

HEALTH STATUS AND LIFESTYLE IN BELARUS**A. Vasianovich, E. van Teijlingen, C. Wallace**Institute of Applied Health Science, Department of Populational Health & Department of Sociology,
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Background: The growing interest into health status and lifestyles in Post-Soviet countries relates to the social changes after the collapse of communism [1]. During that transition these countries reported a relatively higher level of morbidity and mortality [1]. For example, the life expectancy in Belarus is 13 years lower for males, and 7 for females than the European average [2]. The reasons for this are not just social and economic as in the West, but also cultural [3], and dramatic changes of a whole society's "way of life" [1], and unhealthy lifestyles (e.g. heavy drinking, smoking, poor diet & low physical activity) [1,4]. Theoretical explanations of health inequalities are well developed [5,6,7], but these have not been 'tested' in post-communist countries. Perhaps social stratification similar to Western countries does not exist in post-communist society [5]. However, measurements such as occupation, education and income level might summarise people's socio-economic status in different societies [8].

Aim: This PhD explores associations of self-reported health status with behavioural, cultural and socio-economic factors during transition in Belarus.

Method: Analysis of the Belarus part of the 2001 Living Conditions, Lifestyle & Health (LLH) Project, [9] using SPSS.

Results: For respondents aged 18 and over (n=2,000) with a 73% response rate [10], more than half reported good /rather good health status. The majority thought that it was important for good health to avoid binge drinking and not smoke (88%, 1769). Two-third thought that in terms of being healthy, it is important to visit their doctor regularly. Almost all thought that to have a healthy diet is important for keeping healthy, and only 27% thought that eating a lot of meat is important for health. Thirty nine percent agreed that health was determined by heredity and the vast majority agreed that keeping healthy depends upon lifestyle. Almost half reported having health problems or chronic diseases during their life. The most commonly reported were heart problems 26%, chronic bronchitis and chest/lung problems 20%, stomach/digestive disorder 27%, and back problems 34%. Only 2% had reported drinking some spirit as a way of treatment for different health problems. Half of the participants thought that the state of the cardiac system of a person depends on health and living conditions. The majority thought that it depends on aspects of lifestyle such as smoking, drinking and diet, and 93% that it maybe inherited. Eighty six percent reported constant stress as important factor and 30% thought that it might be affected by transformation in Belarus during the last 10 years. In general, 57% reported different levels of physical activity at work from minimal to extreme. The majority, 72% had land in their household that might be an indicator of physical activity. The vast majority thought that it is important for keeping healthy to be

active and get regular exercises. More than one third of respondents, 32% smoked at least one cigarette per day and 9% were ex-smokers. Among smokers, the main reason for smoking was a habit (15%) and that it “calms nerves” (10%). The main reason (23%) for not smoking was that it is bad for one’s own and for the people who do not smoke (89%). Only 21% reported that they never drank alcohol. Participants reported that alcohol helped them to relax (60%), to communicate (57%), to forget problems (39%) and that it was a good way to mark special occasions (84%). Also 76% disagreed that alcohol consumption is advantageous for health.

Conclusion: More than half, 57% reported their health status as good/quite good and 40% had chronic conditions that limited activities. This study details health and lifestyle behaviors in Belarus. This PhD will explore associations of the health status with different demographic, socio-economic and lifestyle variables as health predictors which might be of use to the wider Public Health in Belarus.

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