

# Alexandr Nemtsov's Pioneering Work on Alcohol in Modern Soviet and Russian History

by Denny Vågerö

He wasn't a scoundrel, actually; he was an honest man. Maybe he could drink too much on occasion, but who didn't nowadays? The sick, possibly, or those who couldn't get hold of anything. Those who possessed nothing they could drink.

Vasil Bykau (1924– 2003), perhaps the greatest writer in Belarus ever, and widely read and loved in Russia also, describes Stupak Petrov in his book “The Veteran” (“Afganets”). The war in Afghanistan is over, the Soviet Union is gone. It is significant that Stupak, on returning from Afghanistan, loses his wife, and is left to himself and to the bottle.

As the Soviet Union collapsed and a new era emerged, the drinking of alcohol became a more serious problem. There were many Stupak Petrovs. Alexandr Nemtsov, in his pioneering work on alcohol in modern Russia, writes that in the 1990s Russian drinking was “taking more lives than crime, Afghanistan and the two Chechen wars”. As research into Russian drinking has progressed, the severity of the problem has become much clearer. In 2010, a Russian boy aged 15 has just above a 50–50 chance of surviving to the age of 60; this is much worse than in many other so-called developing countries, such as Pakistan, India, Bangladesh and Kenya (Rajaratnam et al., 2010). Alcohol is a key contributor to this sorry state of affairs.

Södertörn University is now able to present, for the first time to western readers Alexandr Nemtsov's *Contemporary History of Alcohol in Russia*, an outstanding piece of scholarly work. Nemtsov's work on alcohol in Russia and the work which we have pursued at Södertörn University on health in Eastern Europe share many common themes. It has eventually brought together researchers in Moscow and Stockholm in a collaborative effort to make this publication possible. The material presented here constitutes a comprehensive and unique collection of information, much of which has not been known outside Russia before. The text is an edited translation of the Russian original, where Howard Goldfinger laid the ground work and Andrew Stickley with Erland Jansson and Jonathan Robson gave the text its final shape. The original text has been somewhat extended by Alexandr Nemtsov himself.

## Russian drinking in the blurred mirror of history

The consumption of alcohol in Russia today is a cause for concern, but there is also a centuries-old mythology about its nature. The “Russian Primary Chronicle”, or “A Tale From Times Gone By”, recorded by the monk Nestor in the 1100s, is a prime source of myths about Russian drinking. Nemtsov points out that it was written more than a century after the events it describes. The chronicle tells of how Prince Vladimir of Rus’, in agreeing to convert his people to Christianity rather than Islam or Judaism, also made it possible for them to go on drinking alcohol. Some modern writers have seen this as “sufficient reason for the whole country to embrace the faith”, for instance Stephen White in his influential book “Russia goes dry” (1996). However, later historians have cast doubt on this popular idea. Geoffrey Hosking writes that it was geopolitics that decided the choice of religion. “The most important consideration was that he [Vladimir] wanted to maintain close links with Byzantium” (Hosking, 2001, p. 38). Segal, (1987, p. 6–7) writing about this period, explains that “a large body of historical documents shows that all the tribes of northern, eastern and central Europe had a tendency to indulge in periodic excessive drinking...” and asks further “whether the Slavs imitated the drinking customs of their Norman Masters [the Varangians] or developed the pattern of heavy drinking independently?” In other words, as the first Russian state took shape, Russian drinking habits may not have been unique at all, but common to many peoples in Northern, Central and Eastern Europe.

This book is important in that it gives a rich background of facts and evidence to the contemporary drinking problem. Nemtsov identifies and rejects some of the mythology. He points out that historical writings about Russian drinking habits in the past are often based on observations, not of the majority of the people and their actual drinking habits, but of smaller circles of people, often around the court, amongst the urban elite or in Moscow taverns. *Kabaki* (taverns) and royal and boyar feasts are the source of almost all the famous descriptions of Russian drinking in the medieval period”, he explains. And furthermore: “Foreigners’ descriptions of Russian drunkenness are almost exclusively based on observations of Moscow taverns, more rarely of Novgorod’s and two or three other large cities to which foreigners were allowed access while traveling” (Nemtsov, p. 88). If this is indeed the case we should call on modern historians to help us establish a much clearer picture of early Russian drinking, at the court, and in towns and villages.

In the 1700s, Peter I, the great modernizer of Russia, helped to spread the practice of drinking vodka by introducing daily vodka rations for the navy and the army. Peter and his court were themselves often heavy drinkers, but their drinking was not representative of the population at large, as Nemtsov alludes to. Petrine drinking is reflected in world literature and has therefore colored

our view of drinking in Russia, especially I presume from a vantage point outside Russia itself. Swedish author August Strindberg, who was a great admirer of Peter the Great, wrote a short play about him. He learnt about Peter from the biography by Waliszewsky (1899). Strindberg portrays Peter as someone who starts drinking vodka in the early morning, alone, and continues throughout the day, both on his own and in company (Strindberg, 1905). In Strindberg's mind the great man had to be a great drinker, a view that is common across many cultures.

George Munro, writing about the period of Catherine the Great, quotes a light-hearted set of rules which were pinned up on the wall in a St. Petersburg Tavern: "Eat for sweetness and for taste, but pour moderately, so that everyone might always be able to find his legs as he goes out the door" (Munro, 1997). It indicates that, in the new capital on the Neva river, at least a modicum of caution had then emerged around drinking and its consequences.

Orlando Figes, in his "cultural history of Russia" (*Natasha's Dance*, 2002) also challenges some of the mythology: "contrary to the mythic image the overall consumption of vodka was not that great (in the year there were two hundred fasting days when drinking was prohibited)". He also maintains that "it was the test of a true Russian to be able to drink vodka by the bucketful... drinking was a social thing – it was never done alone – and it was bound up with communal celebrations" (Figes, 2002, p. 167). Presumably, by "a true Russian" Figes refers to the male variant, since a true Russian woman would have hardly fit such a description.

Smith and Christian estimate the annual consumption of alcohol at around 5 liters for every adult male in 1790 (Smith & Christian, 1984). Nemtsov notes that in the European part of tsarist Russia alcohol consumption during the 1800s reached its peak, at 6.2 liters per person in 1863 (Nemtsov, p. 89). This peak, interestingly enough, followed on from the abolishment of serfdom in 1861, another great transition in Russia, and on a subsequent lowering of alcohol prices in 1863. Nevertheless, average levels of alcohol consumption in the 1700s and 1800s were not remarkably high. In fact they were often lower than in other European countries. In Sweden, in 1863, per capita consumption of alcohol was 9.6 liters in the adult (15+ years) population (CAN, 2008).

The pattern of drinking heavily at each drinking session was well established in Russia at this time and upheld by the cultural norms of the elite, including the court. Rural (village) drinking traditions, which were focused around important social occasions, could also include excessive drinking, but they were originally not based on vodka, but on weaker kinds of fermented drinks, such as *kvas*, *braga*, beer or wine. Engeltardt, a prominent St. Petersburg chemist who was exiled to rural Russia (Smolensk region) in 1872 observed the habits of "the Russian village": "They drink, they begin to get rowdy, the conversation livens up, but never does it take an immodest turn" (quoted from Frierson, 1997). Engeltardt contrasts this with the excesses of the St. Petersburg aristocracy. In fact, as

Frierson points out, Engelgardt sees Russia as caught in a binary lock, with the St. Petersburg aristocracy and the village constituting the two contrasting poles and, indeed, two drinking cultures.

With Nemtsov, we may conclude that drinking in Russia during the tsarist era was not greater than in many other European countries in terms of the amount of alcohol that was consumed. What was different was rather the style of drinking. One must also admit that we know very little about the variation in amounts and styles of drinking in the Russian population during this era. Such differences could have been very large between geographical areas, ethnic groups and social classes. Gender differences were certainly significant. The social, religious and ethnic division of Russia must to some extent have been mirrored in different, relatively distinct, drinking traditions (Segal, 1987). Unfortunately, here too occur weaknesses in our knowledge of the subject. Thus, in spite of the low average consumption of alcohol in Russia as a whole there may well have been segments of the population whose per capita consumption was very high, while in others people hardly drank alcohol at all. Christian, for instance, gives per capita consumption of vodka per annum in St. Petersburg in 1858 as 23.1 liters (Christian, 1990, p. 73). Such pockets of extreme alcohol consumption are likely to have had a disproportionate influence on population health and life expectancy, but similar patterns would have been found over much of Europe at this time.

As Russia mobilized for World War I, a ban on alcohol sales in cities was introduced. In August 1914 it was extended “to the end of the war” by an “imperial decree” from Nicholas II. One of the first acts of the new Provisional Government under Kerenski, in March 1917, was to introduce the permanent prohibition of alcohol. In November 1917, the new Soviet power took the decision to destroy all existing stocks of alcohol. The Soviet Union was born in the midst of war and civil war. The three governments that succeeded each other, from that of the tsar to that of Kerenski to that of Lenin, were all trying to keep the country “dry”. Not until 1921–22 were wine and beer sold freely again. Vodka (40 percent ABV) was not sold freely again until 1925.

From this dry beginning of the new Soviet state, alcohol consumption could only increase, and so it did. The 1917–1945 period is especially interesting, particularly the conflict between the state deriving tax revenue from high levels of vodka consumption and the issue of maintained social and public health through the curtailment of excessive drinking. The former turned out to be the stronger. However, Nemtsov gives evidence that the increase in alcohol consumption in the inter-war period was modest. This is consistent with the rapid increase in life expectancy during this period, when Russia moved out of poverty and illiteracy.

In spite of revolution, civil war, famines and repression the health of the population improved markedly during the first decades of Soviet power. Stephen

Wheatcroft has shown that historical traumas, like the civil war and the Volga famine of 1921–1922 or the Ukrainian famine of 1932–1933 certainly interrupted the underlying long term trend of improved population health, but never steered it off course. There was a long-term trend towards rapid secular improvement in welfare and life expectancy, which was accompanied by massive short-term welfare and mortality crises (Wheatcroft, 1999). The latter were closely linked to, indeed driven by, political changes, but unlike for post-war mortality fluctuations, alcohol did not play a major role in pre-war mortality fluctuations.

The full consequences for population health of Russia's tormented history still remain to be worked out. Today we know that those individuals who experienced and survived such hardship and trauma may have been scarred for life in a number of ways, especially if they were young when it happened. Children born during the Ukrainian famine, for instance, have been found to be more prone to diabetes in adult life (Khalangot, 2008) and people growing up in St. Petersburg during the siege 1941–44 are more likely to suffer from hypertension, circulatory disease and breast cancer decades later (Sparen et al., 2004; Koupil et al., 2009). Whether hardship in childhood makes people more likely to take up drinking in later life, perhaps in particular at times of new hardship, is a very relevant, but still unanswered, question.

It is the period following World War II, 1950–2000, which is in focus in this book. And, Nemtsov writes, this is a period when the modern problem of excessive drinking takes shape and, finally, gets out of hand totally, thereby contributing to the long term stagnation and deterioration of the health of the population.

## Post-war developments trigger massive increases in alcohol consumption and stagnation in the population's health

The substantial increase in alcohol consumption during the Soviet era took place primarily after World War II. "A particularly coarse culture of alcohol consumption formed in Russia in the post-war period", Nemtsov writes (p. 92). Therefore, he maintains, it is during this period that alcohol becomes of major importance as a driver of health developments and as a factor behind stagnating or falling life expectancy. In spite of the "Iron Curtain", Soviet drinking trends reflected international trends of rising alcohol consumption as people had more money. This is not the whole picture however. Is the increase in purchasing power sufficient explanation, Nemtsov asks? Or are there also long term political and social forces driving this development? Alcohol consumption rose steadily through the period of "thaw" and the period of "stagnation", he observes, with levels of consumption being twice as high in 1980 as in 1960. To me, it seems likely that the

stagnation period is a key factor. As early as 1970 Andrei Sakharov had warned that Soviet Union was in danger of “stagnation” or “*zastoy*”:

In the course of the past decade it has been possible to discern worrying signs of discord and stagnation in the national economy of our country. ... The real income of the population has scarcely risen at all, food, medical care and everyday services have improved extremely slowly, and differently from region to region. The shortage of goods is becoming more common. ... What is particularly worrying for the future is the stagnation in education... Alcoholism is tragically on the increase and drug addiction is beginning to make its presence felt. In many parts of the country, criminality is rising systematically. In many areas there are increasing symptoms of corruption... There is no way out of the difficulties that the country is facing other than to set off on a path towards democratization. We still have the opportunity to set the right course and to carry out the right reforms. In a few years it could well be too late.

The latter conclusion was prophetic. Sakharov, with Valentin Turchin and Roy Medvedev, wrote their letter of appeal in March 1970. It was addressed to Brezhnev, Kosygin and Podgorny, who then headed the Communist party, the Soviet Council of Ministers and the Presidium of the Supreme Soviet, respectively. Their outspoken warning that inactivity might have “disastrous consequences” was ignored, as was the letter as a whole. In fact it became classified information. Not until 1990, under Gorbachev, was the letter published (Sakharov et al., 1990). Turchin, after Sakharov’s death, claimed that this letter was the beginning of *glasnost*, the first attempt to end the period of stagnation (Turchin, 1991). Indeed, many of the demands in this letter became part of *glasnost* and *perestroika* (Brown, 1997).

### **Stagnation, Collapse and Transition: Negative Mortality Trends**

The fate of stagnation of Soviet society can perhaps be said to have been sealed in the aftermath of the events of 1968. The five-country occupation of Czechoslovakia and the resistance to it across Europe threw Soviet and East European leadership into something of a bunker mentality. Repression increased in Eastern Europe. The Sakharov letter had claimed that any attempt “to put the screws on would not only fail to solve our problems, but would aggravate them and finally lead the country into a tragic road of no return” (Brown, 1997). But the screws were put on for the next fifteen years.

Stagnation is an appropriate characterization of the whole period from 1968 to 1984 also in terms of life expectancy and health. This contrasts with the 1945 to 1965 period when both adult and child mortality fell. In terms of health, I believe we can distinguish between two periods, the first two post-war decades with positive life expectancy trends (partly driven by control of infectious disease mortality among children) and stagnation from 1968 to 1984. In contrast to the

falling infant and child mortality rates, mortality among adult men was rising slowly and there was a rise or a standstill among adult women over the whole stagnation period in almost all the communist-led countries in Europe and in each of the republics of the Soviet Union, including the largest, Russia (Mezentseva & Rimachevskaya, 1990). It was a system-inherent problem, tied to the way the system was managed. Men were hit harder than women, adults more than children and working-age men most of all. The disease was eating its way into the heart of the Soviet power structure. The system could not deliver health improvements to its people.

The whole stagnation period was also characterized by a fairly steady increase in alcohol consumption. Perhaps as a response to this, statistics about alcohol consumption and alcohol-related deaths were suppressed during this period. This is a matter well documented in this book. To me, it seems likely that the successive and long term increases in alcohol consumption, at least up to 1985, were partly determined by the desperate hopelessness of a stagnating society.

But Alexandr Nemtsov also shows that this increase in alcohol consumption starts as early as the aftermath of World War II and continues into the first decade of the third millennium. In fact, the present very high levels of alcohol consumption are historically unprecedented. They represent the highest point of a several decade-long rising trend, admittedly with sharp temporary fluctuations. About these fluctuations Nemtsov writes, "that the sharp, often contradictory, changes in alcohol consumption ... often coincide with changes in other historically important aspects of Russian life, in particular the political" (p. 49). What is also true is that these sharp changes are mirrored in changes in mortality and life expectancy. Nemtsov's book, in a convincing fashion, brings this out. As Nemtsov as well as other observers have noted, the synchronicity of these changes suggests a causal relation.

Perhaps, we can identify two major drivers behind the post-war development of alcohol consumption. First there is the fact that people are getting more money and can better afford to drink. Secondly, there are a number of fundamental political and social developments that can be summarized as thaw, stagnation, *perestroika*, system collapse and transition to market economy, the latter with several ups and downs. These changes obviously have a huge impact on the ability, willingness or need to drink, to cope with grief, give comfort, to do business or simply for the enjoyment. The increase in drinking during periods when poverty increases rapidly, as in 1991–94, is unexpected from a conventional point of view. Jukkala et al. (2008), analysing Moscow data, have suggested that among men poverty increases the likelihood of excessive drinking, while among women poverty is more clearly linked to abstinence. Rojas et al. (2008), analysing data from Taganrog in Southern Russia noted that among men poverty and economic strain made both extremes on the drinking continuum (abstinence and heavy drinking) more likely. The net balance

of these contradictory influences during recession can obviously be quite different from what is predicted by a simple economic model of drinking, based on price elasticity of alcohol as the main factor.

Furthermore, alcohol drinking habits are transmitted culturally through friendship networks and families in such a way that a drinking father is more likely to have a drinking son than is a non-drinking father (Velleman, 1993; Velleman & Orford, 1990) while a friend who drinks is more likely to make you yourself drink (Rosenqvist et al., 2010). Skog (1985) makes a distinction between wet and dry cultures. The implication is that friends and acquaintances, as well as social norms in general, are more likely to encourage you to drink in a wet culture than in a dry one. Thus the web of social contacts can help reinforce and multiply changes in drinking habits that are triggered by social and political events, thereby creating large fluctuations over time, much like the ups and downs of a contagious disease. In a wet culture, in particular, the magnitude of such fluctuations can be considerable, as the case of Russia proves.

Alcohol is not the only cause of alcohol-related mortality (Nemtsov, 2008). There is much work to be done if we are ever to answer the question: “Why does Ivan drink?” Such work would benefit from sociological surveys in this field, in close collaboration with epidemiologists (Carlson, 2009). This has been the approach taken by the Stockholm Centre of Health of Societies in Transition (SCOHST) at Södertörn University which I led from 1997 to 2007 and which has been working together with the Institute for socioeconomic studies of the population (ISESP) in Moscow (Carlson, 2001; Carlson & Vågerö, 1998; Ferlander et al., 2009; Jukkala et al., 2008; Leinsalu, 2004; Mäkinen & Reitan, 2006; Rojas & Carlsson, 2006; Rojas et al., 2008; Stickley, 2006; Stickley et al., 2008, 2009a; Stickley & Carlsson, 2009; Vågerö & Kislitsyna, 2005).

## Extremes of alcohol policy: 1985 and 1992

In May 1985, as one of the first measures under the new general secretary of the Communist party, Michael Gorbachev, the last big Soviet-style campaign was set in motion, a campaign to curb alcohol consumption. It was a forceful and ruthless campaign, which included a variety of measures from the promotion of fruit juice drinking to price rises on vodka, the closing of vodka distilleries and the up-rooting of century-old vines in Georgia, amounting in fact to semi-prohibition. Soon afterwards, Gorbachev launched two further campaigns which were, however, different from what had been seen in most previous Soviet-style campaigns. They became known as *perestroika* and *glasnost*. *Perestroika* meant it was possible to challenge party views in all fields and *glasnost* meant that it was possible to report more honestly what was going on in the country. These

changes electrified the country and broke the long period of stagnation. The impact was great across the whole of Eastern Europe and beyond.

The vitalisation of the system resulted in a rapid improvement in life expectancy. The combination of the anti-alcohol campaign, perestroika and glasnost, was in my view a powerful factor behind the surge in life expectancy that took place from 1985. In 1987 life expectancy in Russia was 65 for men and 74 for women. It has never in Russian history, before or after, been higher. Alcohol consumption in 1987 was back to the level of the 1950s.

Gorbachev's anti-alcohol campaign, as Therese Reitan (2001) emphasized in her account of its reception, was generally seen as successful by the medical profession, which was looking at the decreasing mortality rates. Political scientists, on the other hand, saw the campaign as a failure, as the last Soviet-type campaign, and as one which undermined confidence in the political leadership among the people. In fact, some observers claimed that the anti-alcohol campaign helped to undermine the system and thus contributed to its later downfall. One intriguing aspect of Nemtsov's book is that it reveals what happened behind the scenes during the Gorbachev-era anti-alcohol campaign. It is clear that it was used as a tool in the internal battle in the Central Committee, finally helping to undermine Gorbachev.

The suppression of alcohol markets during the anti-alcohol campaign also gave rise to a wider clandestine illegal or semi-legal production, first as home-brewed alcohol (*samogon*) but later as organised production and distribution on a larger scale. This is one negative consequence of the anti-alcohol campaign that Nemtsov discusses at length. He points out that the embryo of an illegal production and distribution network, covering the whole of the Soviet Union, was being formed during this period.

The collapse of the Soviet system between 1989 and 1991 was followed by an almost unprecedented fall in life expectancy for men in Russia, by seven years between 1987 and 1994. In Russia, as well as in the 14 other republics of the former Soviet Union, mass poverty, uncertainty about the future and excess drinking were driving forces in this development. Drinking was facilitated by the market reforms of 1992, when the alcohol market was deregulated in ways which would have been unthinkable in any West European country. For those who could not afford vodka at its market price, cheap surrogate alcohols were widely available, usually in the form of technical alcohol. They could also be presented as medical tinctures or eau-de-cognes, but were in fact concentrated ethanol (Leon et al., 2009).

### **World War I Semi-prohibition and the Rise of Samogon**

In 1905, when the war with Japan broke out, mobilisation of Russian soldiers failed, due to wide-spread binge drinking, triggered by the order to mobilise. In 1914, and in order to guarantee the mobilisation of soldiers for the war effort,

the sale of vodka was banned in cities. The ban was intended to last for the entire war, but in 1914 no one expected the war to be drawn out over several years.

This early prohibition episode has been studied by several scholars (Vvedensky, 1915; Karlgren, 1916; Christian, 1995; Stickley et al., 2009b). What were its consequences? There is some evidence that alcohol consumption fell quite sharply. But it is also true that the consumption of illegal alcohol (homebrewed) and surrogates increased. David Christian, in his analysis of this episode (1995) suggests that

from the point of view of the Russian government it must be counted as a total, even a disastrous failure. From the point of view of Russian drinkers it must be counted an unexpected though difficult victory, and one whose consequences endured well after the conclusion of the formal ending of prohibition in 1925.

The “victory for drinkers” referred to by Christian was “the emergence and spread of samogon” (brewed alcohol).

The monopoly over liquor successfully built up by consecutive tsarist governments was destroyed by the emergence of wide-spread domestic production of samogon. Christian maintains that “post-Soviet Society continues to pay the price today for the failures of earlier attempts to control alcohol consumption”. This is a conclusion that is exactly in line with Nemtsov’s analysis of the 1985 campaign.

A close observer of these events was Anton Karlgren, professor of Slavonic studies in Copenhagen and a journalist at the Swedish daily newspaper, *Dagens Nyheter*, who travelled in Russia during the first period of World War I. In his book (1916), about the prohibition episode, he took a different and more positive view. He concluded that alcohol consumption had gone down, but he was concerned that the drinking of surrogates like eau-de-cognes, medical tinctures and varnishes etcetera had risen. Karlgren observed that in St. Petersburg the number of people admitted to alcohol abuse clinics had fallen, indicating a fall of excessive drinking. At the same time the number of pharmaceutical outlets in St. Petersburg had increased, indicating a rise in the drinking of surrogates. Karlgren’s conclusions were partly based on his own observations and interviews in Russia. But he also studied a number of interview surveys, undertaken in the *gouvernements* of Moscow, Penza, Poltava, Kharkov and Kostroma. The validity of these surveys is doubtful, however. Although the number of respondents was large (2,000 in Penza), these constituted only a fraction of the number of questionnaires sent out (around 20,000 in Penza) (Nemtsov, personal communication). There must be a large amount of uncertainty about any conclusions based on these surveys, which are however still quoted in the scientific literature.

Karlgren, of course, was writing for a Swedish audience, where a similar discussion to that in Russia about the evils of alcohol drinking was taking place,

resulting six years later in a (Swedish) referendum on the prohibition of alcohol, a proposal which was rejected with the smallest possible margin.

Vvedensky was one of the leading contemporary researchers of the 1914 anti-alcohol law in Russia (Vvedensky, 1915). He pointed out that there was in fact rather limited support for the restrictive policies. There were only seven Russian medical societies and medical services which publically supported this law. He wrote: "One can't deny that this list is short or at least shorter than we wished or hoped it could be". And "without vodka there appeared a kind of emptiness in the structure of the common people's life ... adjustment to new conditions assumes painful and even dangerous forms".

In conclusion, the evaluation of the 1914–18 prohibition was as controversial as was the verdict on Gorbachev's anti-alcohol campaign 70 years later. Both campaigns also became part of the battle for power inside government. According to Karlgren, the proponents of prohibition during World War I found in this reform a useful weapon to undermine Kokotsev, president of the Tsar's council and finance minister. Nemtsov, similarly, points to the efforts to use Gorbachev's campaign to undermine his position (Nemtsov, p. 102-104).

We can conclude, from these two experiments in prohibition or semi-prohibition, that a reduction of alcohol drinking, especially binge drinking, does indeed reduce illness and premature death. At the same time, however, alcohol drinking can only be reduced in the long run if the means used to reduce the problem are accepted by the large majority of the population.

## Scramble for control of alcohol markets – legal and illegal

SCOHOST at Södertörn University followed the Russian media systematically during the 1990s. This was reported in a newsletter, called "The Alcohol issue in Russia and the Baltic Sea Region" ([www.scohost.se/alcohol\\_issue](http://www.scohost.se/alcohol_issue)). Looking at these newspaper articles again one is met by stories of how those who were trying to take control of the alcohol market operated on the limit of what was legal and sometimes beyond it, for instance taking over legal brands by violent means. The terms "alco-mafia" or "alco-barons" are used. One of the most intriguing aspects of Nemtsov's book is the insight it gives into how the "alco-mafia" grows in Russia by operating both legally and illegally and in the grey area in-between. Nemtsov gives an account of how the early criminal structures, operating the clandestine alcohol market, grew and helped to establish the new market actors in the 1990s. This was perhaps the first structure that was ready to operate on a national scale in the new market economy of 1992.

The 1992 reforms to liberalise alcohol markets had managed to deprive the Russian state of the very substantial tax revenue from alcohol, which it always

enjoyed previously, at the very moment when alcohol sales increased sharply. The state had resigned from its responsibilities and the profitable alcohol trade produced a fierce battle for control across Russia. Nemtsov describes how North Ossetia emerged as a key region in terms of both illegal and legal production of alcohol in the 1990s. The illegal import of untaxed wine or spirits from outside Russia, usually through South Ossetia, played a key role in this. The unknown “vodka war” between Russia and Georgia in 1997 is described in some detail by Nemtsov. It gives additional background to the 2008 war between the two countries.

Another observer, BBC journalist Misha Glenny, writes the following in his book about global organised crime.

Between 1991 and 1996, the Russian state effectively absented itself from the policing of society, and the distinctions between legality and illegality, morality and immorality barely existed. In any event, there were no hard-and-fast definitions of organised crime, money-laundering or extortion and by implication all commercial transactions were illegal and legal at the same time. This applied as much to drugs and women as it did to cars, cigarettes and oil. Had the rule of law prevailed at the time, then there is no question that the oligarchs’ behaviour would have warranted severe punishment. (Glenny, 2009)

Glenny did not discuss alcohol in his book. It would have been a natural extension to his theme about global organised crime, and in the case of Russia it amounts to a grave omission. Nemtsov, in contrast, highlights the issue. He demonstrates that alcohol was deeply embedded in the birth of the criminal or semi-criminal oligarchical system of that decade. Further, it is clear that this system reached out beyond the borders of Russia.

Today, the Russian state has managed to regulate alcohol markets to a certain extent. There is again substantial tax revenue from the trade, but there has been very little success in controlling and reducing drinking. However, the first signs of a change are there. President Putin, raised some concerns in his speech to the nation in 2005 (Putin, 2006), and his successor Dmitri Medvedev in 2009 acknowledged that Russian alcohol drinking is a serious problem, indeed “a threat to national security”. Medvedev also commented positively on Gorbachev’s anti-alcohol campaign, but at the same time opposed demands for a ban on sales of alcohol (*Ria Novosti*, 19 January 2010).

## Russia and Europe – is there a need for a common agenda of alcohol control?

The 53 countries which form the European Region of the World Health Organisation are all found in the region of the world where the level of alcohol drinking is highest, and probably also where it takes the highest death toll

(WHO, 2005). Furthermore, mortality variation across Europe is great and is in no small part influenced by European alcohol consumption patterns.

European mortality trends started to diverge from the late 1960s, mainly because of the long period (1968–1984) of health stagnation in the countries that then made up communist Europe. Glasnost, perestroika and the anti-alcohol policies of Gorbachev broke this stalemate in the East, but the collapse of the system in 1989–91 led to an immediate widening of health differences between Eastern and Western Europe. This has been referred to as the European Health Divide (Vågerö & Illsley, 1992) or the European Mortality Divide (Bobak & Marmot, 1996). In 2005 life expectancy for men differs by around 16 years between the old EU (15 old members) and Russia, but the 12 new members of EU have eventually begun to catch up with the old. The European Health Divide has grown, and at the same time moved eastwards, leaving countries like Russia, Ukraine, Belarus and Moldova at an increasing health disadvantage (Vågerö, 2010).

Jürgen Rehm, a leading European alcohol researcher, makes a convincing case for alcohol being an important factor in the health differentiation between countries in the European Union as well as across Europe as a whole. In particular, alcohol contributes to the large (and increasing) life expectancy gap between Russia and the countries of Central and Western Europe (Rehm et al., 2004; Rehm et al., 2007b).

Rehm (Rehm et al., 2007a) estimated the alcohol-attributable fraction of mortality in Russia to be 18 percent for men aged 20–64, for women in the same age group it was estimated to be 9 percent. The authors suspect that this estimate may be biased downwards. A previous study by Rehm et al. (2006) covering European Russia and men in age groups 15–59 estimated this fraction to be 27 percent for men. The underestimation of the death toll attributable to alcoholic beverages which Rehm and coauthors worry about in their study may only be part of the problem. Western epidemiology, until very recently, has long missed out the fact that large quantities of alcohol in Russia are drunk as surrogate liquids of very high alcohol content, which allows fast and potentially lethal intoxication. Surrogate liquids are discussed by Nemtsov. Some of the studies quoted in this introduction were not published until after the Russian original of Nemtsov's book was already finalised, but in most ways they tend to support or reinforce the conclusions drawn by Nemtsov. Leon et al. (2007) in their study of mortality in Izhevsk, Russia, focused on the contribution of surrogate alcohol, estimated by them to be drunk by around 8 percent of men in this region. Surrogate drinking or other types of extreme alcohol drinking were estimated to account for 43 percent of mortality among men aged 25–54 in Izhevsk. A later study published in the *Lancet*, suggests that more than one in two deaths among Russian men in that age group, and a third of deaths among women, may be attributable to excessive alcohol drinking, including

surrogates (Zaridze et al., 2009). The latter study therefore concluded that alcohol is of even greater importance than tobacco for premature death in Russia.

There is no doubt today that a very considerable fraction of male working-age mortality in Russia is attributable to alcohol (Shkolnikov et al., 2002; Leon et al., 2010). This is also one of the major points addressed in Nemtsov's book.

Female mortality is linked to women's alcohol consumption to a much smaller extent. Male/female differences in drinking are in general greater in the eastern than in the western parts of Europe. Consequently, the drinking habits of women in Central and Eastern Europe differ much less from women in the West, than do the drinking habits of the men in the same comparison. Among women in the UK, in fact, heavy drinking is slightly more common and abstention less common than among women in both Poland and Russia, an unexpected finding reported in a European collaborative study (Rehm et al., 2007b).

We may conclude that alcohol consumption patterns in Europe have a considerable impact on health differences within Europe at large, both between countries and within them (Norström, 2002). They also contribute hugely to gender differences in life expectancy across Europe – but most notably in Russia.

Further, the politics and economics of alcohol in the old and new member states of the EU, in the Balkans, Russia and Ukraine as well as in all the other post-Soviet republics are connected in a myriad of direct and indirect ways. Policies in one country are obviously influenced by the situation in neighbouring countries. States adjust their taxes and policies in relation to what neighbouring countries do and in particular to the legal, semi-legal and illegal trade in alcoholic beverages across the continent and beyond.

Some countries have felt themselves forced into a negative spiral of reducing taxes on alcohol and relaxing alcohol control policies. The smuggling of vodka from Russia to Estonia played a part in setting low taxes in Estonia. When Estonia joined the EU in 2004, Finland lowered taxes to deter Finns from going to Tallinn and buying large quantities of cheap alcohol. Swedish alcohol taxes were lowered as a response to the growing illegal and semi-legal import of alcohol from Germany and other countries. The alcohol trade in Europe, including that in Russia and Ukraine, feeds on the very large differences in prices and policies between countries and regions in Europe. The net result of such regional dynamics in Europe has been a reduction in taxes on alcohol, the deregulation of alcohol markets, increasing levels of alcohol consumption and a growing concern about alcohol-related problems across the European region at large.

The implications of these facts are far-reaching, yet not recognised at the highest level in Russia, nor elsewhere in Europe. Is there then cause for concern in the European region? Yes, indeed there is.

The World Health Organisation (WHO) in Europe, European governments and in particular the EU should now take a much more proactive role. EU

policies which previously looked upon alcohol as just another commodity to be traded in the single market have had a negative impact. These policies represented the traders' view, rather than that of public health. Similarly, Russian and Ukrainian policies have paid very little attention to the public health consequences of the legal, semi-legal and illegal alcohol trade. In these countries, too, the traders' view has been dominant, complemented by that of local or central governments who want to maximise their tax revenue from alcohol sales. Both these perspectives are in fact short-sighted. It has been shown many times, and in many countries, that the long term costs of alcohol-related disease, accidents, suicides and violence far exceeds the revenue that governments can make from taxes on alcohol.

Alcohol related problems in Europe are so closely interwoven that they could be seen to constitute one common problem (Vågerö, 2007). Maybe, therefore, European countries, including Russia and Ukraine, should look for a common solution, or at least make it a common concern and work together. The WHO Regional Office in Europe, with its new and dynamic leadership under Zsuzsanna Jakab, could play a leading role in this effort. There are new developments within the World Health Organisation that could be helpful. Its supreme body, the World Health Assembly, decided in May 2008 to call for a discussion of the means to reduce alcohol-related harm globally. The 2010 World Health Assembly decided to implement a global strategy to combat alcohol-related harm on every continent. I hope Europe will lead the way and show how this can be done in practice.

These are some steps that European governments can take immediately: European governments could pronounce as their common view that alcohol is not just another commodity to be traded in the single market, or across European borders, but rather one that gives rise to public health concern all over Europe as well as globally. European governments could aim to reduce excessive alcohol consumption across the whole continent, rather than encouraging the expansion of alcohol businesses in each other's backyards.

The EU is another important player. It should encourage, rather than discourage, member states who want to pursue a policy of limiting alcohol consumption and alcohol-related harm at home and abroad. The EU and Russia, as well as the EU and Ukraine, should also work together to formulate their common interest in this field. It is time to start a dialogue within the framework of the EU-Russia and EU-Ukraine long term collaborative agreements about ways to reduce alcohol-related harm across Europe. This dialogue could be facilitated by the WHO-Europe. It is of pan-European interest to limit illegal alcohol production in Russia, Ukraine or anywhere else, so that Russia, Ukraine and others succeed in raising alcohol price levels in the long term. The EU, Russia and Ukraine should agree on how to limit and combat illegal alcohol production and trade across Europe as well as support each other in efforts to reduce excessive alcohol consumption.

I hope also that European governments will support the idea of a legally binding Global Framework Convention on the Control of Alcohol. The example set by the adoption of a Framework Convention on Tobacco Control shows what can be done. Many international public health bodies have already embraced this idea, for instance the American Public Health Association and the World Medical Association, as well as medical journals, such as the *Lancet* (Editorial, 2007).

In developing a global strategy we can learn from the Russian experience. We should listen to the voice of Alexandr Nemtsov. He has spent nearly three decades studying this experience. It is particularly valuable that Nemtsov has followed the story of Russian alcohol from the inside and at the same time has been able to build his conclusions on both western and Russian research. It has given him a unique insight, which he shares with us in his *Contemporary History of Alcohol in Russia*. He is fully aware of the human costs and suffering that are caused by excessive alcohol drinking. But his pioneering work on alcohol in modern Russian history also brings with it a warning: a strategy to control alcohol that is not accepted by the majority of the population will not succeed.

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