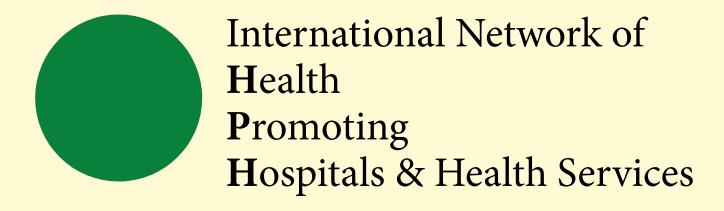
# **Smoking Prevalence Among Estonian Defence Forces Officers in 2008-2010**



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#### Introduction

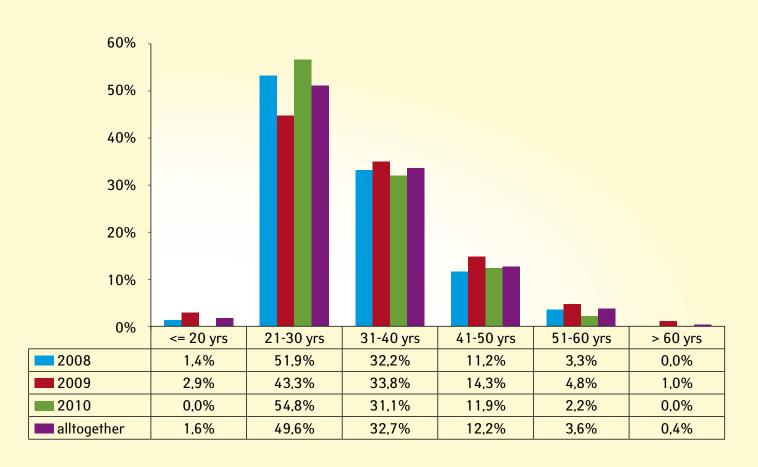
In international professional literature attention has been drawn to the higher smoking prevalence among military population compared with civilians. Military people who smoke are at a higher risk to become ill with cerebral apoplexy, peripheral vascular disease, lung cancer etc. It has been proved scientifically that long-term smoking has a negative impact on physical capability, military readiness and performance capabilities; smoking also deteriorates sight and hearing in dark, decreases cognitive competence in critical situations and increases the number of injuries related to physical activity. On the other hand, in Norway a research which indicates a significantly lower smoking prevalence among the officers of Norwegian army and air forces than among civilians has been published. It is possible to decrease the negative impact of smoking by providing smoking cessation counselling service.

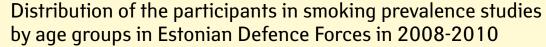
On the initiative of the National Institute for Health Development (NIHD) smoking prevalence was surveyed in co-

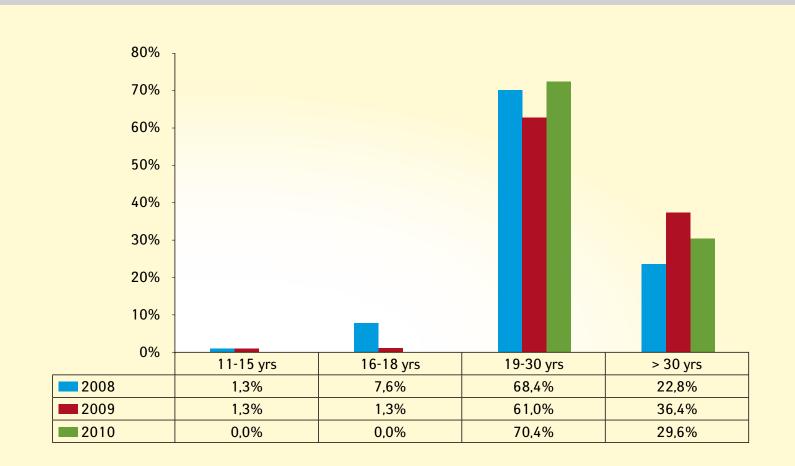
operation with the Medical Service of the Estonian Defence Forces (EDF) in 2008, 2009 and 2010. The aims of the survey were: to collect information on the smoking prevalence among the regular members/officers of EDF, to decrease the tobacco consumption in the army, to ensure the availability of smoking cessation counselling service, to train the military medical personnel for providing medical counselling service and nicotine replacement therapy (NRT) to patients, to raise the awareness about harmful effects of tobacco.

#### The research method

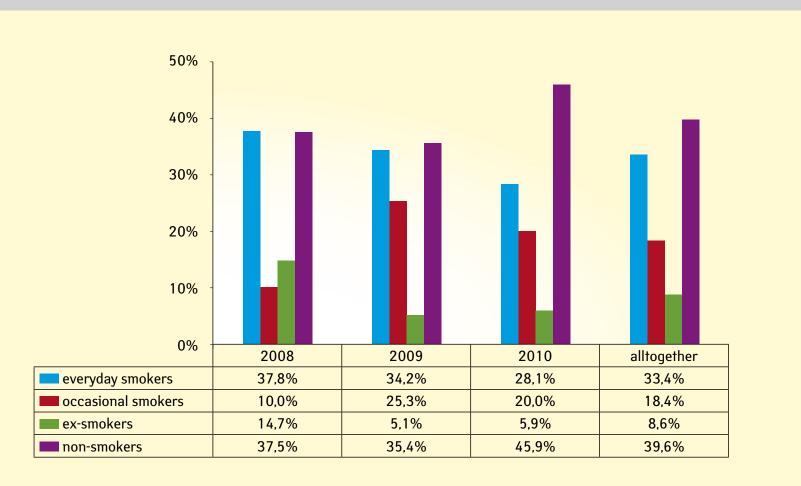
A poll once in a 3-year period within a medical examination. A Eurobarometer questionnaire adapted to the defence forces was used (ENSH 2003)



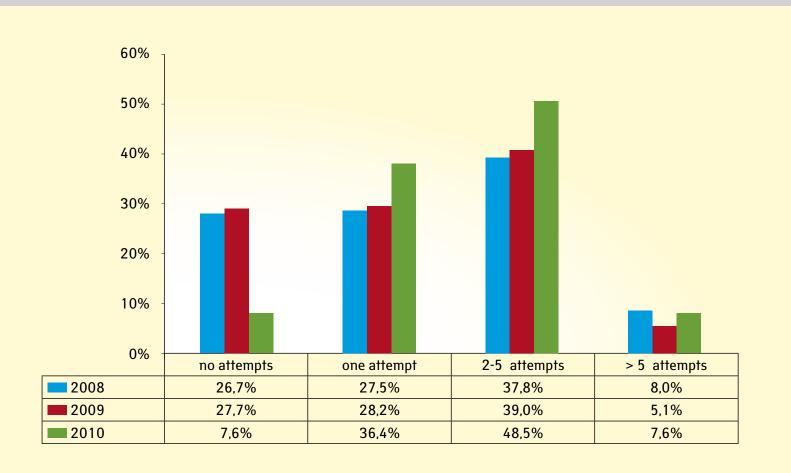




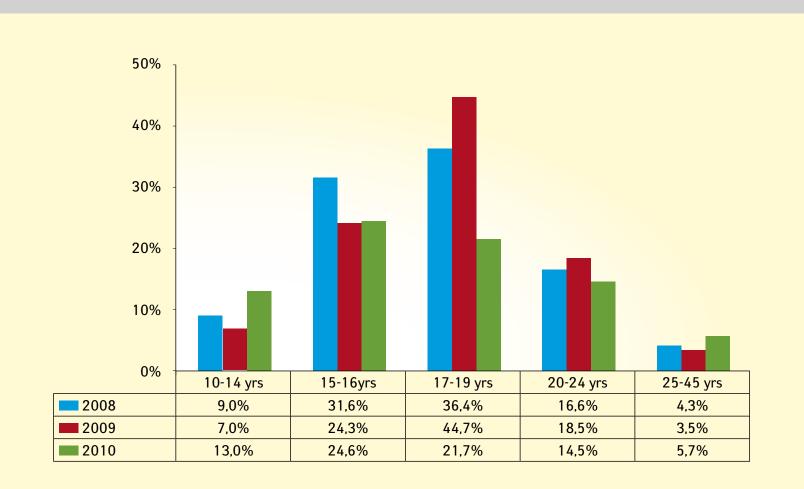
Distribution of the participants in smoking prevalence studies by age groups in Estonian Defence Forces in 2008-2010



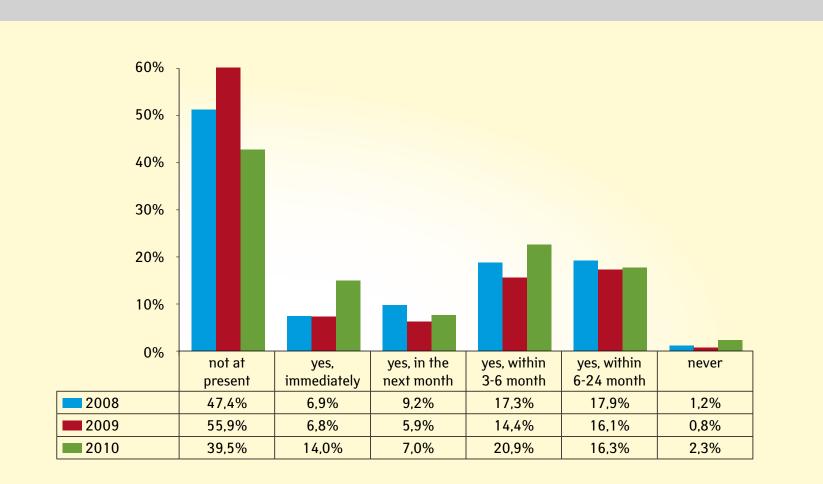
Smoking prevalence among the regular members of Estonian Defence Forces in 2008-2010



Frequency of the attempts to stop smoking among the regular members of Estonian Defence Forces in 2008-2010



Age of beginning to smoke among the regular members of Estonian Defence Forces in 2008-2010



Willingness to stop smoking among the regular members of Estonian Defence Forces in 2008-2010

### Results

- Smoking prevalence among the regular members of EDF (52%) exceeded smoking prevalence among Estonian male population (46%) in every year of the survey.
- 2 The prevalence of everyday smokers among the regular members of EDF was 33.4% as the average of three years, incl. 37.8% in 2008; 34.2% in 2009 and 28.1% in 2010, which is lower than the prevalence of everyday smokers

among Estonian male population – 38.6% (NIHD 2008) and 36,8% (NIHD 2010).

- The prevalence of occasional smokers among Estonian male population was 7.4% in 2007, among the regular members of EDF the indicator was 18.4% on average, incl. 10.0% in 2008; 25.3% in 2009 and 20.0% in 2010 respectively.
- The average number of cigarettes smoked per day was 15

among the regular members of EDF.

- **5** 70.8% of the subjects had tried to stop smoking on their own; the most frequent number of attempts was 2-5 (40% of respondents).
- **6** The regular members of EDF have not undergone smoking cessation counselling; however, nearly half of the subjects are not willing to stop smoking immediately.

## Conclusions

The US Institute of Medicine has prepared recommendations to substantially reduce smoking among military people and to achieve a smoke free army in all military services over time. Stronger steps toward eliminating tobacco use in mili-

tary population (forces) for Estonian Defence Forces are: to stop selling tobacco products in army; to establish tobaccofree medical centres and to implement tobacco-free medical facilities; to ensure that all military personnel have quick and easy access to comprehensive, evidence-based tobacco cessation service; to ensure that health care providers should be able to provide brief counselling and nicotine-replacement therapy (NRT) to patients etc.

