy between the three Baltic states (Estonia, Latvia and Lithuania) and the older EU15, and for one fifth (22%) of the difference between central and eastern Europe (Poland, Czech Republic, Slovakia, Hungary, Slovenia, Romania, Bulgaria) and the EU15. Whereas in the EU15, alcohol is responsible for 29% of all male injuries and 19% of all female injuries, in the central and eastern European countries, the proportions are 38% and 29%, and in the three Baltic states 48% and 42% respectively.

Noting the disparate definitions and methodologies, which were making impossible the comparison of results across the EU, it was recommended to develop a comparative surveys with standardized definitions on, heavy drinking, episodic heavy drinking (binge-drinking), drunkenness, context of drinking, alcohol dependence, and unrecorded consumption. As a result the EU co-funded project: Standardizing Measurement of Alcohol Related Troubles (SMART) was introduced in 2010.

The piloting of Standardizing Measurement of Alcohol Related Troubles project (SMART) project show greater opportunity to move towards a standardized

methodology with definitions to undertake surveys on alcohol consumption and drinking patterns that can inform countrywide and European surveys, including the ESPAD and HBSC surveys. The proposed methodology allowing for more country based databases to be used in a comparative estimate for Europe as a whole. A coordinated and combined approach for standardization of data provides benefit for money, since it is a more efficient and cost effective way to achieve the aims.

Full-scale population surveys of alcohol consumption by Russia's population have not been conducted since 1986 ( Bekhterev et al. ). A number of regional studies have been carried out (Govorin et al., Nemtsov et al.). Recently several comparative regional studies have been implemented, such as Population Surveys of Individual Regions on Tobacco, Alcohol and Drugs (Zbarskaya et al. 2010), Assessment of the Nature and Extent of Unrecorded Alcohol Consumption in Some Areas of Central Russia (Koshkina et al. 2013). Also in 1999-2011 Russia was taking part in the international project ESPAD (European School Survey Project on Alcohol and Other Drugs) which monitors the use of alcohol by adolescents aged 15-16 years (Hibell et al.). In addition, annual monitoring of national health statistics on alcohol and alcohol treatment is carried out, which is limited only to patients seeking care at state-supported hospitals of Russia (Koshkina et al.). The above-mentioned studies provide an opportunity of better understanding of specific aspects of alcohol problem in Russia, still the need for a full-scale survey among general population with an international comparison component in of very high importance and relevance.

Alcohol abuse and its consequences remain a serious problem in the Russian Federation. According to official statistics there were 2,358 thousand persons abusing alcohol registered in Russia in 2012 (patients with alcohol dependency, alcoholic psychoses and alcohol misuse). According to expert estimates, officially registered number of patients with alcohol dependence might appear 5 times lower than the real number of dependent individual, as far as according to the Russian Federation legislation, medical treatment to alcohol dependent persons is provided on voluntary basis only. Among patients with alcohol dependency up to 90% are of working age. This high proportion determinates negative impact of alcoholism on country's economic development. One of the most acute problems in Russia is alcohol-related mortality, as well as deaths due to accidents (traffic accidents, drowning, fire, crime, workplace injury) and suicides where alcohol is involved. These data are reflecting both the complex nature of addictive disorders and significant scale of alcohol consumption among Russia's population, as well as major damage, that they impose to the health of the population and all spheres of human activities. Negative medical and social consequences are the factors that seriously limit the society's ability to guarantee citizens' rights to life and security, to professional education, as well as to protect them from criminal attacks from persons abusing alcohol. In order to assess effectiveness of alcohol policy, as well as methods of treatment and prevention, services and effectiveness of treatments, it is essential to have a wide range of information and data that reflect various aspects of the problem, including the results that can be delivered by a country-wide population survey.

On December 30, 2009 Government of the Russian Federation has approved The Concept to Implement the State Policy to Reduce the Abuse of Alcohol Beverages and to Prevent Alcohol Abuse Among the Population of the Russian Federation for the period up to 2020.

Apart from money spent on drinks, heavy drinkers may suffer other economic problems such as lower wages and lost employment opportunities, increased medical and legal expenses. **Heavy drinking** at work may reduce productivity. Heavy drinking or alcohol abuse may lead to unemployment and unemployment may lead to increased drinking. That is why tackling the issues related to the harmful use of Alcohol, and improving the health status of population is very important. The right Alcohol policies will lead to a healthier work force; this will lead to improved productivity, and hence to the opportunity to create a still healthier more productive workplace. More income will remove barriers to access to health care, social services and affordable housing and as a result will have impact on social exclusion. The need for a monitoring system and analysis of changes in alcohol abuse in Russian Federation at national, as well as at regional levels has been mentioned among priorities in achieving the objectives of the Concept.

This proposed project is aiming also to address the Priority Area (PA) Health – Improving and promoting people’s health, including its social aspects, of the EUSBSR strategy. It is already listed in the action plan of the strategy (COM(2009) 248}{SEC(2009) 702}{SEC(2009) 703}, February 2013) as the **Potential flagship project – “Implementation and further development of a standardized, comparative methodology for population survey of drinking habits and alcohol related harm in BSR/ND countries”**.

The project is innovative and provides benefit in that it uses a similar methodology to standardize comparative surveys on alcohol use and patterns of drinking. The project intends also to contribute to the health and wellbeing of the Russian and EU citizens and to reduce costs to health systems and the wider economy. The vision behind Project is that evidence based policies will improve the health and social outcomes for individuals, families and communities, with considerably reduced morbidity and mortality due to harmful use of alcohol and their ensuring social consequences. It is envisaged that the results of the project will promote and support local, regional and global actions to prevent and reduce the harmful use of Alcohol

Finally, this project will bring Russian Federation to become the part of the EU Joint Action on Reducing Alcohol Related Harm (RARHA). RARHA, funded by the European Union under the second EU Health Programme, is a 3 years action aiming at supporting Member States to take forward work on common priorities in line with the EU Alcohol Strategy and strengthen Member States’ capacity to address and reduce the harm associated with alcohol. Member States will be mobilised to take-up of common survey methodology to obtain comparable data for monitoring progress in reducing alcohol related harm at national and EU level and for benchmarking national developments against wider trends. This action will be implemented under the working package 4, where the ASA EG is selected as a collaborative partner. That means that all activities implemented in Russian Federation will be closely coordinated with RARHA bodies. The Russian representatives will be invited and participate in the working meetings of the group responsible for the implementation of SMART survey. It needs to be taken into account that one of the biggest added values of the NDPHS is participation of Russia and Norway, which are not an EU member Countries, but play an significant role in the implementation of Global

Alcohol Strategy. The involvement of Russian Federation and analysing alcohol situation in this country will have vital role for the prevention of harmful use of alcohol both for Russia and for the EU.