

KAP SURVEY. KNOWLEDGE, ATTITUDES AND PRACTICES REGARDING TOBACCO CONSUMPTION PHASE I – IV

June 2017



ABSTRACT

This survey report describes the level of knowledge, attitudes and practices regarding habits related to tobacco smoking among the population of the Republic of Moldova and compares data with previous surveys from 2012, 2014, and 2015. The data of the KAP survey on tobacco consumption were collected via the face-to-face interview on a sample of 1031 respondents aged between 16-55 years old in the period of 28 May 2017 – 28 June 2017. The main objectives of the survey were: (i) to determine the level of knowledge and perception of the negative impact of smoking and second-hand smoke on health; (ii) to identify information sources regarding the harm of smoking; and (iii) to identify the prevalence of tobacco use. The understanding of the level of knowledge, attitudes and practices of tobacco consumption allows diagnosing the given problem and planning efficient actions adjusted to the needs of the studied population groups.

KEYWORDS

KNOWLEDGE, ATTITUDES, PRACTICES
SMOKING
TOBACCO
REPUBLIC OF MOLDOVA

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ABBREVIATIONS

This is a short list of abbreviations used in the report:

NGO	- Nongovernmental organizations
PAPI	- Paper Assisted Personal Interview
SHS	- Secondhand Smoke
KAP	- Knowledge Attitudes Practices
SPSS	- Statistical Package for the Social Sciences
F	- Smoker
Ex-F	- Ex-smoker
NF	- Non-smoker
T	- Total

EXECUTIVE SUMMARY

This survey was carried out with the support of the WHO Regional Office for Europe and the Ministry of Health, Labour and Social Protection within the project “Support for the consolidation of governing and policy dialogue in the health sector”, financed by the Swiss Agency for Development and Cooperation. The opinions expressed in this publication do not necessarily reflect the point of view, decisions or policies of the World Health Organization, Ministry of Health, Labour and Social Protection and of the Swiss Agency for Development and Cooperation.

The report presents data collected as a result of the survey carried out on a sample of 1531 respondents from rural and urban environment, on the territory of the Republic of Moldova, in the period May – June 2017. The data were collected via the CAPI face to face method, using the method of probabilistic sampling with mechanical step. The report presents the key results of this survey.

Summary

This report presents data collected on a sample of 1531 respondents aged between 16-69 years old, from urban and rural environments from the Republic of Moldova, in the period May-June 2017 and is divided into two parts. The first part (chapters I-IV) describe comparative data with previous surveys on Knowledge, Attitudes and Practices regarding tobacco consumption (from 2012, 2014, 2015) on a sample of 1031 respondents aged between 16-55 years old. In the second part (Annex I) are presented the data regarding tobacco consumption distributed by age and sex similarly to a STEPS survey. For this analysis, persons aged between 18-69 years were selected from the sample.

The profile of respondents for the age group 16-55 years old is presented in table i.1.

The data were collected via the CAPI method, face-to-face, using the method of probabilistic sampling per step. The report presents the key-results of this study.

This study was carried out by the company *Magenta Consulting*.

Knowledge and attitudes

- Exposure of non-smokers to cigarette smoke is considered harmful by a larger share of ex-smokers (91%) and non-smokers (92%) in contrast to smokers (86%).
- The majority of respondents, regardless of status, believe that smoking causes serious health issues. Nevertheless, their share is decreasing compared to the results of surveys from 2014 and 2015.
- Similar to the surveys from previous years, in 2017, most of the respondents (96%) know that smoking causes lung cancer. Regarding heart diseases caused by smoking, a smaller share of respondents – 77% know about it, compared to 87% in 2015. The same tendency is in the case of infertility. Among smokers, the level of knowledge about the impact of tobacco on health is lower, compared to the segments of ex-smokers and non-smokers.
- An increase of 5 p.p. is registered in the share of smokers who are alarmed by the effects of smoking on their health.
- The majority of smokers (76%) do not know there is a smoking quitline they can call in order to receive help in quitting smoking.
- Slightly over 2/3 of the respondents support the sale of cigarettes only in specialized stores (70%) and half (54%) support the sale of tobacco products in kiosks.
- The majority of employed respondents (83%) mentioned that it is very important or important to ensure a work place free of tobacco smoke. For women it is very important to ensure this work condition (by approximately 10 p.p. more).
- The great majority of respondents (88%) consider that the employers, who allow smoking in the rooms their employees work in, cause damage to their health.
- Non-smokers and ex-smokers, 73% and 65% accordingly, support the action to gradually increase excises for cigarettes.
- 3 of 4 respondents believe that it would be simple for them to find cigarettes if they wanted it. The respondents from the urban environment declare an availability of cigarettes in shops 10 p.p. higher compared to the inhabitants of villages.
- 58% of the respondents who visit restaurants consider that after forbidding smoking in restaurants and bars in Moldova, visiting them has become more pleasant. Almost twice as large is the rate of non-smokers (71%) who stated the same, compared to smokers (37%).
- During the last year, 79% of respondents noticed advertising or information about the harm of smoking.
- Most of the respondents got informed on television – 81%. 56% of smokers got informed about the damages of smoking from the packets of cigarettes, this being an important source of information.
- Being exposed to an informative message about the harm of smoking, 47% of respondents felt motivated to quit smoking (6% were strongly motivated, and 41% were somewhat motivated to quit smoking).

Giving up smoking

- 25% of respondents smoke daily, compared to 22% registered in 2015, and other 2% smoke rarer than daily.
- Compared to the previous years, a decrease of the share of respondents who smoke fewer cigarettes (up to 10 cigarettes) a day is recorded, as well as of those who smoke more than 20 cigarettes a day. Data show a higher share of respondents who smoke 11-20 cigarettes a day – 61%. In the context of the number of cigarettes smoked per day, 74% of respondents mentioned they smoked as many cigarettes a day as they did 30 days ago.
- The share of ex-smokers is 13% of the total sample (+3 p.p. compared to 2015).
- In 2017, about a third of smokers discussed often about the harm of smoking on health, almost the same share (29%) thought often of giving up smoking.
- More than a half of smokers (58%) mentioned that the members of their household tried to motivate them to quit smoking, and 27% declared a medical worker tried to motivate them to quit smoking.
- During the last 30 days, 26% of smokers thought often of the harm smoking causes to their own health, and of the harm caused to those around – 3 p.p. less.
 - The number of respondents who tried to quit smoking during the last 30 days is decreasing from 2014 to the present moment. Thus, approximately one respondent out of five, during the last 30 days tried to quit smoking.
- In general, 40% of the interviewed smokers have the intention to quit smoking.
- 41% of respondents believe it would be easier to quit smoking if the compulsory medical insurance policy would offer free access to nicotine replacement therapy.

INTRODUCTION

INTRODUCTION

i.1 Goal and objectives of the survey

The main **goal** of the survey is to determine the level of knowledge, attitudes and practices regarding habits related to smoking among the population of the Republic of Moldova.

The main objectives of the survey are:

- Determining the level of knowledge and perception of the negative impact of smoking and second-hand smoke on health;
- Identification of information sources regarding the harm of smoking;
- Identification of the prevalence of tobacco use.

i.2 Applied methodology

This survey was carried out according to the KAP surveys methodology (knowledge, attitudes and practices). It offers us a diagnosis of the level of knowledge of the population – regarding the discussed subject (harms of smoking), attitudes – regarding tobacco consumption and practices of the population regarding tobacco consumption. The understanding of the level of KAP allows diagnosing the given problem and planning efficient actions adjusted to the needs of the studied population groups.

This approach proved its theoretical and methodological efficiency in similar surveys.

The survey was based on primary quantitative data.

i.2.1 Interviewing the population. Sampling plan

Within the survey were interviewed 1531 respondents aged between 16-69 years old, on the entire territory of the republic excepting Transnistria. This number of interviews ensures a margin of error of $\pm 2\%$ at a level of confidence of 95%. The data were collected in the period 28.05.2017 – 28.06.2017.

Source of sampling data: National Bureau of Statistics of the Republic of Moldova.

Characteristics of the applied sample: probabilistic sampling with step without applying quotas.

At the first level, the districts of the republic were combined in groups and out of these groups were randomly extracted the localities in which interviews were carried out, thus giving the possibility to all localities to participate in the survey. The number of performed interviews in each group depended on the number of inhabitants and the number of localities (by size).

Randomization on 3 levels was applied, taking into consideration the group of districts, households and respondents:

1. Locality – was selected randomly for each level as described above and using a table of random numbers;
2. Household – the selection of the household was made taking into account the starting point and mechanical step;

Description of the mechanical step in cities:

Were made up lists with the names of streets and randomly were chosen the streets. For carrying out the interviews, the number of questionnaires to be filled in on various streets was determined from the office. When reaching the block where they are to begin applying the questionnaire, the operator chooses the first apartment the dweller of which will participate in the survey. In order to find out the apartment from which to start interviewing, the operator counts the apartments in the block, afterwards verifies in a table of random figures the number of the apartment they need to begin with. This procedure is performed only to determine the first apartment. Further the rule “+3” is applied (for example if the first respondent from a block lives in the apartment with the number 50, then the following respondent must be the dweller from the apartment with the number 53, according to rule “+3”).

Description of mechanical step in villages and smaller towns:

In small localities, the starting point for the operator teams is the building of a public institution: mayoralty, church, school, post office. The first interview is carried out in the first household on the left from the starting point (building of the mayoralty, school, etc.). Further is applied the rule "+3", i.e. in order to carry out the next interview, the operator selects the third house from the first household which participated in the survey.

3. Person/respondent – for selecting the respondent was applied the method of the last birthday. Each respondent listed the members of the household and their age. Also, the respondent named the birth dates of the members of the household with ages between 16-69 years old. After that, the operator invited to participate in the study the person from the list who had the most recent birthday. If the respective person was not available at that moment, the operator returned at least twice to the same household in order to complete the questionnaire. If the person who celebrated last their birthday was abroad, the questionnaire was realized with the next person from the list, who had the most recent birthday.

i.2.2 Questionnaire

The used questionnaire was a complex one, which included both closed and open questions. It was offered by the client, adapted and tested by the research team of Magenta Consulting according to the objectives of the research.

The questionnaire was translated into Romanian and Russian, the interview was carried out in the language requested by the respondent.

i.2.3 Pilot-survey

The pilot-survey had as a goal the validation of questionnaires. Thus, the questionnaire was pre-tested on a sample of 10 persons from rural and urban environment, 7 – in Romanian and 3 – in Russian.

i.2.4 Interviewing and data quality

Interviews were carried out by the *Magenta Consulting* operator team. At the beginning of the project, the operator team was informed about the survey subject, its objectives and data analysis method. For ensuring data quality, 40% of the questionnaires were verified on the phone. The questions asked during verification were selected randomly.

i.2.5 Data analysis

Data interpretation was performed with the help of the specialized program SPSS 18, with descriptive and multicriterial statistic interpretation.

i.3 Sample characteristics

The interviews were carried out face to face by a team of operators, based on the structured questionnaires. All operators were trained and the questionnaires were pre-tested. Sample segmenting based on residence environment (rural/urban), republic region (north/centre/south), age and gender was performed according to the data offered by the National Bureau of Statistics.

i.3 Limits and barriers

During the realization of this survey no major obstacles were encountered.

Table i.1: General sample, %

[illegible]

CHAPTER I:

KNOWLEDGE AND

ATTITUDES

This chapter presents information regarding the knowledge and attitudes of respondents related to the harms of smoking.

CHAPTER I: KNOWLEDGE AND ATTITUDES

This chapter presents information regarding the knowledge and attitudes of respondents related to the harms of smoking.

1.1 Knowledge

The harm of exposure to second hand smoke for non-smokers is recognized by the great majority of ex-smoker and non-smoker respondents, constituting 91% and 92% accordingly. Smokers agree with this statement to a rate of 5 p.p. less.

Also, the majority of respondents (95% non-smokers) agreed with the statement: *"smokers should not expose those around them to cigarette smoke"*, and smokers agree to a rate of 85%.

The harm of smoking on health is recognized by the majority of respondents, but it is perceived differently by smokers. Thus, 35% of smokers consider that smoking is not very harmful, because many smokers live until old age. Among the ex-smokers and non-smokers, the share of respondents who agree with this statement is lower by 19 p.p. and by 17 p.p. accordingly.

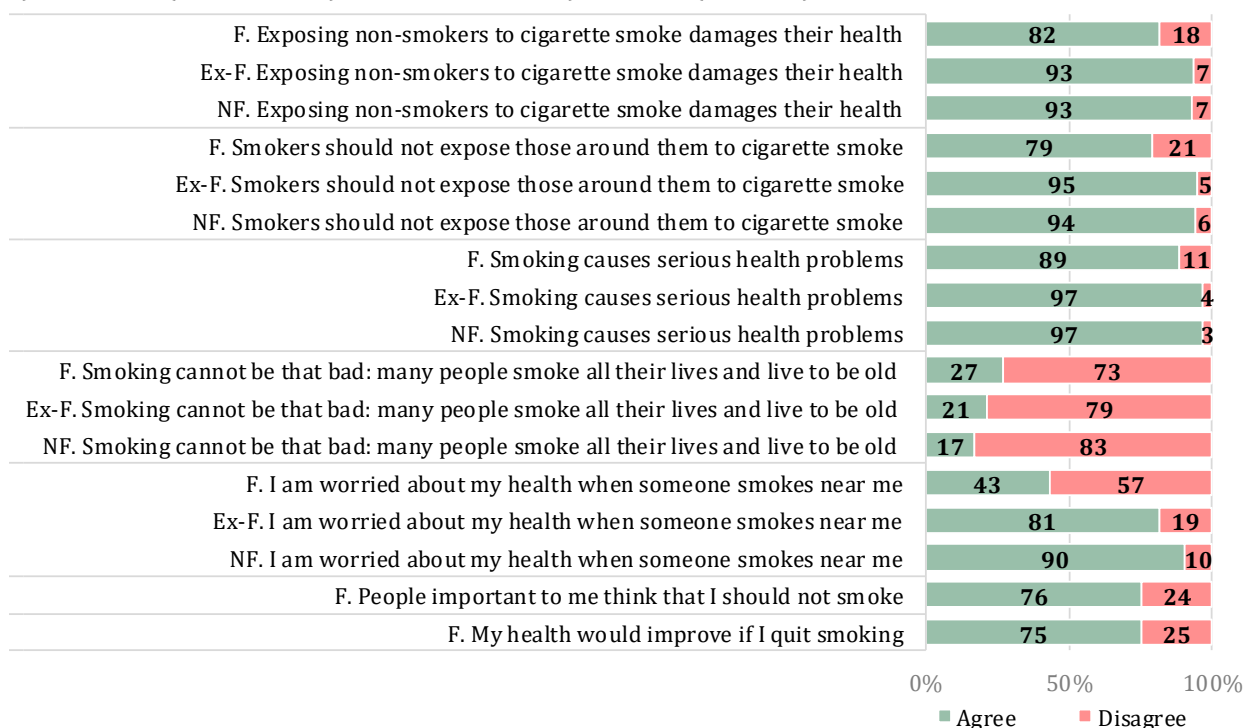
The majority of non-smoking respondents is worried when someone around is smoking. The share of smokers is 36 p.p. lower and constitutes 53%.

77% and 70% of smokers mentioned they agreed with the statements *"people I care about consider I should not smoke"* and *"my health would improve if I quit smoking"*.

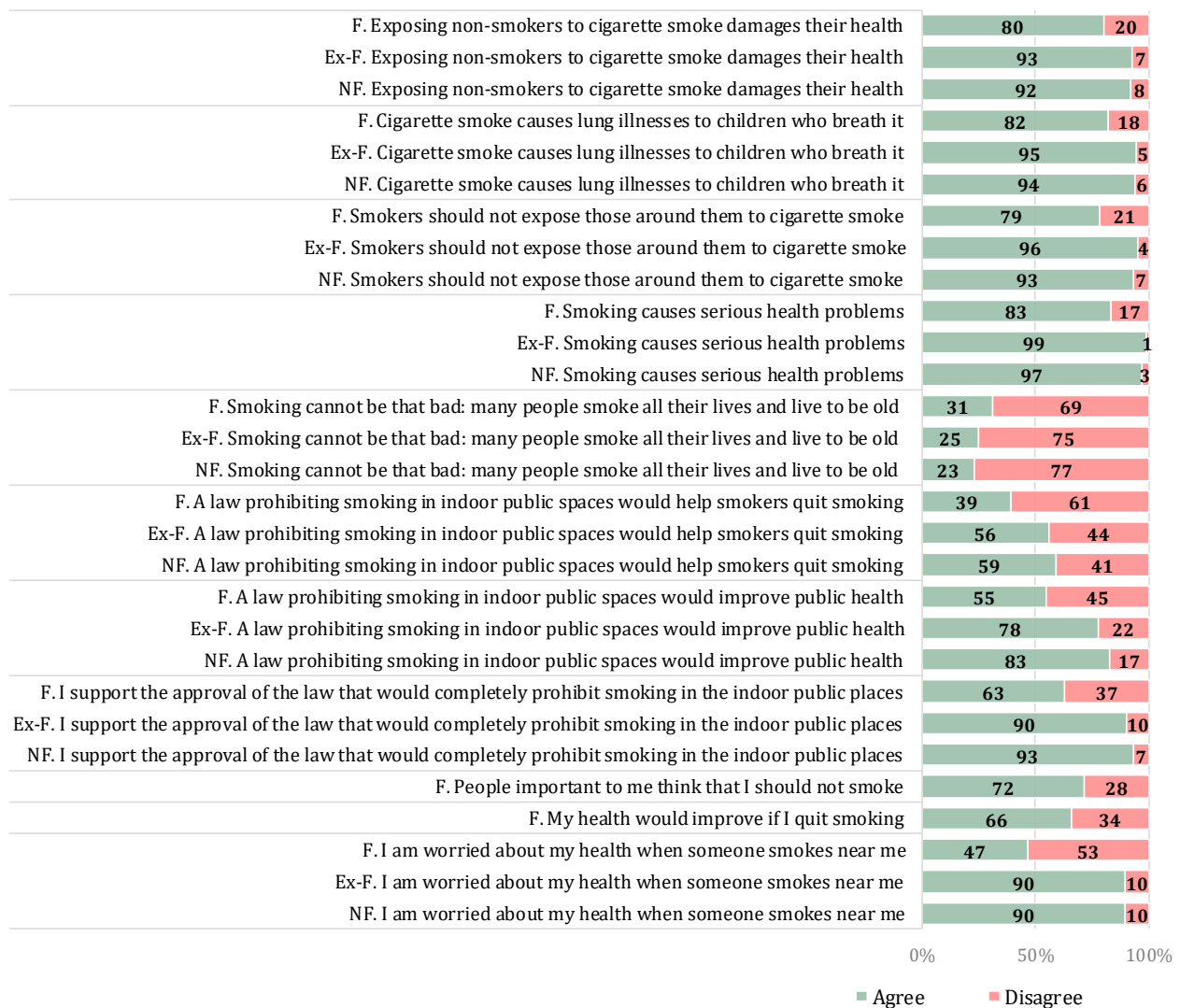
Related to the statements expressing the harm of smoking, to a greater extent agreement was expressed by women, as well as inhabitants of rural areas and those from the north region of the republic. However, regarding the statements: *"People I care about consider I should not smoke"*, *"My health would improve if I quit smoking"*, *"Smoking cannot be very harmful, because many people smoke..."* was registered a larger share among the men.

Figure 1: (IV1) Indicate to what extent do you agree or disagree with each statement?, %

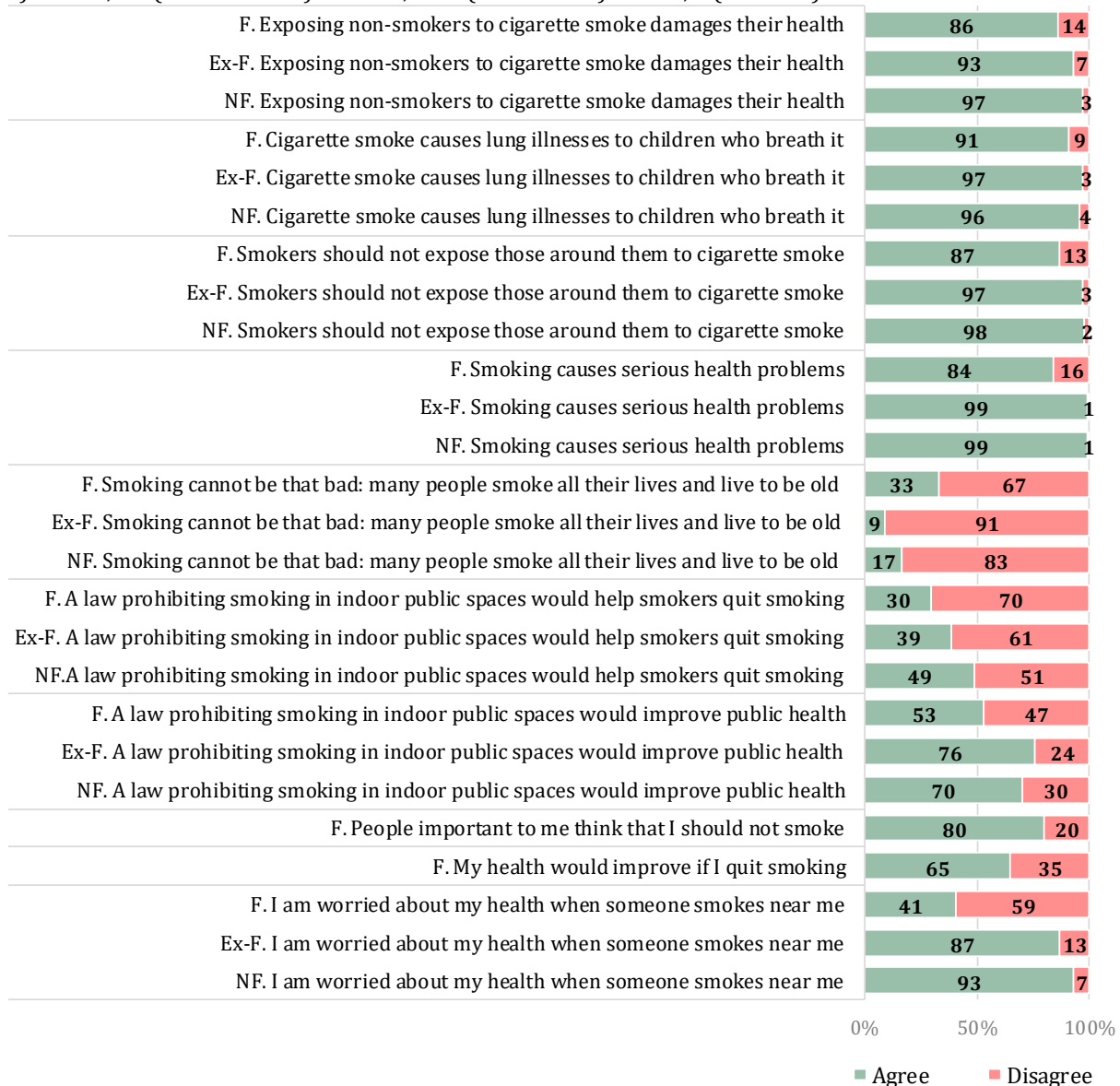
a) 2017, NF (Non-smokers) N=612, Ex-smokers) N=138, F (Smokers) N=281



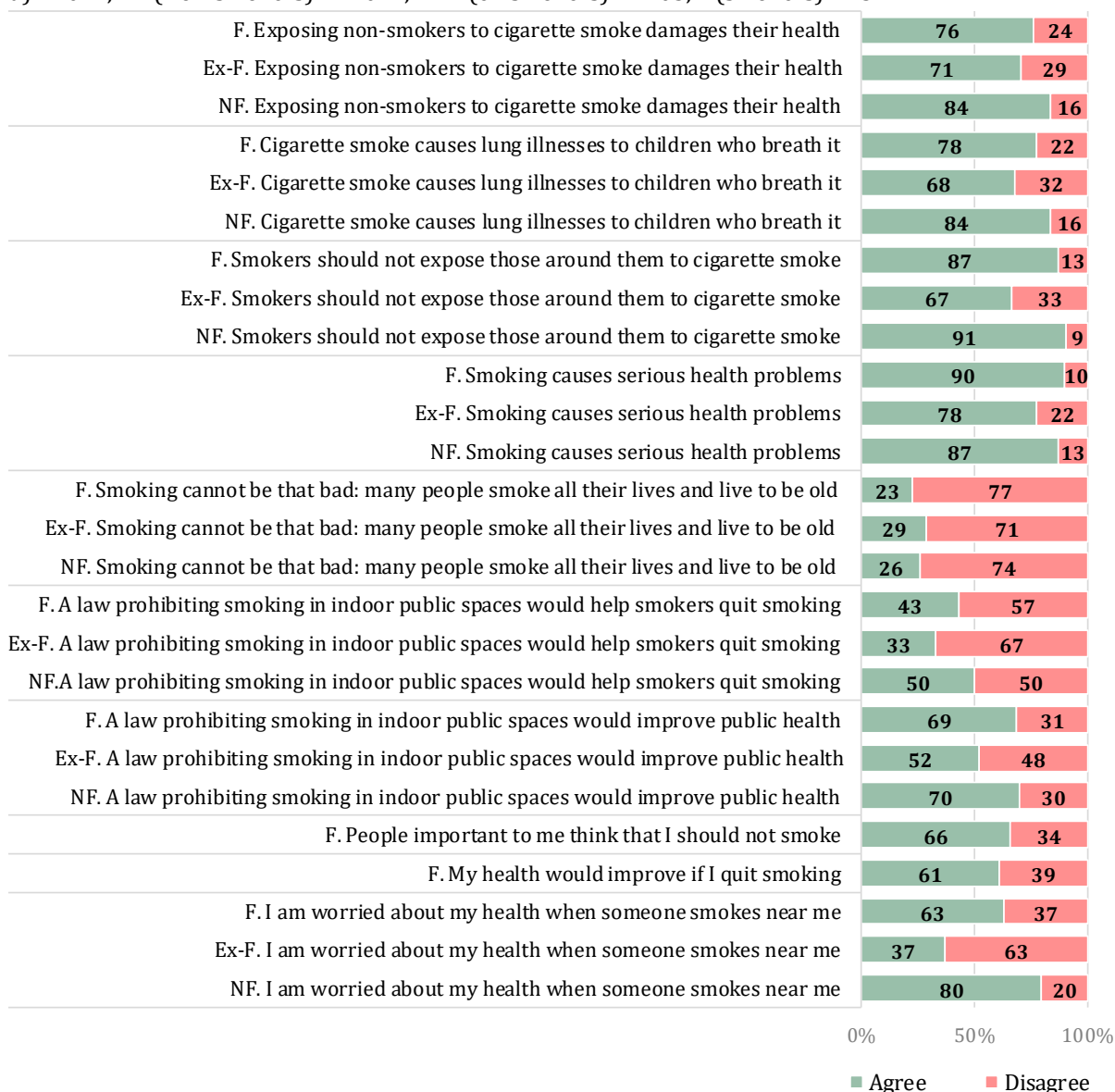
b) 2015, NF (Non-smokers) N=971, Ex-F (Ex-smokers) N=156, F (Smokers) N=375



c) 2014, NF (Non-smokers) N=1046, Ex-F (ex-smokers) N=119, F (smokers) N=340



d) 2012, NF (Non-smokers) N=1022, Ex-F (ex-smokers) N=105, F (smokers) N=374



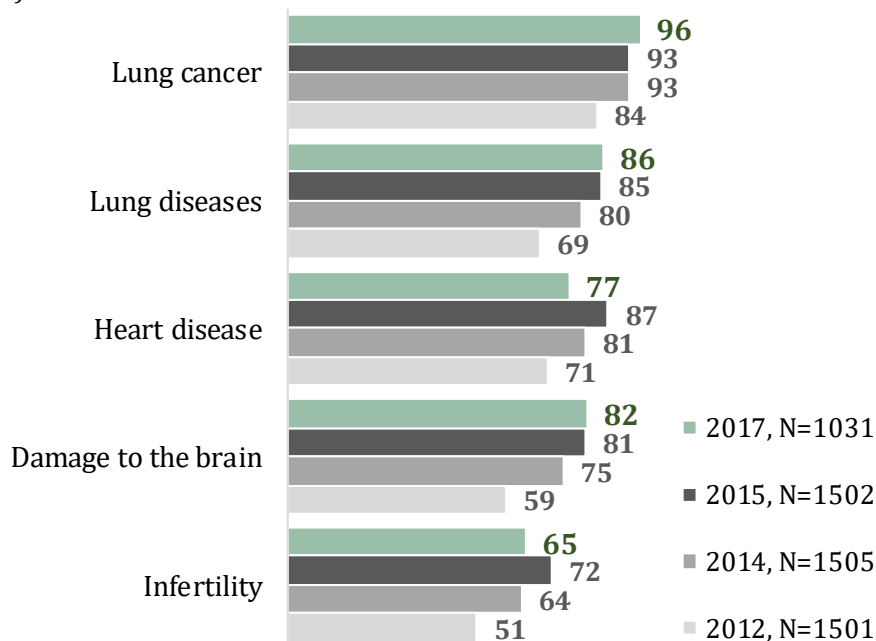
Out of the effects caused by smoking, just like in previous years, most of the respondents know about lung cancer. In this context, 96% of respondents, with 3 p.p. less than in 2015 and 2014, mentioned they know about this disease caused by smoking. 86% of respondents know about other lung diseases, 1 p.p. more compared to the results of the survey from 2015. A smaller number of respondents, compared to 2015 and 2014, know about the heart diseases and brain conditions.

Based on the status of the respondents (current smoker, ex-smoker and non-smoker), is noticed a difference regarding their knowledge about smoking conditions on health. Thus, 71% of current smokers know about the effects of smoking on the brain, while 78% of respondents who smoked in the past and 79% of those who never smoked, know about this condition. Regarding fertility, more than a half of the current smokers (58%) know about the effects of smoking on it. Among ex-smokers and respondents who never smoked, the share is 7 p.p. and 10 p.p. higher.

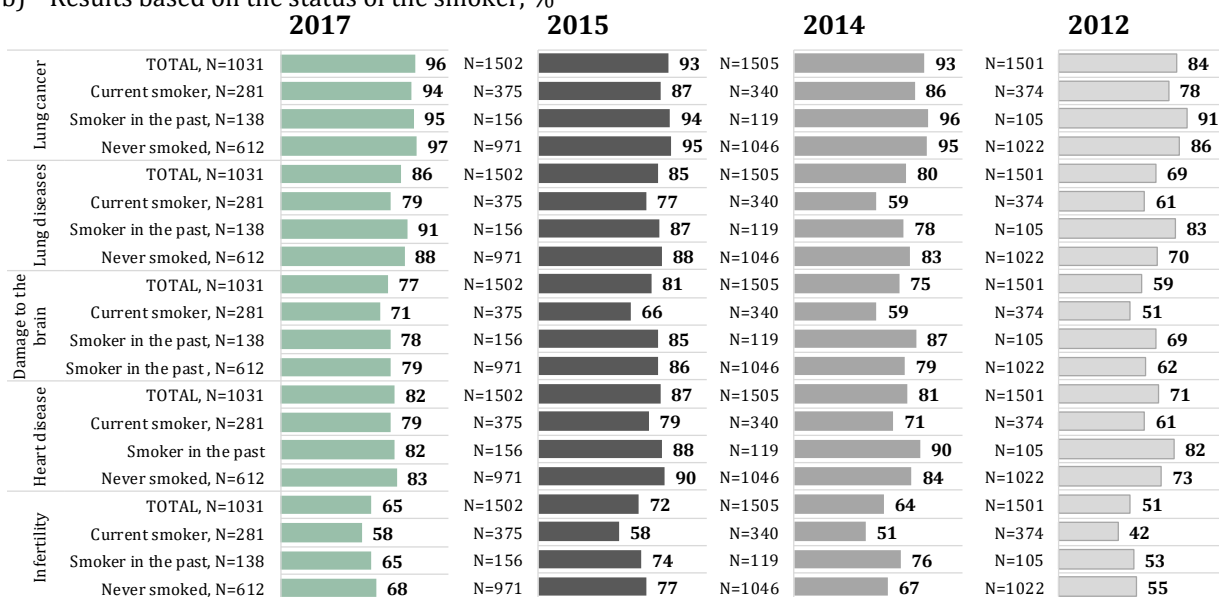
In general, in the survey from the current year, there were not registered significant differences regarding the knowledge of respondents related to diseases caused by smoking, with the exception of those from the south region, who registered a share with 10 p.p. smaller referring to all of the diseases caused by tobacco consumption, excepting lung cancer.

Figure 2: (IV2) From what you know, smoking causes ...?, %

a) TOTAL 2012 - 2017

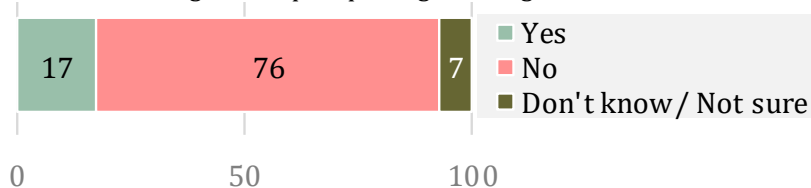


b) Results based on the status of the smoker, %



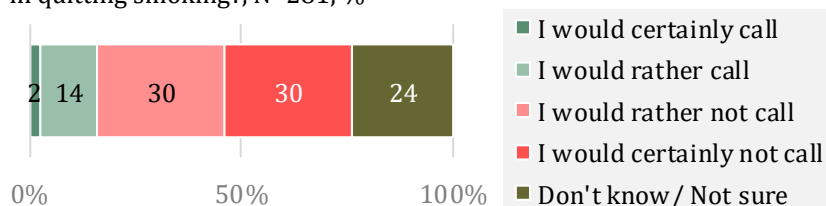
The great majority of smokers (76%) do not know there is a smoking quitline they may call in order to benefit for help in quitting smoking. At the same time, 8% (or 4 respondents) of the respondents who know about the quitline have ever called. Women and respondents from the north of the republic are informed about the Green Line to a greater extent (by 8 p.p. more than the total sample).

Figure 3: (II10) Do you know there is the Green Line 0 800 10001 (free phone line) which offers information about counselling and help in quitting smoking?, N=281, %



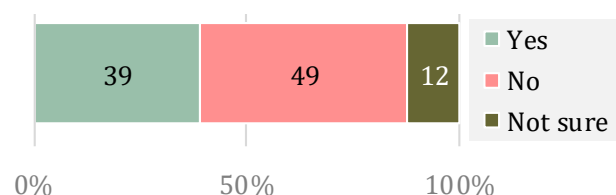
16% of the respondents who smoke are willing to call the hotline in case of need, and 60% - no. 24% were not certain if they would ever call or not the hotline.

Figure 4: (II14) Would you call the Green Line (0 800 10001) offering information about counselling and help in quitting smoking?, N=281, %



39% of the respondents know that the law offers the right to the National Health Insurance Company to sue the employers and legal persons who allowed smoking in closed spaces at the work place, in order to compensate the expenses related to the treatment of ill persons, whose illness was caused by exposure to tobacco smoke. About the law in question, to a greater extent are informed the respondents from the centre and south of the republic.

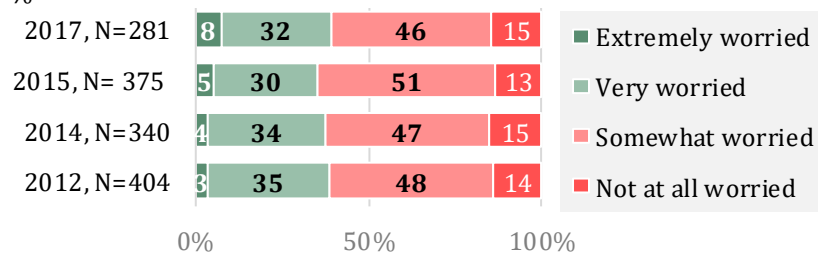
Figure 31: (V10). Do you know that presently the law offers rights to the National Health Insurance Company to sue the employers and legal persons who allowed smoking in closed spaces at the work place, in order to compensate the expenses related to the treatment of ill persons, whose illness was caused by exposure to tobacco smoke?, N=1031, %



1.2 Attitudes

In 2017 is registered an increase by 5 p.p. of the share of smokers who are worried that smoking will affect their health in the future, compared to the results from 2015 (40% - in 2017, compared to 35% - in 2015). Men are worried about the fact that smoking will affect their health by 5 p.p. more than women.

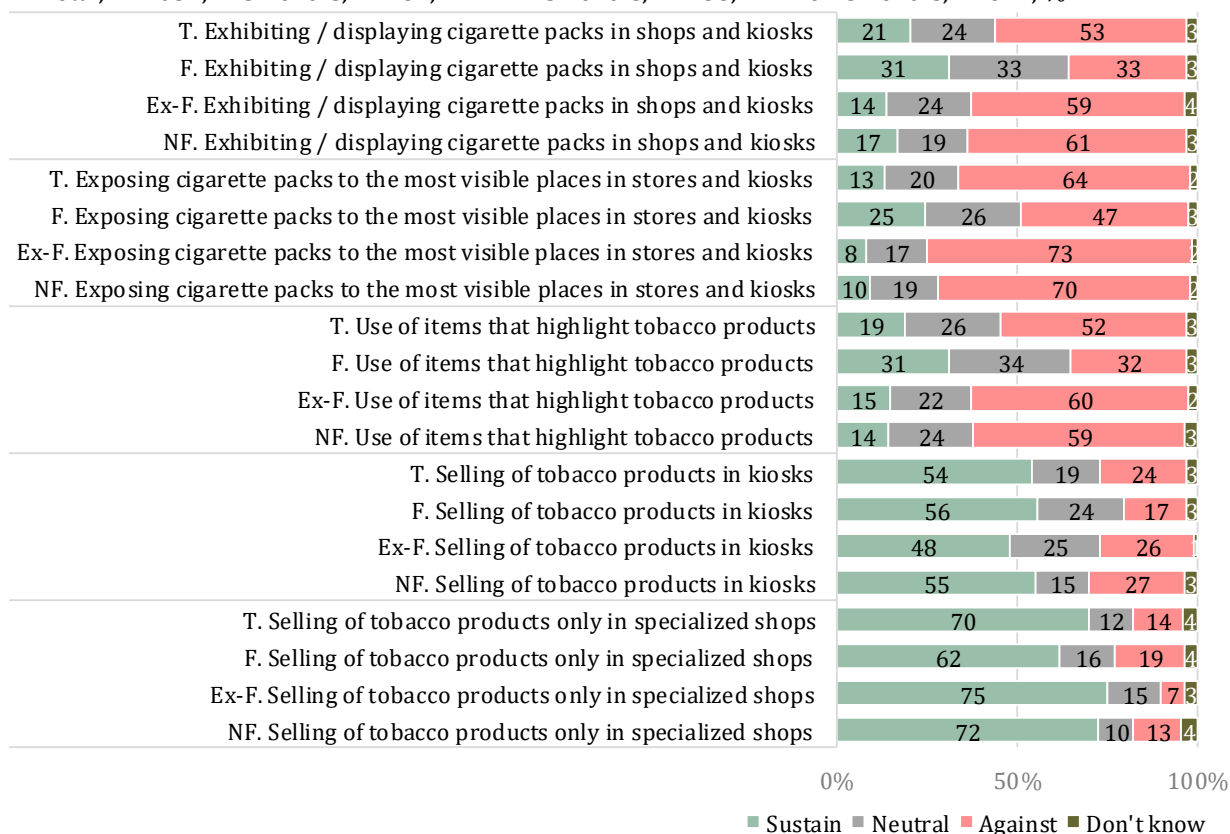
Figure 5: (IV3) How worried are you that smoking will affect your health in the future? (question for smokers), %



More than a half of the respondents are against displaying cigarette packs in the most visible places in shops and kiosks (64%), the use of elements highlighting tobacco products (53%) and displaying in front windows of cigarette packs in shops and kiosks (53%). For all listed measures, the share of those who support them is higher among smokers. Also, were registered higher shares of supporters of these activities among men, inhabitants from urban environment and those from the south of the country.

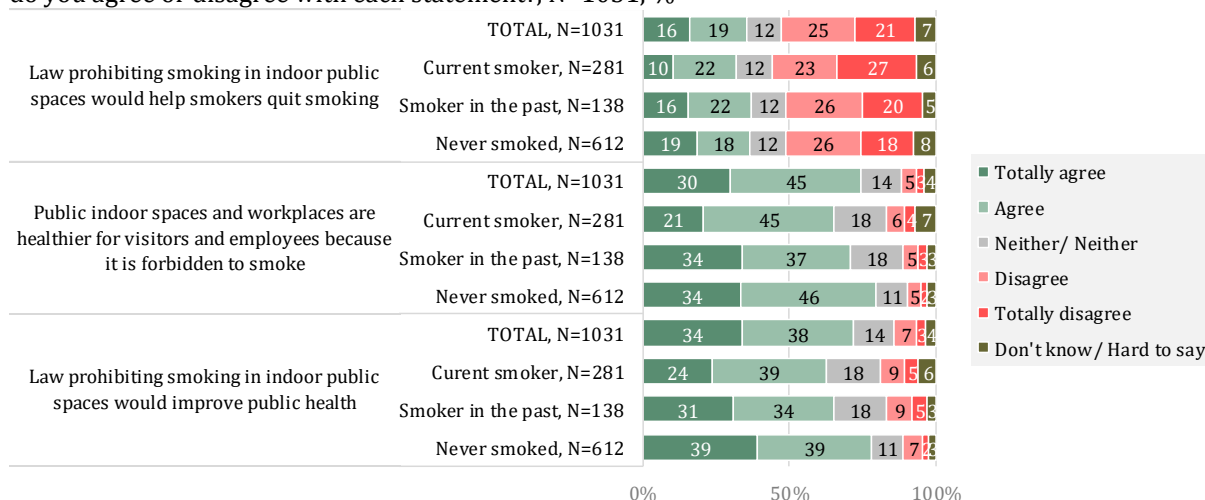
Referring to the place for selling tobacco products, a higher share of respondents supports the sale of cigarettes only in specialized shops – 70%. At the same time, approximately each second respondent (54%) supports the sale of tobacco products in kiosks. The share of non-smokers supporting the sale of tobacco products only in specialized shops is higher than that of smokers.

Figure 6: (III4) On a scale from 1 to 5, where 1 – totally against and 5 – totally agree, how much do you support, T=Total, N=1031, F=Smokers, N=281, Ex-F=Ex-smokers, N=138, NF=Non-smokers, N=612, %



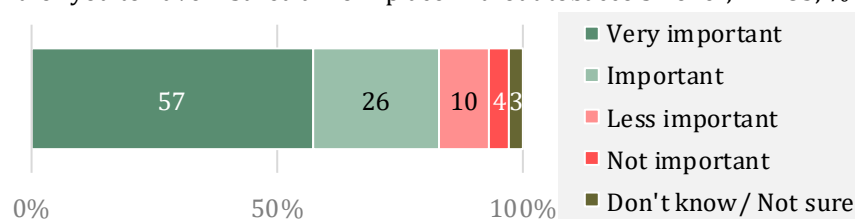
Each fourth respondent believes that the law prohibiting smoking in closed public spaces helped smokers to quit smoking. To a greater rate, respondents think that the smoking ban law which prohibits smoking in closed public spaces will improve population health (72%).

Figure 7: (V16). I am going to read a few statements about smoking and cigarette smoke. Indicate to what extent do you agree or disagree with each statement?, N=1031, %



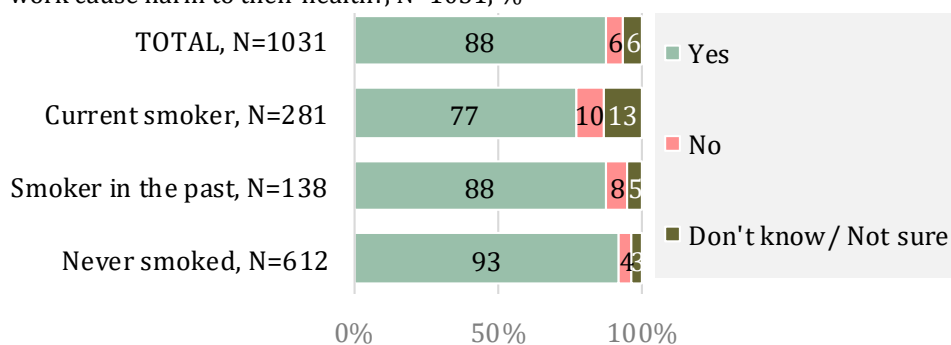
More than 2/3 of the employed respondents (83%) mentioned it is very important or important to ensure a work place free of tobacco smoke. For women it is very important to have this work condition ensured by 10 p.p. more compared to the results obtained per total sample.

Figure 8: (V8). The law regarding tobacco control prohibits smoking at closed work places. How important is it for you to have insured a work place without tobacco smoke?, N=485, %



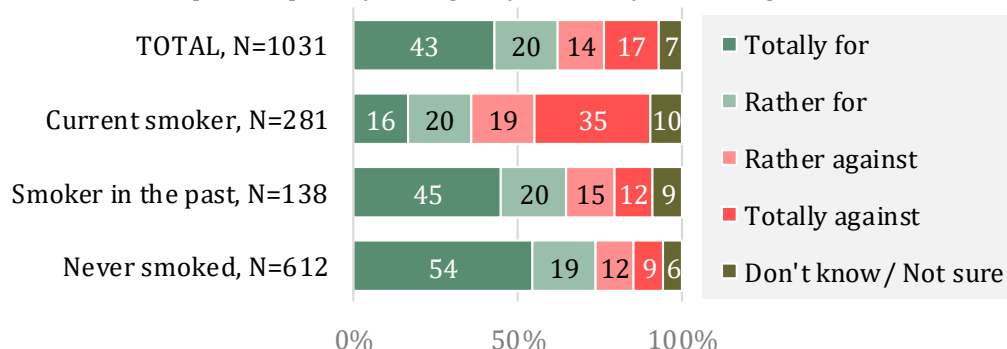
The majority of respondents (88%) consider that the employers, who allow smoking in the rooms where their employees work, cause harm to their health.

Figure 9: (V9) Do you consider that the employers who allow smoking in the rooms where their employees work cause harm to their health?, N=1031, %



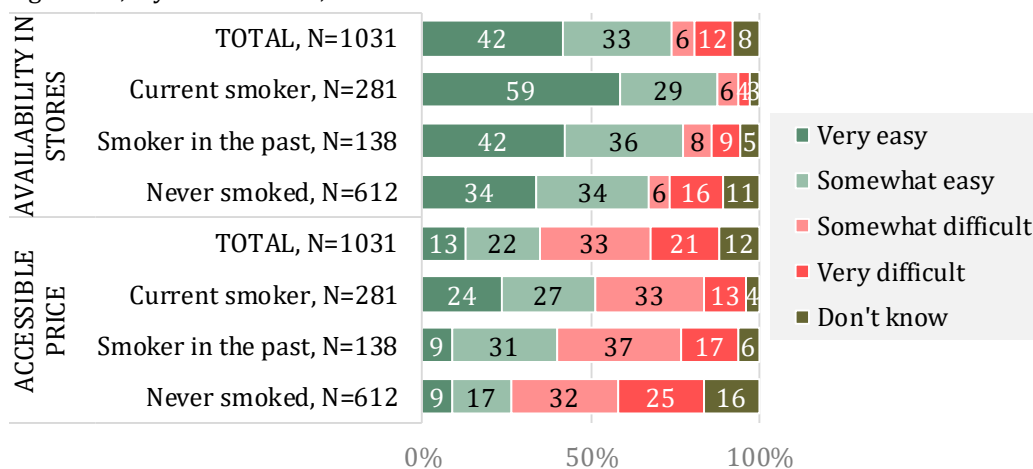
Non-smokers and ex-smokers, to a rate of 73% and 65% accordingly, support the action of gradual increase of excise duties on cigarettes. At the same time, the share of supporters among smokers is a reduced one (36%).

Figure 10: (V17) Moldova has begun the gradual increase of excise duties on cigarettes in order to reduce tobacco consumption, especially among the youth. Are you for or against these actions?, N=1031, %



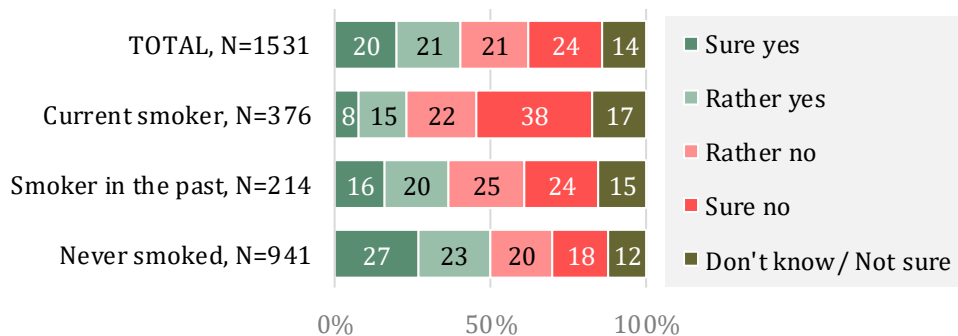
3 of 4 respondents think it would be easy for them to find cigarettes, if they wanted it. Nevertheless, taking into account the price for tobacco products, only 1/3 stated it would be easy for them to obtain cigarettes, if they wanted it. At the same time, it is necessary to mention that availability in shops and accessibility of the price for cigarettes declared by smokers is much higher than for non-smokers (88% and 51%, compared to 68% and 26%). At the same time, respondents from urban environment declare the availability of cigarettes in shops by 10 p.p. higher, compared to inhabitants of villages. In the case of price accessibility, the same tendency is noticed.

Figure 11: (I12) How easy or difficult do you think it would be to buy cigarettes if you wanted it?, %
(I13) Taking into account the price for a cigarette packet, how easy or difficult would it be for you to obtain cigarettes, if you wanted it?, %



The respondents would use the app for reporting violations regarding smoking in forbidden places to a rate of 41%. The share of respondents willing to report violations via the app is larger among the non-smokers. Thus, each second non-smoker would use the app. Smokers, however, would inform the state institutions about the violations they noticed to a rate of 23%.

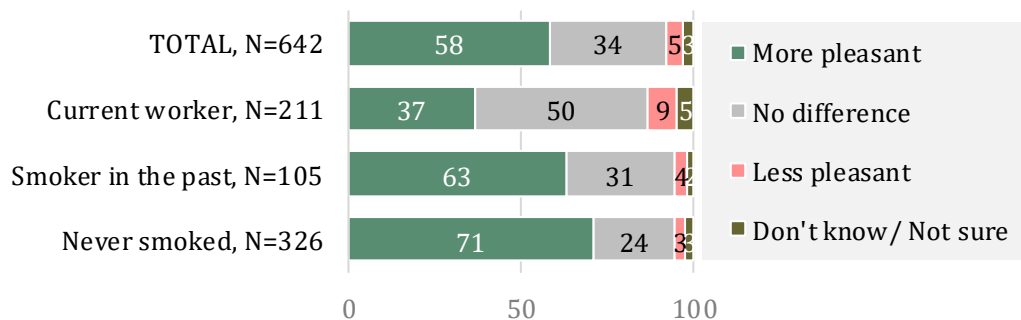
Figure 12: (V18) If the authorities elaborated a program/ app for the mobile phone with the help of which you could inform the state institutions about the violations you noticed related to smoking in forbidden places, would you use this program (would you report the violations)?



60% of the total respondents participating in the survey visited restaurants.

58% of the respondents who visit restaurants think that after prohibiting smoking in restaurants and bars from Moldova, it became more pleasant to visit them. Almost two times higher is the rate of non-smokers (71%) who stated this, compared to smokers (37%). For the visitors of restaurants: women, respondents from urban environment and for the inhabitants of the central region of the republic, visiting restaurants has become more pleasant to a greater extent once it was forbidden to smoke in these venues.

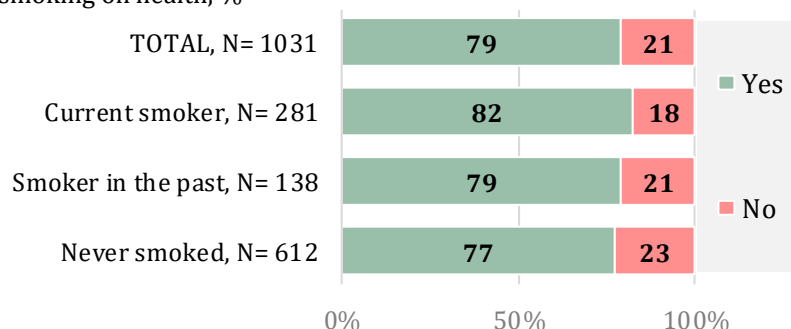
Figure 13: (V14) from the moment smoking was prohibited in restaurants and bars in Moldova, could you say that visiting these places has become more pleasant, less pleasant or does not present any difference for you?



1.3 Assisted notoriety

The majority of respondents (79%) have seen advertising or information about the harm of smoking on health. Based on the status of the respondent, current smokers have seen some advertising or information to a rate of 82% or 3 p.p. and 5 p.p. more compared to ex-smokers and respondents who have never smoked. Men and inhabitants from the south of the republic declare they noticed advertising or information about the harm of smoking on health to a greater extent compared to the other categories of respondents.

Figure 14: (III1) During the last year, did you see/ notice any advertising or information about the harm of smoking on health, %

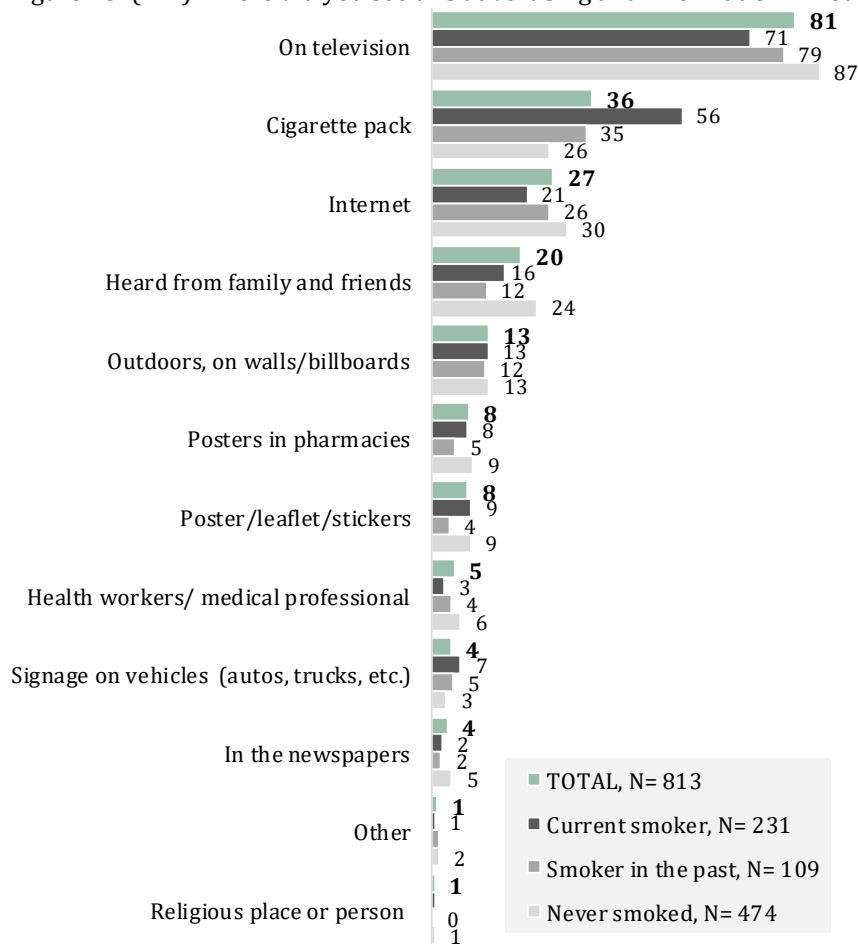


The most frequent source of information regarding the harms of smoking on health is television. 81% of respondents stated they saw such information on TV. A larger share was registered among ex-smokers and non-smokers. In contrast, more than a half of smokers (56%) got informed about the harm of smoking from the cigarette packets, while ex-smokers and non-smokers – to a rate of 35% and 26% accordingly.

27% of the total of respondents got informed from the internet and 20% from friends/ relatives/ acquaintances. The fewer respondents found out about the harm of smoking from a religious source.

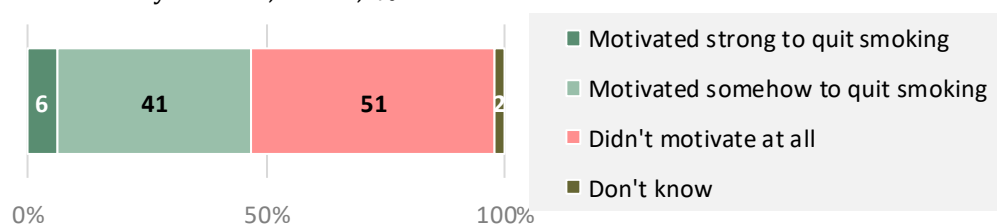
Advertising about the harm of smoking was seen on TV and Internet to a greater extent by women and inhabitants from the south of the republic, but on the cigarette packet it was mostly noticed by men and respondents from the centre of the country.

Figure 15: (III2) Where did you see this advertising and information? In other sources...?, %



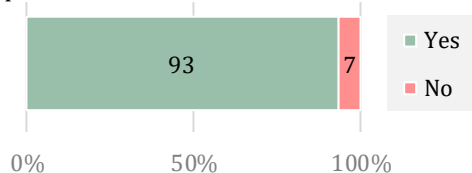
From the total of smokers who saw any information/ advertising about the harm of smoking during the last year, 47% were motivated to quit smoking. At the same time, half of the respondents (51%) was not influenced at all. The advertising about the harm of smoking motivated 20 p.p. more women to quit smoking, compared to men. The inhabitants of the centre and north region, as well as those from the urban environment, are more receptive regarding advertising about the harm of smoking.

Figure 16: (III3) Do you think that this advertising motivated you to a certain extent to quit smoking or it did not influence you at all?, N=231, %



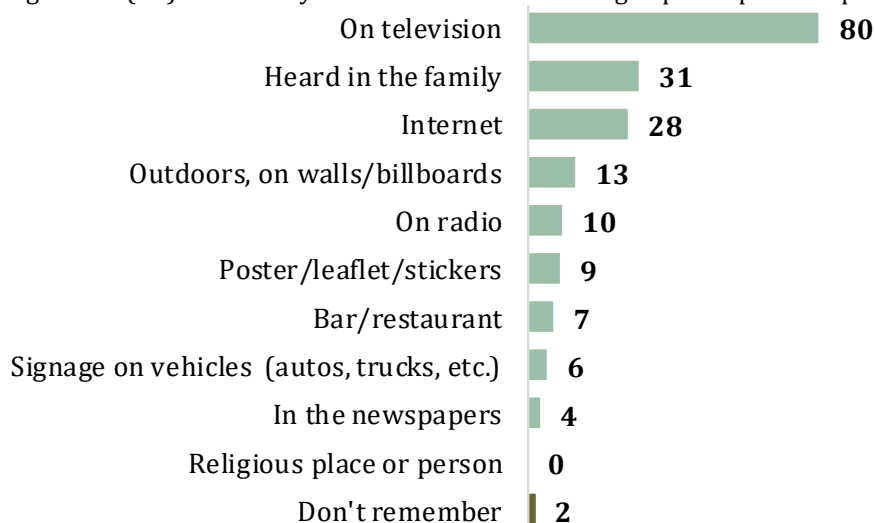
During the last 12 months, the great majority of respondents (93%) were informed that smoking in public places is prohibited.

Figure 17: (V1) During the last 12 months, did you hear/ see about the fact that smoking in public places is prohibited?, N=1031, %



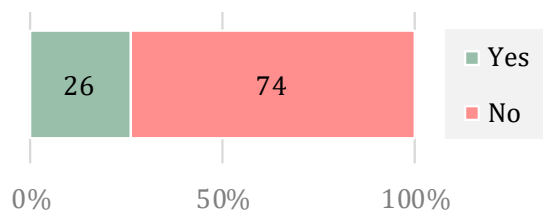
The great majority got informed from TV sources, and 31% and 28% accordingly – in the family and internet.

Figure 18: (V2) Where do you know from that smoking in public places is prohibited?, N=963, %



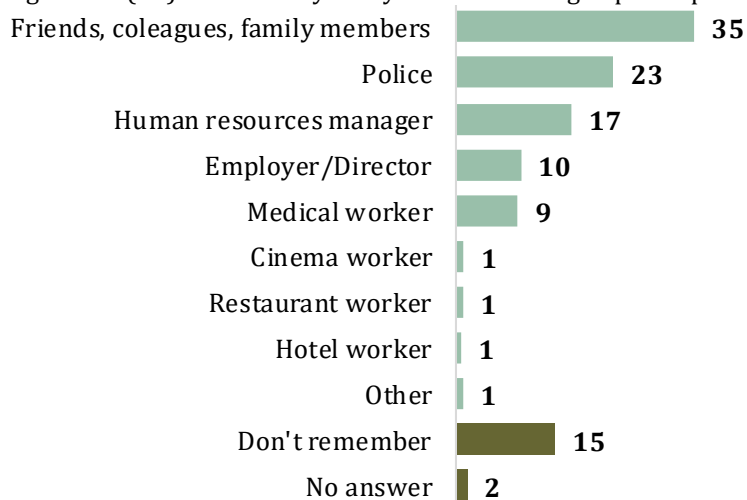
3 of 4 respondents stated that during the last 12 months, nobody spoke about the fact that smoking is prohibited in public places. On this topic have discussed to a greater extent men, persons from urban environment and those from the central region of the country.

Figure 19: (V3) During the last 12 months, did anyone speak to you about the fact that smoking in public places is prohibited?, N=281, %



35% of respondents stated that their friends, colleagues, members of the family spoke to them about the ban of smoking in public places. At the same time, 23% of respondents told that the person who spoke to them about this was a police worker. It is worth mentioning the fact that 17% could not remember, and accordingly did not indicate who told them this.

Figure 20: (V4) Who namely told you that smoking in public places is prohibited?, N=267, %



CHAPTER II:

PRACTICES.

SMOKING CESSATION

The second chapter is dedicated to the evaluation of smoking habits among smokers, as well as their willingness to quit smoking in the near future.

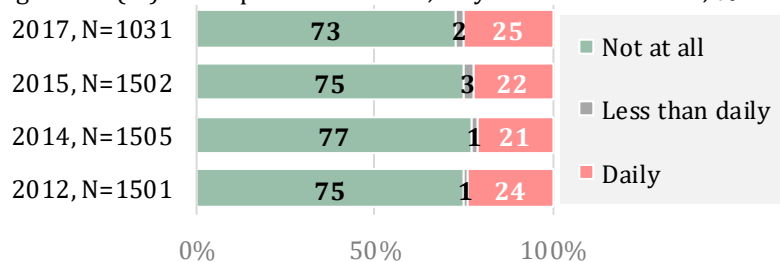
CHAPTER II: PRACTICES. QUITTING SMOKING

The second chapter is dedicated to evaluation of smoking practices, as well as the willingness of respondents to quit smoking.

2.1 Smoking habits

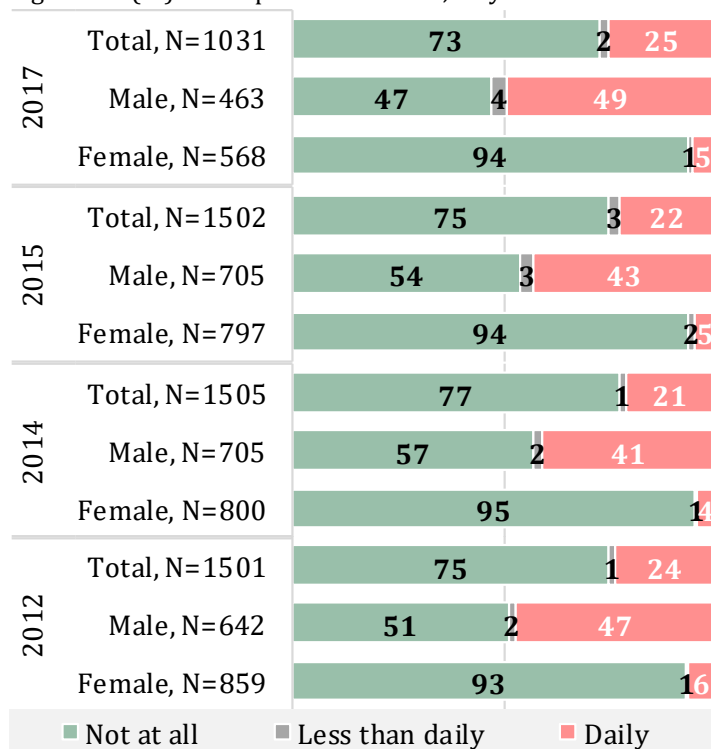
Out of the total interviewed respondents, 27% mentioned they smoked. 2% smoke rarer than daily, and 25% smoke daily. The number of smokers, compared to previous years, has increased. Thus, in 2015 and 2012 there were 25% smokers, and in 2014 – 22%. Compared to the previous year, the number of smokers from the south of the Republic of Moldova increases (+5 p.p.), and among those with higher education decreases (-3 p.p.).

Figure 21: (I1) At the present moment, do you smoke tobacco?, %



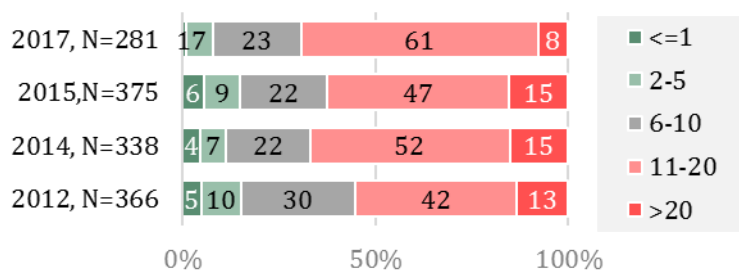
In the chart below is presented the respondent habit of smoking per gender. In the current survey, the share of men who smoke daily is 49% (+6 p.p. compared to the previous survey). The share of women who smoke with the same frequency is 5% and is maintained at the same level as in 2015.

Figure 22: (I1) At the present moment, do you smoke tobacco (per gender)?, %



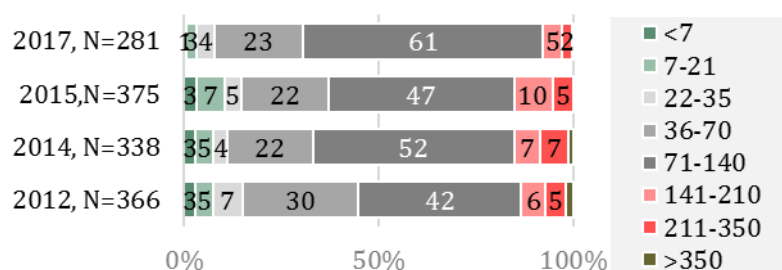
At the same time, it is necessary to mention that, compared to previous years, is registered a decreasing of the share of respondents who smoke fewer cigarettes (up to 20 cigarettes) per day and of those who smoke more than 20 cigarettes per day. It is attested a larger share of respondents who smoke 11-20 cigarettes per day – 61%. Daily smoke from 11 to 20 cigarettes mostly the men and the respondents from the north and south of the republic, but in the interval 6-10 cigarettes smoked per day fall mostly the women and respondents from the central area.

Figure 23: (I2) (question for smokers) In average, how many cigarettes do you smoke daily?, %



During one week, most of the respondents smoke 71-140 cigarettes. Their share is 61%. In the previous years, also, the share of respondents who smoked 71-140 cigarettes per week prevails. Thus in 2015, their share constituted 47%, in 2014 – 52%, and in 2012 – 42%. Weekly smoke from 71 to 140 cigarettes mostly the men and respondents from the north and south of the republic, but in the interval 36-70 cigarettes smoked per week fall mostly women and respondents from the central area.

Figure 24: (I2) (question for smokers) In average, how many cigarettes do you smoke during a week?, %



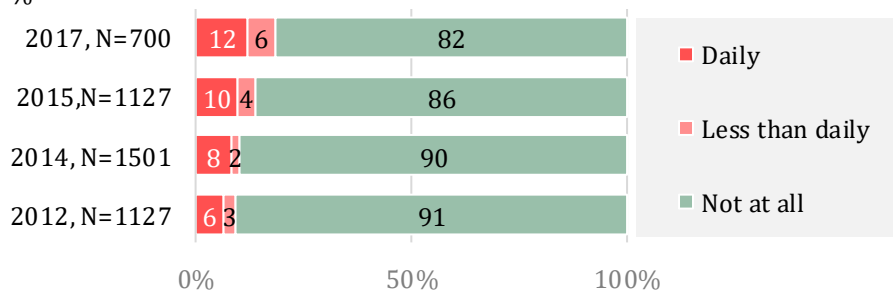
In average, during a day the respondents smoke 16 cigarettes, and per week – 114, which is less compared to 2014 and 2015, and more – compared to 2012.

Table 1: Average number of cigarettes smoked per day and per week

	2012		2014		2015		2017	
	N	Average nr.	N	Average nr.	N	Average nr.	N	Average nr.
During one week	366	111.2	338	125.4	375	115.5	281	114.3
One day	366	15.9	338	17.9	375	16.5	281	16.3

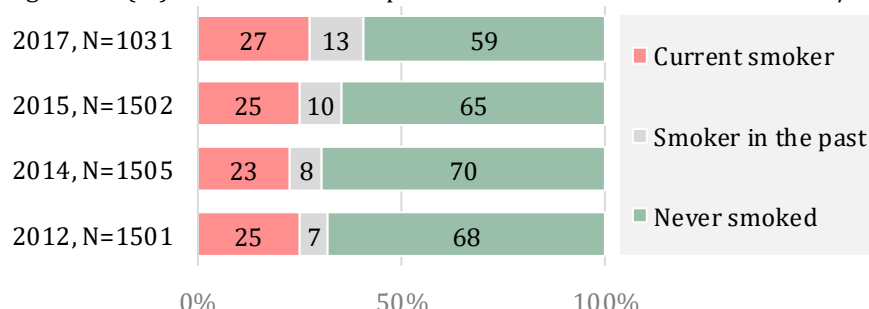
In the current year is registered a decrease by 4 p.p. of the number of respondents who have never smoked. Thus, 12% of respondents who currently do not smoke smoked daily in the past. Their share increases by 2 p.p. from a survey to another. Also, by 2 p.p. increases the share of those who in the past smoked rarer than once a day.

Figure 25: (I3) in the past, how often did you use to smoke? (question for persons who do not smoke currently), %



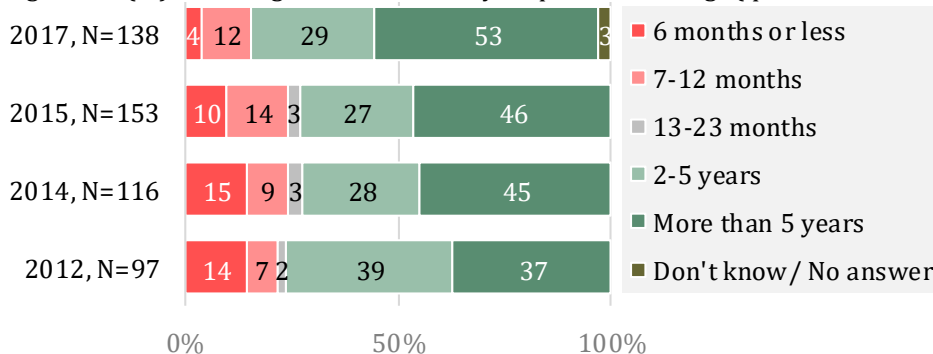
The survey from the previous year determined that the share of smokers is 27%, with 2 p.p. more than in 2015 and 2012 and 4 p.p. more than in 2014. According to the data from the previous surveys it is noticed that the share of ex-smokers has increased in 2017 almost doubly compared to 2012. A reversed tendency is noted regarding the share of non-smokers which decreased by 9 p.p. compared to 2012.

Figure 26: (I5) Structure of all respondents based on the status of smoker/non-smoker, %



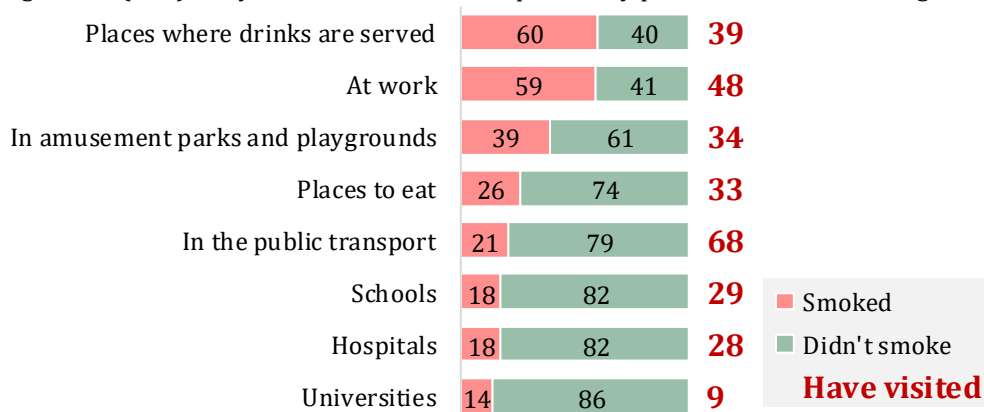
Out of the total number of ex-smokers, which is 13% of the total sample, 16% quit smoking less than a year ago, 29% - 2-5 years ago. Both during the last year and more than 5 years ago mostly the respondents from the north of the republic quit smoking.

Figure 27: (I7) How long has it been since you quit smoking? (question for ex-smokers), %



Initially, the respondents were asked if they visited certain places during the last 30 days. Then, the visitors of certain places mentioned if they noticed a person who was smoking. Thus, from the total visitors of premises where drinks are served (39%), more than a half – 60%, stated that in these places they observed a smoking person. Approximately the same share declared they noticed smoking at their job (59%). And more than a third (39%) noticed smoking in amusement parks and on playgrounds.

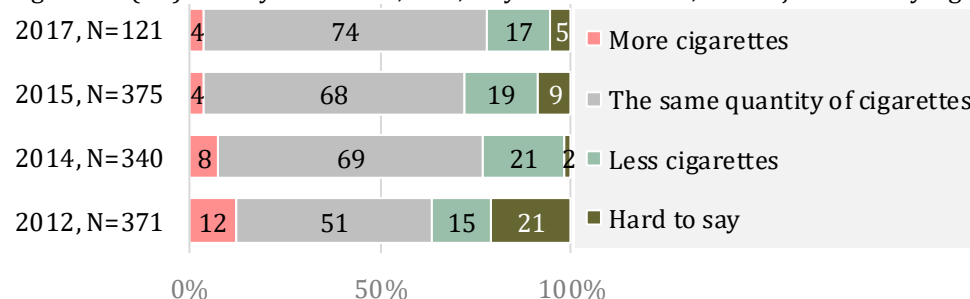
Figure 28: (V12) Did you notice in the visited places any person who was smoking?, N=1031, %



2.2 Smoking cessation

Two thirds of smokers (74%) mentioned they smoked just as many cigarettes as 30 days ago. Their share is 6% higher, compared to the results of previous studies. Just as many cigarettes mostly smoke the respondents from rural environment and those from the north area.

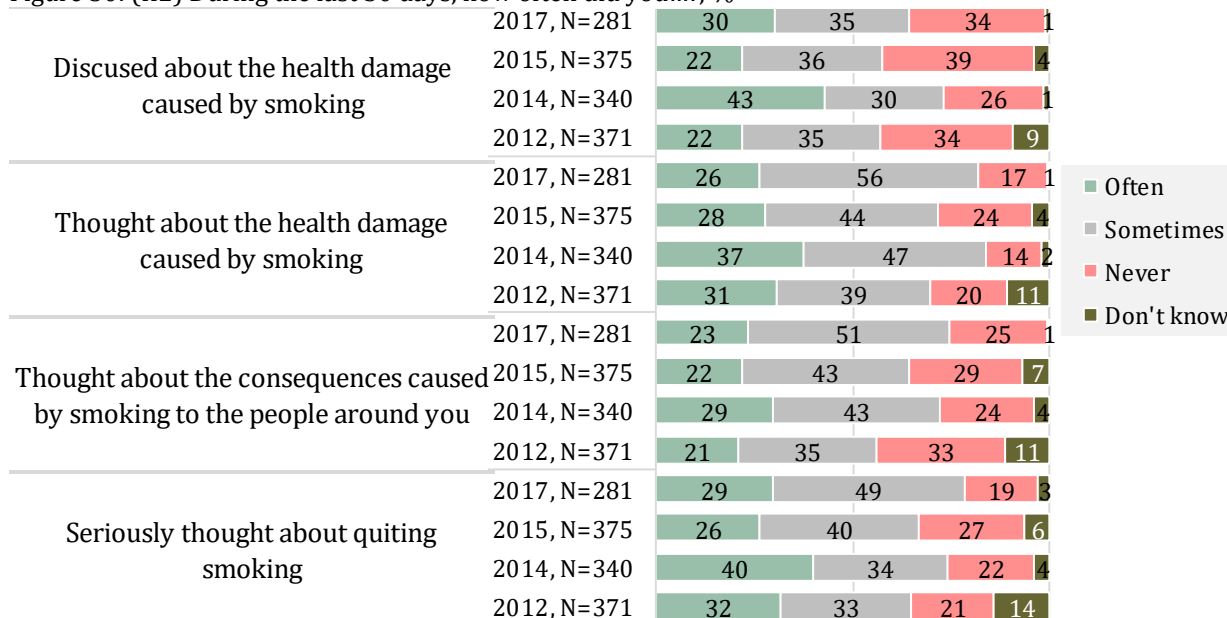
Figure 29: (II1) Could you indicate, now, do you smoke more, less or just as many cigarettes as 30 days ago?, %



In 2017, about a third of smokers discussed often about the harm of smoking on health, approximately the same share (29%) often thought seriously of quitting smoking. Each fifth smoker declares that in the current year they often thought of the harms smoking causes to them, and more than a half of respondents thought of this aspect sometimes, the same tendency is noticed in the case of the statement regarding the harms smoking causes to those around. Compared to the year 2015, in the current year by 3 p.p. has increased the share of smokers who thought often of quitting smoking, and by 8 p.p. has increased the share of smokers who discussed about the harm of smoking on health.

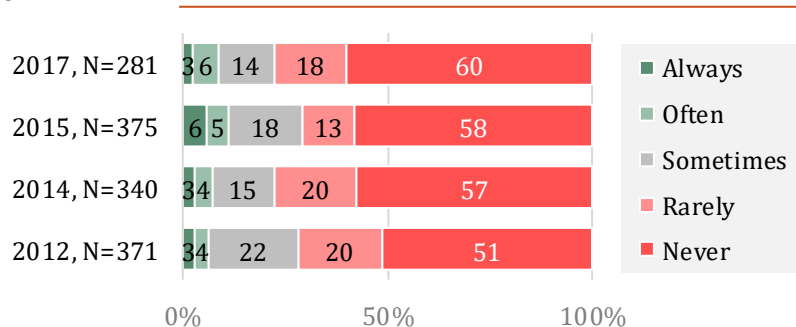
A greater share of men thought seriously to quit smoking, thought of the harms smoking causes and discussed about it.

Figure 30: (II2) During the last 30 days, how often did you...?, %



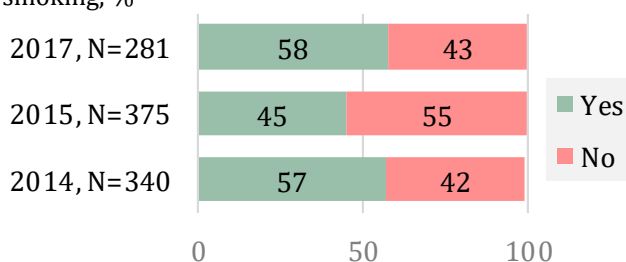
Compared to the results of previous surveys, the share of respondents who ask those around them if they mind or not their smoking in their presence remains at the same level. Women, the respondents from urban environment and those from the central region of the republic use to a greater extent to ask those around them if they mind or not their smoking.

Figure 31: (II3) During the last 30 days, how often before lighting a cigarette, did you ask those around you if they mind or not if you would smoke?



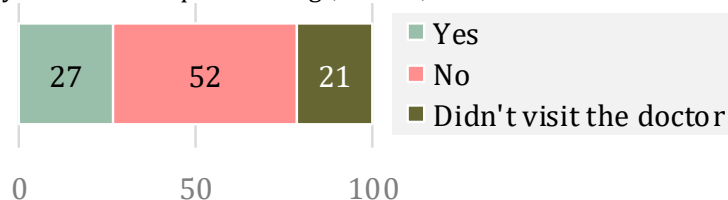
More than half of smokers (58%) mentioned that the members of the household tried to motivate them to quit smoking. Compared to the survey from 2015, was registered an increase of 13 p.p. of the share of smokers whose members of the family tried to motivate them to quit smoking.

Figure 32: (II5) During the last 30 days, did any of the members of your household try to motivate you to quit smoking, %



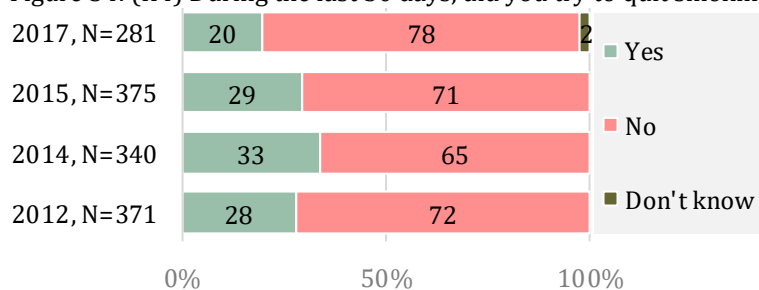
27% of smokers declared that a medical worker tried to motivate them to quit smoking.

Figure 33: (I6) During the visits to the doctor or other medical worker, in the last 12 months (last year), were you advised to quit smoking?, N=281, %



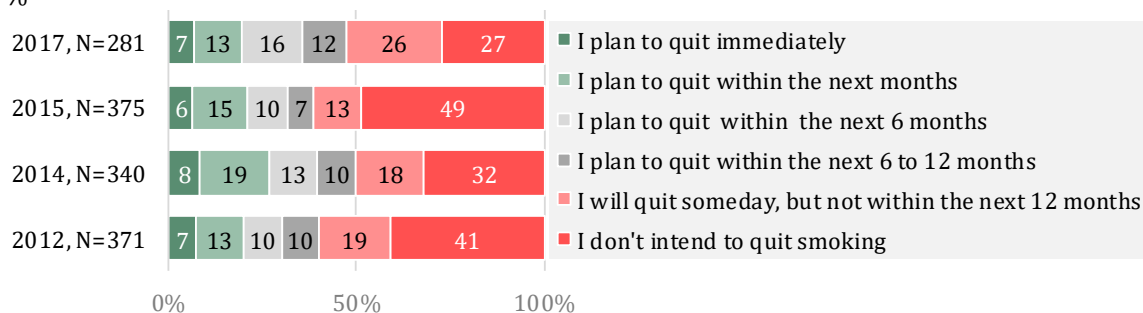
The number of respondents who tried to quit smoking during the last 30 days has been decreasing since 2014. Thus, approximately one respondent out of five, during the last 30 days tried to quit smoking. In the last month, to a greater extent quit smoking men and respondents from the north of the country.

Figure 34: (II4) During the last 30 days, did you try to quit smoking?, %



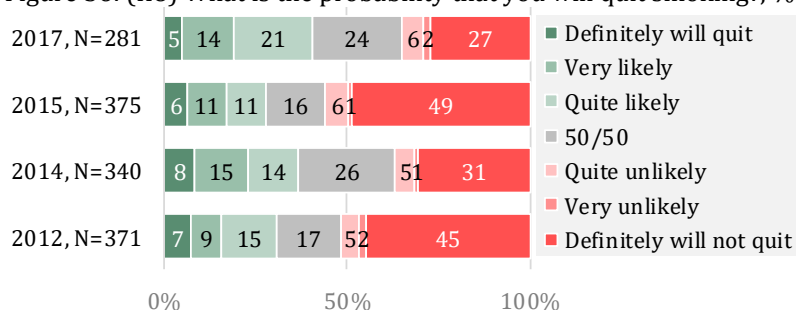
In the current year, more than a third (36%) of smokers plans to quit smoking at least in the next 6 months. In 2015, 5 p.p. less declared the same thing, and in 2014 their share was by 4 p.p. higher. In the next 6 months, the respondents from the north plan to a greater extent to quit smoking.

Figure 35: (II7) Which of the following affirmations describes the best your opinion referring to quit smoking, %



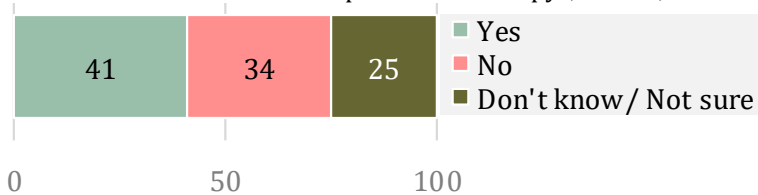
According to the current survey, 40% of smokers declare that they would probably try to quit smoking (cumulated share: *absolutely certainly I will quit smoking, very likely, quite likely*), share which is increased compared to the data from the previous surveys: by 12 p.p. more compared to the survey from 2015, by 3 p.p. more compared to 2014 and by 9 p.p. more compared to 2012.

Figure 36: (II8) What is the probability that you will quit smoking?, %



41% of respondents believe it would be easier for them to quit smoking if the compulsory medical insurance policy would offer free access to the nicotine replacement therapy. At the same time, it is worth mentioning that 25% cannot determine how such a measure would influence them.

Figure 37: (II9) Do you think you will quit smoking easier if the compulsory medical insurance policy would offer free access to nicotine replacement therapy?, N=281, %



CHAPTER III: SOCIO- DEMOGRAPHIC PROFILE OF THE SMOKER

CHAPTER III: SOCIO-DEMOGRAPHIC PROFILE OF THE SMOKER

Comparing the socio-demographic profile of non-smokers and smokers, we notice a larger share of non-smoking respondents, who have never listened to the radio and do not go to the cinema.

Regarding exposure to cigarette smoke in the street, at home and at work, smokers mentioned they were exposed to cigarette smoke sometimes, often, all the time to a larger rate compared to non-smokers. Also, is noticed a greater share of respondents exposed to cigarette smoke in the street.

Table 2: Socio-demographic profile of a smoker in comparison with a non-smoker, %

		Total, N=1031	Smokers, N=281	Non- smokers, N= 750
TV watching	Everyday	73	73	73
	4-6 times a week	8	8	8
	2-3 times a week	8	8	9
	Once a week	2	1	2
	Twice a month	1	1	0
	Once a month	1	1	0
	Once in 2-3 months	1	1	1
	Once in 6 months	0	1	0
	Less often	3	4	3
	Don't watch TV	4	2	4
	Don't remember	0	0	0
Radio listening	Everyday	31	40	27
	4-6 times a week	9	10	9
	2-3 times a week	8	7	9
	Once a week	4	2	4
	Twice a month	3	2	3
	Once a month	2	2	2
	Once in 2-3 months	1	2	1
	Once in 6 months	1	2	1
	Less often	12	10	13
	Don't listen to the radio	27	20	30
	Don't remember	2	3	2
Newspaper/ magazines reading	Everyday	2	2	2
	4-6 times a week	2	0	3
	2-3 times a week	6	4	7
	Once a week	10	6	12
	Twice a month	3	2	4
	Once a month	5	6	4
	Once in 2-3 months	3	4	3
	Once in 6 months	2	4	2
	Less often	17	18	17
	Don't read newspapers	47	49	46
	Don't remember	3	6	2

		Total, N=1031	Smokers, N=281	Non- smokers, N= 750
Use internet	Everyday	71	67	72
	4-6 times a week	5	6	4
	2-3 times a week	4	2	5
	Once a week	1	2	1
	Twice a month	0	1	0
	Once a month	1	1	1
	Once in 2-3 months	0	1	0
	Once in 6 months	1	1	0
	Less often	3	5	2
	Don't listen to the radio	14	13	15
	Don't remember	1	1	0
Cinema visits	Everyday	0	1	0
	4-6 times a week	0	0	0
	2-3 times a week	0	1	0
	Once a week	0	0	0
	Twice a month	1	2	1
	Once a month	4	4	5
	Once in 2-3 months	4	6	3
	Once in 6 months	4	4	5
	Less often	14	18	13
	Don't visit the cinema	62	55	64
	Don't remember	10	11	9
Workplace	Indoors	31	8	23
	Outdoors	15	7	9
	It's not applicable*	54	85	69
	Don't know/ No sure	2	3	1
Exposure to cigarette smoke at home	Never	60	32	70
	Rare	13	16	11
	Sometimes	13	21	10
	Often	12	21	8
	Always	3	9	1
Exposure to cigarette smoke at work	Never	20	3	17
	Rare	10	4	7
	Sometimes	9	4	5
	Often	6	3	2
	Always	2	1	0
	It's not applicable*	53	84	69
Exposure to cigarette smoke in the street	Never	12	3	16
	Rare	21	20	22
	Sometimes	37	36	38
	Often	22	27	20
	Always	7	14	5
Children in the family	No	71	79	69
	Yes	29	22	32

**Note: The statement "Not applicable" signifies the variant of answer for respondents who are not employed, thus, cannot answer to the question about exposure to cigarette smoke at work, or referring to the place they work at.*

CHAPTER IV:

MULTIVARIATE

ANALYSIS

CHAPTER IV: MULTIVARIATE ANALYSIS

In order to identify the influence of access to advertising/information regarding the knowledge of smokers and non-smokers about the negative effects of smoking on health, a logistic regression analysis was performed (the following tables are presented for the survey from 2017). For the beginning was identified the existence of the correlation or association between knowledge and attitudes related to smoking and access to advertising, several variables were tested in order to identify those who are worth to be included in the model of logistic regression. This type of statistical test allows the identification of relationship between certain variables, for example it was established that the level of knowledge of smokers and non-smokers regarding the negative effects of smoking is influenced by the region, residence environment, age, number of cigarettes smoked per week. Subsequently, was performed the logistic regression for all the analysed aspects, separately for smokers and non-smokers, in order to determine on the level of knowledge regarding certain aspects of smoking. The lines marked green indicate where was obtained a significant model, and the cells marked dark green show where significant coefficients of logistic regression were obtained with the analysed result variable, meaning the knowledge referring to the respective aspects are influenced by exposure of respondents to anti-smoking advertising.

Table 3: Knowledge of smokers and non-smokers, in comparative terms, regarding the negative effects of smoking on health, from the perspective of their exposure to anti-smoking advertising

	Attitude	Smokers			
		p	Odds Ratio	Lower limit	Upper limit
1	Smoking causes serious health problems Chi-square=14.714, sig.=0.196				
	Logistic regression	0.886	0.900	0.214	3.789
2	People important to me think that I should not smoke Chi-square=43.168, sig.=0.000				
	Logistic regression	0.269	0.502	0.148	1.702
3	Smokers should not expose those around them to cigarette smoke Chi-square=24.909, sig.=0.009				
	Logistic regression	0.403	0.600	0.144	2.183
4	I am worried about my health when someone smokes near me Chi-square=8.428, sig.=0.675				
	Logistic regression	0.940	0.957	0.311	2.953
5	Smoking cannot be that bad: many people smoke all their lives and live to be old Chi-square=20.533, sig.=0.039				
	Logistic regression	0.908	0.933	0.288	3.020
6	My health would improve if I quit smoking Chi-square=11.020, sig.=0.442				
	Logistic regression	0.570	0.713	0.222	2.291
7	Exposing non-smokers to cigarette smoke damages their health Chi-square=10.272, sig.=0.506				
	Logistic regression	0.269	0.493	0.13	1.86
	Knowledge	Smokers			
		p	Odds Ratio	Limita de jos	Limita de sus
1	Smoking causes lung cancer Chi-square=22.575 sig.=0.020				
	Logistic regression	0.015	0.123	0.023	0.669
2	Smoking causes other lung diseases Chi-square=27.906, sig.=0.003				
	Logistic regression	0.595	0.631	0.115	3.456
3	Smoking damage the brain Chi-square=14.491, sig.=0.207				
	Logistic regression	0.546	0.670	0.182	2.462
4	Smoking causes heart disease Chi-square=15.311 sig.=0.169				
	Logistic regression	0.574	0.669	0.164	2.722
5	Smoking causes infertility Chi-square=10.623, sig.=0.475				
	Logistic regression	0.549	0.664	0.174	2.534

Table 4: Attitudes of smokers and non-smokers, in comparative terms, regarding the negative effects of smoking, from the perspective of their exposure to anti-smoking advertising

Atitudini		Non- smokers			
		p	Odds Ratio	Lower limit	Upper limit
1	Smoking causes serious health problems Chi-square=15.902, sig.=0.196				
	Logistic regression	0.425	0.621	0.193	2.001
N/A					
3	Smokers should not expose those around them to cigarette smoke Chi-square=18.453, sig.=0.103				
	Logistic regression	0.031	0.375	0.153	0.916
4	I am worried about my health when someone smokes near me Chi-square=20.516, sig.=0.058				
	Logistic regression	0.088	0.533	0.258	1.099
5	Smoking cannot be that bad: many people smoke all their lives and live to be old Chi-square=46.074, sig.=0.000				
	Logistic regression	0.001	2.748	1.478	5.110
N/A					
7	Exposing non-smokers to cigarette smoke damages their health Chi-square=19.859, sig.=0.070				
	Logistic regression	0.123	0.516	0.222	1.196
Knowledge		Non- smokers			
		p	Odds Ratio	Lower limit	Upper limit
1	Smoking causes lung cancer Chi-square=10.265, sig.=0.593				
	Logistic regression	0.131	0.260	0.045	1.492
2	Smoking causes other lung diseases Chi-square=43.612, sig.=0.000				
	Logistic regression	0.129	0.408	0.128	1.299
3	Smoking damage the brain Chi-square=35.701, sig.= 0.000				
	Logistic regression	0.776	0.878	0.360	2.145
4	Smoking causes heart disease Chi-square=44.468, sig.= 0.000				
	Logistic regression	0.423	0.688	0.276	1.717
5	Smoking causes infertility Chi-square=21.359, sig.= 0.045				
	Logistic regression	0.460	1.496	0.513	4.36

CONCLUSIONS

CONCLUSIONS

The survey based on primary quantitative data was carried out according to the methodology of KAP surveys (knowledge, attitudes, practices) and has established the level of knowledge of the population regarding the harms of smoking, attitudes and practices of the population regarding tobacco consumption.

Knowledge

The majority of respondents know that exposure to cigarette smoke is harmful and may cause serious health issues. Smokers register lower rates compared to non-smokers regarding the level of knowledge about the harm of smoking. As in previous surveys, the great majority of respondents know about the fact that smoking causes lung cancer, regardless of the status of the respondent. Regarding heart diseases, brain conditions and infertility, the level of information of smokers is lower than that of non-smokers and ex-smokers.

Attitudes

Compared to the results from 2015, in the current study the share of smokers who are worried that smoking will affect their health increases. Each second respondent is against disposal of cigarette packets in the most visible places in shops and kiosks, using elements highlighting tobacco products and displaying in front windows. Smokers share these opinions to a lower extent. More than two thirds of respondents support the sale of cigarettes only in specialized shops. The share of smokers who support the sale of tobacco products only in specialized shops is higher than that of smokers who support their sale in kiosks. The majority of respondents (79%) have seen any advertising or information about the harm of smoking on health. 47% of them mentioned they were somewhat motivated to quit smoking.

The majority of employed respondents (83%) mentioned that it is important to ensure a smoke free work place, and 88% consider that employers, who allow smoking in the rooms where their employees work, cause harm to their health. For women it is very important to have this work condition ensured (by approximately 10 p.p. more). Out of the respondents who noticed any information, the majority saw advertising on television (81%). Most of the smokers, however, noticed the advertising/ information on cigarette packets (56%). The internet, family/friends and street billboards were informative for 27%, 20% and 13% of respondents accordingly.

Practices

At present, 25% of respondents smoke daily, and 2% - rarer than daily. Thus, compared to the results of the survey from 2015, the share of smokers has increased by 2 p.p. At the same time, the average number of cigarettes smoked daily is similar to that from 2015 and constitutes 16 cigarettes. An increase of the share of respondents who smoke 71-140 cigarettes per week is noticed.

Regarding the dynamics of the number of smoked cigarettes, in 2017 the study points to an increase of the share of respondents who smoke just as many cigarettes, compared to 30 days ago. The share of respondents who smoke more cigarettes decreases by 2 p.p. from one wave of the study to another. Nevertheless, the rate of those who tried to quit smoking is decreasing. Thus, 20% of smokers tried, during the last 30 days, to quit smoking, while in 2014, for example, each third smoker had such an intention. However, more than a third of smokers plan to quit smoking immediately and during the next 6 months. Compared to the previous years, the rate of those who believe with a greater probability that they will succeed in quitting smoking increases.

ANNEXES

ANNEX I: PROFILE OF SMOKER AMONG THE POPULATION AGED 18-69 YEARS OLD

In the respective chapter is presented the profile of the smoker among the population aged 18-69 years old. Thus, was identified the experience regarding smoking, the age when the persons who smoke began smoking, the number of cigarettes smoked daily, as well as the duration of exposure to tobacco smoke.

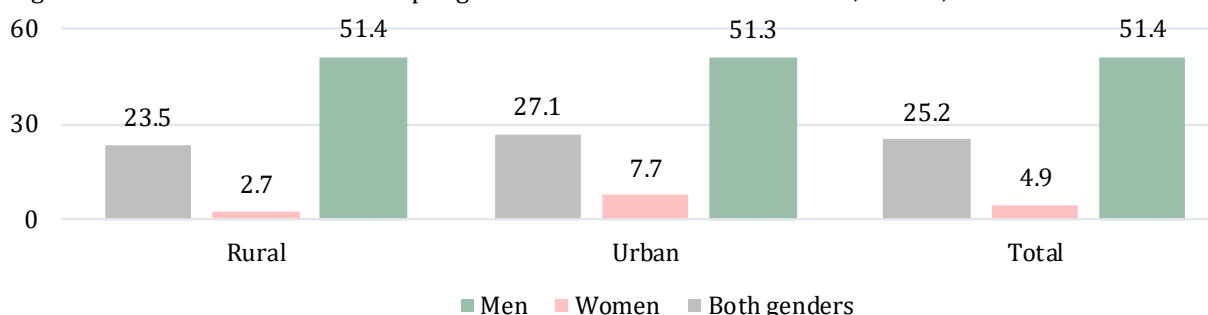
The total rate of current smokers (daily smokers and who smoke rarer than once a day) is 25.2%. The rate of men smokers (51.4%) is considerably higher than that of women who smoke (4.9%). Both among men and among women the age of 44 years old is the one up to which the highest shares of smokers are attested.

Table 5: Rate of current smokers, per age groups and gender, %

Age category (years old)	Male		Female		Both genders	
	N	Current smokers, %	N	Current smokers, %	N	Current smokers, %
18-29	100	56.7	15	8.6	114	33.1
30-44	80	53.8	21	9.1	101	26.7
45-59	97	52.1	5	2.3	102	25.4
60-69	55	40.6	1	0.4	56	15.6
18-69	332	51.4	41	4.9	373	25.2

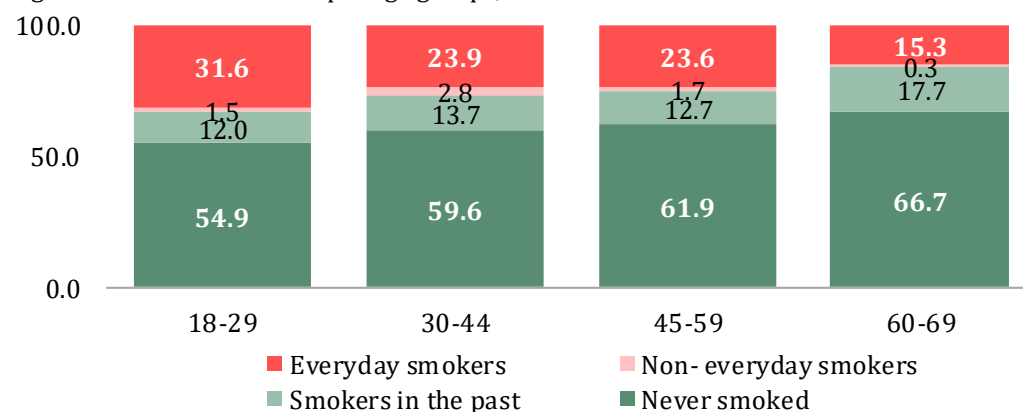
The share of men, current smokers, has not registered significant differences per residence environments, instead in the case of women this share is higher by about 5 p.p. in the urban environment compared to the rural one.

Figure 38: Rate of current smokers per gender and residence environment, N=373, %



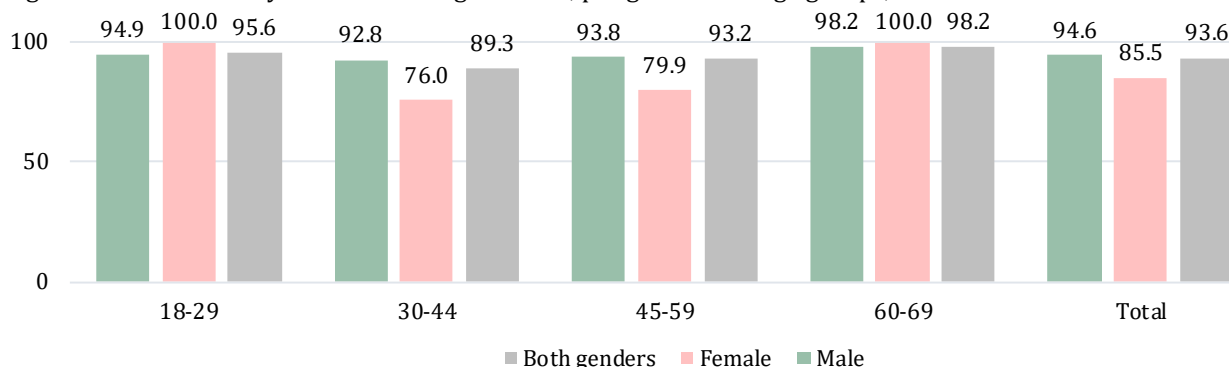
The rate of daily smokers is higher in the age group 18-29 years old, however that of non-daily smokers prevails in the age group 30-44 years old.

Figure 39: Status of smoker per age groups, N=1483%



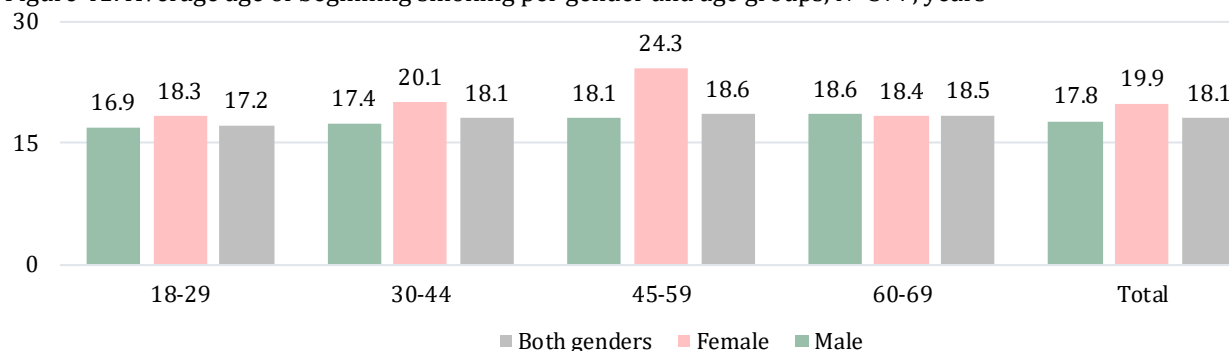
93.6% of all current smokers of both genders smoke daily. The rate of daily smokers among men (93.6%) is higher than among women (85.5%). The age groups with the largest prevalence of daily smokers are: women of 18-29 years old and those of 60-69 years old.

Figure 40: Share of daily smokers among smokers, per gender and age groups, N=373 %



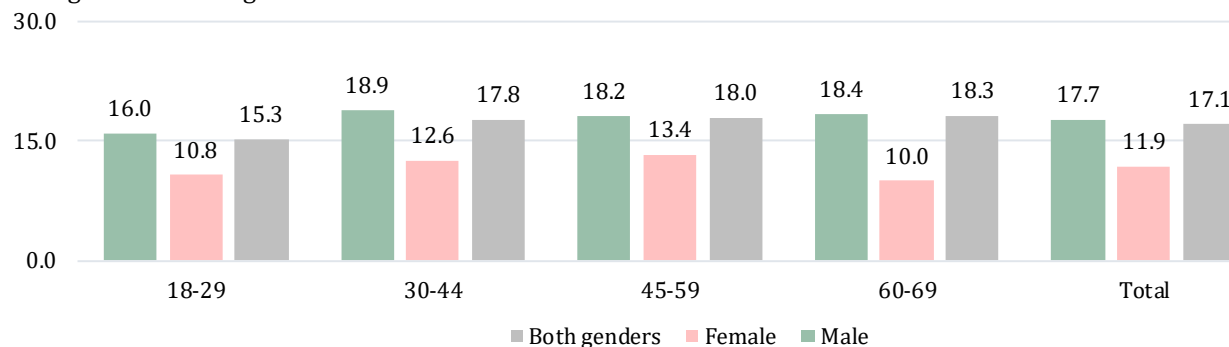
In general, it is noticed that men began smoking at a younger age (17.8%), compared to women (19.9%). Men from the age group 18-29 years old began smoking earlier than those from other age groups. For women the same tendency is followed

Figure 41: Average age of beginning smoking per gender and age groups, N=577, years



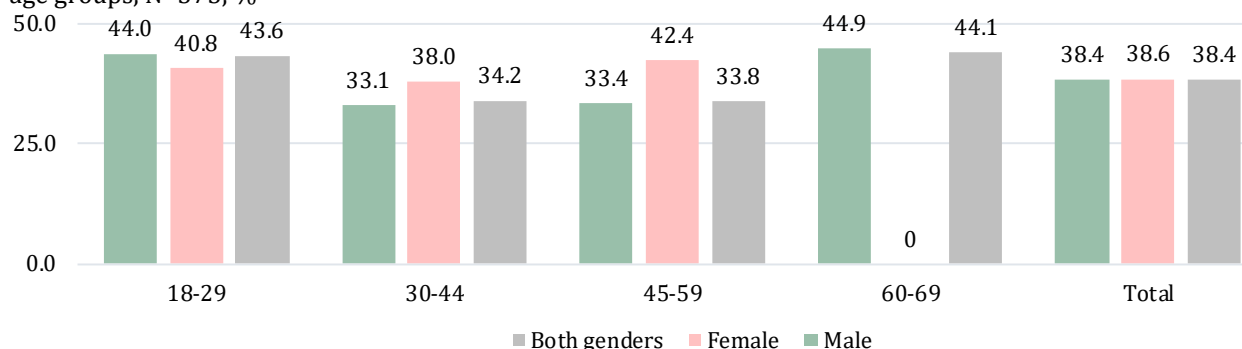
The average amount of cigarettes smoked per day by daily smokers is of 17.1. Men smoke in average 17.7 cigarettes a day, and women – 11.9. The largest number of cigarettes smoked daily was registered in the age group of men, 30-44 years old, for women the largest number of cigarettes smoked daily is used by the age group 45-59 years old.

Figure 42: The average amount of cigarettes smoked daily by daily smokers, per gender and age groups, N=367, average number of cigarettes



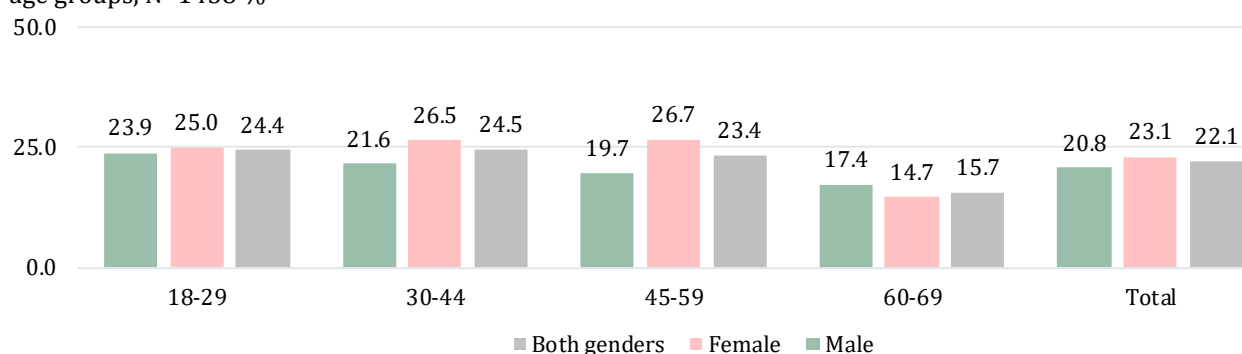
Approximately 38% of the total number of current smokers tried to quit smoking during the last year. It is noticed that, to a large extent, young people aged 18-29 years old tried to quit smoking. The share of women aged 45-59 years old who tried to quit smoking is larger than that of men from the same age category.

Figure 43: The share of current smokers who tried to quit smoking during the last 12 months, per gender and age groups, N=373, %



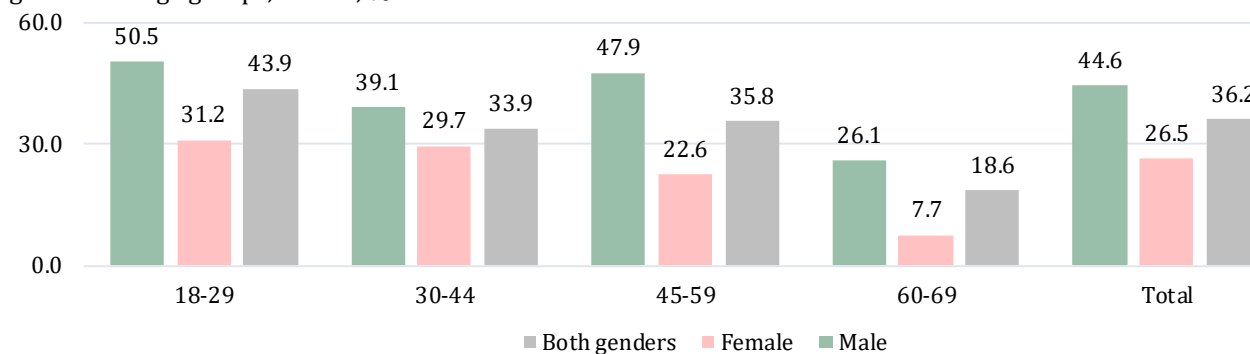
Approximately 22% of respondents were exposed to tobacco smoke at home. Women are exposed to tobacco smoke to a higher extent

Figure 44: The share of respondents exposed to tobacco smoke at home during the last 30 days per gender and age groups, N=1438 %



At the work place men are to a higher extent exposed to tobacco smoke than women, the difference is approximately 18 p.p. Mostly, respondents aged 18-29 years old declare themselves exposed to tobacco smoke at their work place.

Figure 45: The share of respondents exposed to tobacco smoke at their work place during the last 30 days per gender and age groups, N=590, %



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