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RUSSIA'S HEALTH AND DEMOGRAPHIC CRISES: POLICY IMPLICATIONS
AND CONSEQUENCES

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FOREWORD

The health crisis in Russia is a high-stakes example of the growing interaction between health and security issues. Not sufficiently understanding that relationship will make both health and security problems more difficult to solve, and no one knows the ultimate implications of this new set of challenges.

Murray Feshbach . . . has been a prophet, long arguing that serious health issues in a country like Russia have ramifications that go well beyond the social dimensions one usually associates with health-related questions. His story is grim. But it is critical that it be told...

The conclusions of this analysis are disturbing. Russia's health crisis is severe. But being disturbed is not necessarily a bad thing. It should prompt action.

Michael Moodie

President, Chemical and Biological Arms Control Institute which is the publisher of Murray Feshbach's monograph

PREFACE

The Russian crisis is not due to a single disease, or even a small set of microbial horrors. Rather, it is the result of a . . . constellation of occurrences that include not only infectious disease, but alcoholism, drug abuse, suicide, trauma injuries, astounding levels of cardiovascular disease, male/female estrangement and loss of family cohesion, declining physiological fertility, social malaise, ugly environmental pollution, and micronutrient starvation. Russia will not be able to turn itself around by addressing any one of these issues in isolation.

All of this would be a matter of frightening academics were it not for one obvious fact: Russia has the world's second largest nuclear weapons force. It is also a global powerhouse for gold and oil. And even in a grossly depopulated, fiscally weakened state, Russia remains a major strategic player on the world stage.

What is to be done? Feshbach offers little hope. But he is a numbers man, and the sorts of social miracles great leaders can execute aren't easily quantified. This will be a crisis that will outlive the presidency of Putin, as well as his immediate successors. Although they will need help from the wealthy Western world, Russia's leaders will ultimately have to find their own solutions, and create their own unique miracles. It will take the genius of Peter the Great, the cunning of Catherine the Great, and the compassion of Dostoevsky to turn this terrible tide around.

Laurie Garrett is the author of *Betrayal of Trust* and Pulitzer Prize-winning reporter for *Newsday*.

AUTHOR'S PREFACE

...Policymakers must move from a position of ignoring health issues to one that fully integrates those issues into the crucial discussions of national security for many countries.

Drug and substance abuse (including alcohol), sexually transmitted diseases, and other illnesses such as mental disorders afflict Russia to an extraordinary degree.

DEMOGRAPHICS

Mortality

Why is Russian male life expectancy ranked 137th in the world, below Egypt, below South Africa, and many others? Among women, it is 100th in the world. While female life expectancy in Russia is on the average higher than male by 13 years or so, it remains below that of many other countries as well.

The underlying morbidity and mortality of the population explain much but not all of the demographic trends. The continued stresses on the society and individuals from historical times, as well as harmful habits of excess drinking and high levels of smoking, environmental human health hazards, and new and emerging diseases, have contributed to the poor health status and mortality.

Some further perspective on the Russian situation is provided by a comparison with the United States, which projects an average life expectancy at birth and survival rates for specific age groups that are far from the best in the world – especially among American 15 – 19-year-old males, who kill themselves with drugs, alcohol and motorcycles. But in the United States, a boy who lives to age 16 has an 88 to 90 percent chance of living to age 60. His Russian counterpart has only a 58 – 60 percent chance. And those chances will shrink.

Exogenous Causes of Death

This is a catch-all category. It is composed of deaths occurring due to *alcohol poisoning*, (37,214 and 41,091 in 2000 and 2001, respectively, up from 16,000 in 1990), *suicides* (56,934 and 57,2284 in 2000 and 2001, up from 39,200 in 1990; the rate per 100,000 population also increasing from 26.4 to 39.3 and 39.7 in 2000 and 2001—a 50 percent increase), *murders* (at 41,100 in 2000 this is over 80 percent higher than that number in 1990 when it was 21,100), *accidental drownings* (17,062), and *automotive accident deaths* (38,218) in 1999, undoubtedly related to alcohol abuse as well as the larger number of cars on the road. There is very large *residual*, of 119,503 deaths due to exogenous causes in 1999, an increase of 6 percent from 1998 (112,489).

More detailed death figures by year, by sex, by cause in 1997 showed *accidents* (E47-53), with 110,590 male and 34,801 females in 1997; which includes *motor vehicle traffic accidents* (19,645 male and 7,520 female deaths); *other transport accidents* (3,390 males and 961 females); *accidental poisoning* (34,526 males and 10,375 female deaths); *accidental falls* (4,808 males and 2,247 females); *accidents caused by fire and flames* (5,401 males and 2,316 females); and *accidental drowning and submersion* (males 12,122 and 2,411 females). Additional categories shown in the World Health Organization (WHO) report include *suicides and self-inflicted injury* (45,519 males and 9,512 females); *homicide and injury purposely inflicted by other persons* (26,307 males and 8,688 females); and *other violent causes* (males 30,696 and females 8,815).¹⁸ However, as lengthy as this list appears to be, there are many other categories that should be included, according to the Revisions IX and X of the International Classification of Diseases.¹⁹

The alcohol situation is a particularly negative factor for the future health of the young as well as of the older population, and the continued excessive number of deaths shows no abatement. In fact it is quite the opposite. Thus, the implication is that the life style it reflects has not markedly improved at all in Russia, in large part because of increased alcohol consumption and the import or domestic production of illegal alcohol. The comparative number of deaths from alcohol poisoning in the United States is some 300-400 cases per year.

To the degree that suicides are reflective of a society and economy in stress that has many sufferers of alcohol and substance abuse and a high rate of sudden death, the increase since 1955 is demonstrative. Suicide among the young and very young is sufficiently bothersome to medical commentators that the former Minister of Health Tatyana Dmitriyeva, in an interview reported by Interfax in July of 2001, spoke of the doubling of the rate of suicides among 5- to 9- year old children (sic) over the past decade. While the numbers still are small, the fact is reflective of a society in trouble.²⁰ How many of them were homeless, were early drug abusers, were battered children, were

very ill, or were suffering from whatever other psychological illnesses to commit suicide is not yet known, but as a mirror of a society, it is very negative.

An earlier calculation of an index of the rate of suicides per 100,000 males and per 100,000 females in ages 15 to 24 was reported in the World Health Statistics Annual Reports of 1993 and 1994, demonstrating that the Russian position even then was very poor. This index was based on 1991-1993 information for all countries, the period of the economic and political transition in the former Soviet Union countries. The disparities were strong among the 33 nations included, but Russia's was the next to highest rate for males (32nd) and very high for females. Only Lithuanian males during this period, according to WHO's index, was higher (44.9 in Lithuania; 41.7 in the Russian Federation; and the lowest in Greece at 3.8 for males). Only Estonia and Latvia were found to have higher suicide rates for 15-24 year-old females (10.7 in Estonia, 9.3 in Latvia, and 7.9 in the Russian Federation; the lowest again found for Greece, at 0.8). Comparative U.S. rates were 21.9 for males and 3.8 for females.²¹

Table 1. Suicides in Russia: 1955 to 2001

(Five-year totals and annual averages, in thousands)

| Year | Five-Year (Absolute total) | Annual Average ²² |
|-----------|-------------------------------|------------------------------|
| 1955-1959 | 75.0 | 15.0 |
| 1960-1964 | 108.8 | 21.8 |
| 1965-1969 | 160.5 | 32.1 |
| 1970-1974 | 200.6 | 40.1 |
| 1975-1979 | 231.1 | 46.2 |
| 1980-1984 | 248.7 | 49.7 |
| 1985-1989 | 185.2 | 37.0 |
| 1990-1994 | 242.7 | 48.5 |
| 1995-1999 | 281.6 | 56.3 |
| 2000 | N/A | 56.9 |
| 2001 | N/A ~ | 57.3 |

N/A- not applicable

Source: Goskomstat Rossii, *Zdravookhraneniye v Rossii*, 2001, p. 43.

HEALTH

Heart

The rage of heart disease as a cause of death in Russia remains very high. It exacts a toll more than twice that in the United States and Western Europe. Somewhat in mitigation of the very high numbers of heart-related deaths in Russia, new information on the number of deaths from narcotics abuse may be recorded by physicians under this

cause of death, rather than drug overdose or addiction, in order to assuage the feelings of the families involved.

Cancer

Cancer illness and mortality rates have remained relatively stable for a number of years but showed a very slight decrease in the first half of 2002. There is little likelihood of a significant decline, however, and perhaps even an increase due to long-term effects of low doses of radiation, as well as its synergy with excess consumption of alcohol and tobacco.

HIV/AIDS

It is now clear that the rates of increase in new cases of HIV/AIDS infection in the Russian Federation and Ukraine are the fastest growing in the world... Dr. Irina Kochkarova, a staff member of the Ministry of Health . . . asserted that the actual number of HIV-positive people is five to seven times higher than the official figures. And, [her] report continues, if the sexual transmission rate reaches 30-40 percent of the new incidence,.. the virus will have gone far beyond just the injection drug user community.

Tuberculosis

The disease flourishes among people weakened by HIV/AIDS, alcoholism, and poverty. . . . The 1999 death toll of 29,254 was about 15 times the toll in the United States, or nearly 30 times greater when measured as deaths per 100,000 population in both countries.

A review of autopsy reports from the Vladivostok AIDS Center showed that 42.4 percent of those who died from AIDS were also diagnosed as having had TB as well.

Hepatitis

Dr. Maleyev, Chief Infection Expert of the Ministry of Health . . . noted that hepatitis is not only spread by blood-to-blood transmission (usually through contamination of the contents of syringes), but also is “refractory to treatment.”⁴⁶

Sexually Transmitted Diseases (STDs)

Sexually transmitted diseases have seen incredible rates of increase during the past decade. These diseases cripple and kill, damage reproductive health, and are associated with the spread of HIV/AIDS. The causes can be traced to the aberrant behavioral patterns of individuals exposed to the explosion of pornography as well as promiscuity;

to the growth of prostitution, notable among 10 – 14 year-old girls; and especially, to drug abuse involving shared needles and syringes.

Life Style Issues

Drug Abuse

Four years before Putin's recent declamation of the national security concerns of the Russian state due to drug abuse in the country, the think-tank organized by leading analysts, the Council on Foreign and Defense Policy, produced a major report on "Drug Addiction in Russia: A Threat to the Nation." To quote:

So great is the scope and speed of the spread of drug addiction in the country, that they call into question the physical and moral health of Russian youth, and even the future of a large share of them, as well as the social stability of Russian society in the near future.⁵¹

Many of the details are similar to other reports on drug abuse and addiction and its spread, but in this direct assessment of the situation (and before it became even more serious as at present), the Council warned that: "...taking into account especially the age group of most drug addicts (13 to 25 years old), **a third of the next generation of the country is in fact under threat.**" (bold in original). In addition to the usual alarms about the number and rate and age group of abusers and addicts, they also find and report the worrisome notation that "The average life expectancy of drug addicts after they begin using narcotics is between 4 and 4.5 years."⁵² With the continuing explosion in the number of drug habitues, and the formation of a national Anti-Drug Agency created within the Ministry of Justice, one can be sure that the effect must be even more devastating than revealed or projected hitherto. Perhaps this is why the Council's report affirms that even in 1998, the experts on drug addiction believe that the "true number of drug addicts [even then] exceeds by 10 times the number of registered patients, [and] their total number in Russia at present [1998] approaches 1 million people."⁵³

More recently, in September of 2001, at the Second Conference on International Anti-narcotics Cooperation, held in Saratov, Minister of Internal Affairs (MVD) Boris Gryzlov noted that the real number (that is, the multiplier) is 6 to 7 times the official 451,000 registered number at that time. Breaking it down by age group, the increase in drug addiction during the past decade was 8 times among adults, 18 times among youths [15 to 17 year olds, inclusive], and 24.3 times among children [ages 0 to 14].⁵⁴ No wonder it could be written that the "country is under threat," as cited earlier here.

Finally, while not fully independent and being incorporated in the MVD structure, a new State DEA of Russia was formed. This Drug Enforcement Agency was announced by President Putin at a meeting of the State Council meeting in September 2002 (another year had passed before formal action was taken), and Putin warned the Council that the need had ensued from the "great social costs, including a decline in life expectancy and [increases in] child neglect and crime."⁵⁵

A many multiple increase in substance abuse of all types has taken place, especially among the young—increasing from a reported zero (which was never true even if asserted by the authorities) in the 1970s and 1980s to 2 million to 3 or more million, even 6 million or more, now for Russia alone. Putin asserted at a meeting on 2 August 2001⁵⁶ that drug abuse also has an important connection to "international terrorism and extremism" as well as having a connection to the Afghan "problem." Can one solve one without the other? One year later, despite a report about a Drug Commission meeting in July of 2001 from Prime Minister Kasyanov,⁵⁷ Putin and other senior officials are calling the drug abuse and addictive levels a "national calamity."

Drug abuse and addiction are becoming more widespread and affecting those younger and younger. Dr. Tatyana Dmitriyeva, former Russian minister of health, and head of the well-known Serbskiy Psychiatric Institute (which has a regrettable although not current history of political involvement in psychiatric diagnoses and treatment), is quoted by Interfax about the devastating increase of addiction among young people. A July 8, 2001, report by Interfax New Agency cites her as indicating "... the number of adult drug addicts has increased eight times; over the past 10 years, that of teenage drug addicts has multiplied 18 times. The growth of drug addiction among children under [15] years of age is even more shocking: by 24.3 times."

Even these numbers cited by Gryzlov and Dmitriyeva may not provide the full thrust of Dmitriyeva's revelation that "the percent of children [that is, those of 0-14 years of age who are drug abusers] has increased from 5 percent in the late 1980s to 26 percent in 2000." Moscow does not have the highest rate of drug addiction for all ages, she notes: Siberia, at 313.2 addicts per 100,000 population, is distinctly higher than even the Far East (at 184.8 per 100,000 population), but the Far East is higher than in Moscow, with the latter at 154.3 per 100,000 population. While one could hope that the reference to "addiction" is more in the line of "abuse," and not yet quite so serious, even the latter is a foreboding harbinger of the health of the population of Russia.

All predictions of more widespread and co-lateral impact on the health status of the Russian population unfortunately are beginning to be reflected in the current period. U.S. experience links IDU with other illnesses, including HIV. According to the Centers for Diseases Control and Prevention: "Approximately one-third of acquired immunodeficiency syndrome cases and one-half of new hepatitis C cases are associated with injection drug use." The 1998 Russian law that classified drug addicts as criminals

ensured that few addicts - a group at high risk for HIV - will seek treatment. Dr. Oleg Zykov, President of the No to Alcoholism and Drug Addiction Foundation, warned that as a consequence of this law:

We will see an increased risk of complications and overdoses; the death rate among drug addicts will rise; incidence of HIV/AIDS will rise; [and] the illegal market of drug-related services will begin to develop quite intensively.⁵⁸

More recent affirmations of likely draconian approaches to drug users and addicts will only add to the negative sequelae from lack of treatment.

In Moscow alone, 15-to 17-year olds showed a dramatic increase in drug and substance abuse. The number of registered youths at narcotic treatment clinics increased by 30.7 percent in the one-year period between the end of 1997 and 1998, and 4.5 times as many compared with four years earlier (1994). A smaller increase in young patients with toxic substance abuse was only 1.5 percent in 1997-1998, but 2.5 times greater than in 1994. In addition, it was found that many hid their conditions and only when they were on active duty did their addictions manifest itself.⁵⁹ Thus, even with many males being rejected for service in the Armed Forces, the share of those who are not fit for duty is even higher, a national calamity as it is now described by the leadership.

Alcohol

Alcohol consumption reflects an epidemic of alcoholism. Russian vodka produced for the domestic market (usually in half-liter bottles) comes with a tear-off top rather than a replaceable cork or screw top because it is assumed that the bottle, once opened, will not be returned to the refrigerator.

Estimates of the number of alcoholics can be derived from alternative medical information, which suggests that the correct figure can be estimated by multiplying the official figure by 3 to 4 times to get the truer rate of alcoholics (that is, 1,500-2,000 per 100,000 population).⁶⁰ This yields between 6.5 and 11.5 million such persons. Another set of figures would tend to support the higher estimate. The head of the epidemiology division of the Research Institute of Narcology of the Russian Ministry of Health gives the official number of persons suffering from alcoholism as 2,220,845. However, in reality evaluations by "experts" conclude that there "are more than 8 million male alcoholics, about 2 million female chronic drinkers, and about 500,000 children under 15 years of age who suffer from alcohol dependence."⁶¹ In all, this represents about 10.5 million such persons. A virtual explosion in beer consumption, especially among the

young, is leading to large increases in chronic alcohol abuse and alcoholism and related illnesses. Onishchenko is very vocal in his concern; he takes a strong anti-beer position.

Average consumption is of 14.6 liters of pure alcohol (equivalent to 70 half-liter bottles of vodka) per person 15 years of age and over (or almost 2 times the WHO standard of 8 liters per year at which point negative physiological problems ensue). But it is not only illness that follows. Due to binge drinking, poor quality alcohol, or surrogate liquids, the number of alcohol poisoning deaths has increased at the early part of the 1990s. The numbers of deaths (in thousands) by year are:

1991 - 16,100
1992 - 26,200
1993 - 45,400
1994 - 55,500
1995 - 43,500
1996 - 35,200
1997 - 27,900
1998 - 26,100
1999 - 29,900
2000 - 37,200
2001 - 41,100⁶²

At 40,000 or so deaths per year, this number is more than one-third higher than the number of deaths from TB, and if both continue to grow, the loss of life due to these causes becomes more significant in the continuing increase in mortality.

Quality tests conducted in 1995 to 1996 found that 35-40 percent of alcohol production failed the state standards, forming a foundation for so many alcohol poisoning deaths. The significant rise in taxes on alcohol imposed in the last few years gave incentive to the production of less expensive but poor quality output.

Alcohol abuse contributes to the deterioration of the population and is considered, like drugs, HIV/AIDS, and many other factors, to be a "real threat of the national security" of the state.

Smoking

Smoking is a habit among an estimated 70 percent of Russian males and one-third of females, and multinational tobacco companies aim to increase their sales in the country. The World Health Organization estimates that some 14 percent of all deaths in 1990 in the Soviet Union and Eastern Europe were traceable to smoking-related illnesses; it expects that number to rise to 22 percent by 2020. Smoking is not only widespread in

Russia, but is increasing, and contributing to deaths from a range of illnesses. Early in 2002, it was noted in a different source that cigarette consumption is either 300 million or 25 billion per year; the latter is more likely as dividing by the total population of the country (about 144 million) yields 175 cigarettes for the population of all ages (including infants, leaving the youth and adult population to smoke more on the average). According to the author of the 2002 article, the number of smokers increased by 14 percent while the population has decreased by about 5 percent. According to one source, the combined number of deaths due to smoking "currently amounts to 300,000 [persons] per year." This number is greater than the total number dying from drug abuse, AIDS, and traffic accidents.⁶³

This same number of deaths, 300,000, was cited by V. Usanov, a spokesman for the Duma's Health Committee, as coming from the World Health Organization's statistics. Usanov further elaborated that the 63 percent increase in lung cancer deaths over the past decade was due to smoking. WHO also estimates, that for the world as a whole, smoking accounts for 85 percent of lung cancer deaths, and for one-quarter of all other deaths. New laws to the contrary, much "illegal" smoking and sales continue as before.⁶⁴ And these lung cancer deaths, according to the research performed at the European Centre on Health of Societies in Transition, in London, are about one-third higher among men in Russia than in Western Europe.

The increase in tobacco consumption among women and young people could lead to a further aggravation in this cause of illness and death in the future. During the period 2020-2040, WHO projects that "every 3 seconds one person will die of diseases caused by smoking" in Russia.⁶⁵ If the WHO projection for the period 2020-2040 is approximately correct, it implies a total number of deaths attributable to smoking of some 10,500,000. This is clearly not a trivial figure, and especially under conditions of a projected declining population. Smoking exacerbates other morbidity and contributes to cancer and cardiovascular as well as respiratory deaths. Smoking explained 93 percent of the sex difference in coronary heart mortality. These results confirm that smoking is a major determinant of mortality in Russia, with almost 40 percent of all deaths in men and virtually all male excess cardiovascular mortality attributable to smoking.⁶⁶ Smoking, like alcohol, drug abuse, and other life style excesses, only adds to the burden on the individual and the country's health system and costs.

POLICY IMPLICATIONS

Child Health

...The United Nations Human Development Report for Russia ...stated that "since 1993, alcoholism has grown by 2000 2.2 times among children, toxic substance abuse by 3 times, drug abuse by 20 times, and syphilis by 65 times."⁹³

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Russia's Health and Demographic Crises: Policy Implications and Consequences
By Dr. Murray Feshbach

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Notes

18. From the WHO statistical database, for the Russian Federation in 1997, found in:
http://www.who.int/whosis/statistics/whsa/whsa_ta...tatistics, whsa, whsa_table 1, endpoint&language=English and Goskomstat, *Demograficheskiy yezhegodnik Rossii*, Moscow, 2002, tables 6.1 and 6.2. [*Editorial note: <http://www3.who.int/whosis/>]
19. "Demograficheskaya situatsiya v Rossii v 1999 godu," *Statisticheskiy byulleten'*, no.5 (68), June 2000, p. 69. This source provides more details than usually given in standard statistical yearbooks published in Moscow, including accidents due to natural and environmental factors and air and space accidents, and others.
20. "Pervaya kolonka. V Rossii rastet chislo psikhicheskikh zabolevaniy i samoubiystv," *Novyye Izvestiya*, 6 July 2001, p. 1, from <http://www.eastview.com>.
21. "Youth Suicide League" in <http://www.unicef.org/pon96/insiicid.htm>.
22. Except for the years 2000 and 2001. Absolute numbers for those years are provided.

46. Summary of this statement by ITAR-TASS, in English, 1220 gmt, 15 October 2002, carried by FBIS, document ID CEP20021015000187.
51. Prepared by a working group headed by Dr. Sergey Karaganov, Dr. Igor Malashenko, and Dr. Andrey Fyodorov, on-line site: http://www.svop.ru:8003/doklad_en2.htm, 20 pp, see p.1 for the following quote. [*Editorial note: <http://www.svop.ru/>]
52. *Ibid.*, p. 3.
53. *Ibid.*, p. 6
54. See V. Denisov, "Pobedit' narkomaniyu," *Krasnaya zvezda*, no. 167, 9 July 2001, p. 3. from <http://www.eastview.com>.
55. I am indebted to Laurie Garrett of *Newsday* for this citation. Very useful other details, for example on the use of pregnant women to carry drugs in their abdominal cavities, and on the current situation is provided in the AP story by Judith Ingram, "Russia Afloat in Heroin," reproduced in the *Washington Times*, see <http://www.washtimes.com/world/20021020-843263.htm>
56. According to Radio Rossii (in Russian) 2 August 2001, 0900 gmt (per FBIS, CEP20010802000053).
57. Reported by Interfax News Agency, 23 July 2001 and 8 July 2001.
58. Cited in Yelena Salina, "Vchera v Rossii nachali sazhat' bol'nykh. Narkomafiya kayfuyet!," *Komosomol'skaya Pravda*, 16 April 1998, p.1. The Open Society Institute, funded by George Soros, issued a report prior to the UN General Assembly Conference on HIV/AIDS held in June 2001, stipulating that "Authoritarian governments in states of the former Soviet Union which punish illegal drug users" are enhancing the potential for a marked increase in AIDS. Agence France Presse, "Punishing drug users fueling risk of AIDS explosion in former USSR: report," June 23, 2001. From the press coverage of the report, this clearly includes Russia. For the United States, see the CDC report of May 18, 2001 issue of the *Morbidity and Mortality Weekly Report* (vol. 50, no. 19), p. 377. However, the 1998 regulation as amended in 2001 was abrogated in December 2002.
59. N.N. Filatov and G.I. Kutsenko, "Sotsial'no-gigiyenicheskiye problemy formirovaniya zdorov'ya detey i podrostkov v Moskve," in *Zdorovye detei Rossii v XXI veke*, edited by A.A. Baranov and V.R. Kuchma, Moscow, Federal'nyy tsentr goskomsanepidenadzor Minzdrava Rossii, 2000, p.87.
60. A. Vaganov, "P'yanstvo na uboy. Alkohol'nyy reyting regionov Rossii," *Nezavisimaya Gazeta*, no. 169, 16 August 2002, p.1, from <http://www.eastview.com>

61. I. Mikhaylova, "Zdravookhraneniye. Zavisimost'. V Rossii trezvykh net i ne budet," *Kommersant-Daily*, no. 136, 3 August 2002, p. 9 from <http://www.eastview.com>
62. From G.G. Zaigrayev, "P'yanstvo," *Sotsgiz*, no. 11, November 2001, p. 71 and *Demograficheskiy yezhegodnik* 2002, table 6.1.
63. From A. Kondorsky, "Smoking in Russia," *The Russia Journal*, 15 February 2002, from their on-line site. Also see Rosbalt News Agency, 25 August 2001.
64. Nabi Abdullaev, "Harsh Smoking Rules Adopted," *St. Petersburg Times*, 18 January 2002, cited in *Johnson's Russia List*, no. 6030, 19 January 2002, and Rosbalt News Agency.
65. See Rosbalt News Agency; D. Leon, M. McKee and L. Chenet, "Adult Mortality in Russia," from the website <http://www.lshtm.ac.uk/centres/ecohost/>; and R. Rose, "Surveying the Health of Russians," containing an abstract of the article by M. Bobak et al., "Socioeconomic Factors, Perceived Control and Self-Reported Health in Russia," from the on-line web site <http://www.socialcapital.strath.ac.uk/abs299soccap.html>.
66. M. Bobak, "Effect of smoking on mortality and sex differences in mortality in Russia: A prospective cohort study" at http://www.sote.hu/magtud/bobak_et_al.htm.
93. See the broad-ranging and interesting article by A. Baranov, "Da! Aziaty my... K 2010 godu kitaytsy stanut vtoroy po chislennosti natsional'noy gruppy naseleniya Rossii posle russkikh,," *Nezavisimaya gazeta*, no. 160, 6 August 2002, p.1, from <http://www.eastview.com>.