

THE USE OF TOBACCO  
IN THE CZECH REPUBLIC  
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## A) INTRODUCTION

In the majority of developed countries, tobacco use is considered one of the most serious but preventable causes of death and a whole range of chronic noninfectious diseases, especially cardiovascular, oncological and respiratory, whose treatment represents a significant economic burden on the health care system. Smoking has an effect on the overall morbidity and mortality rate of the population and hence on the average life expectancy. Tobacco consumption and exposure to tobacco smoke are detrimental to human health. In addition, tobacco consumption raises societal costs associated with reduced productivity (such as increased incapacity for work, smoking breaks, disability pensions) and higher mortality (working-age deaths, widow's and orphan's pensions, etc.). Given the continuingly high number of smokers and other tobacco users the situation can be termed a global pandemic. In order to prevent this serious health threat the World Health Organization (WHO) has elaborated an effective strategy for combating this pandemic.

The recommendations intended to limit tobacco consumption were summarised in the MPOWER document containing six key priorities of efficient strategies (WHO, 2008):

1. To monitor tobacco use and prevention policies
2. To protect people from tobacco smoke
3. To offer help in quitting tobacco use
4. To warn against the hazards of tobacco use
5. To enforce bans on tobacco advertising, promotion and sponsorship
6. To increase taxation on tobacco

The first strategy – monitoring the use of tobacco and prevention policies – forms the basis for the following strategies.

In order to carry out monitoring globally in a uniform and commensurable way, the WHO and the Centers for Disease Control and Prevention (CDC) have created the Global Tobacco Surveillance System (GTSS). This system helps commission studies targeted at various age groups such as schoolchildren aged 13-15 and their teachers, future healthcare professionals – students of medicine, pharmacology and nursing - and the adult population over 15 years of age (Warren, Asma et al., 2009).

In order to meet the needs of the countries performing the surveillance, the WHO and CDC have produced unified questionnaires consisting of key questions including instructions for use and assessment; these questionnaire forms should always be used for the surveillance of tobacco consumption (Global Adult Tobacco Survey Collaborative Group 2011).

### **Research goals and benefits of new facts**

The main goal of the research was to acquire valid and representative knowledge on smoking in the Czech Republic's adult population in aged 15-65 years. The data amassed in the population survey complements the available statistical data of the recorded consumption of tobacco yielding a distinctive insight that cannot be gained in any other way. This particularly involves defining health hazards and harmful habits as well as the demographic and social parameters of the population at risk. Being aware of the size and social and demographic characteristics of the risk groups is essential in

order to plant regulatory measures targeted at health protection as well as prevention and health care.

The data on the Czech population's smoking habits can be linked to the data collected annually since 1997. The development trends of the Czech adult smoking population have been relatively stable over the last several years, ranging between 28 and 32 % (Sovinová et al., 2014). In 2015, the prevalence of smoking among the adult population declined to 24.1%. However, the 2016 survey showed that this was a temporary decline, as the prevalence of smoking in 2016 increased to 28.6%; the observed value of smoking prevalence in 2016 did not reach the 2014 value, which was 31.4%. In 2017, smoking prevalence was again reduced to 25.2%. The analyses of trends make it possible to assess the efficiency of national tobacco policy, which is an additional benefit and hence also the reason why these studies are worth repeating periodically.

Tobacco smoking has a significant impact upon the population's health. Epidemiological research shows that in the Czech Republic 15-17% of the total annual mortality can be ascribed to smoking (Peto et al., 2003; Sovinová et al., 2008). Efforts to curb the health and related economic damage caused by smoking and alcohol consumption are a logical priority for the public healthcare system. However, the results of population surveys are also highly significant for the international scientific community. Statistics on tobacco use in the Czech Republic are part of the World Health Organization database (HFA), and serve as a source for international comparative studies and as a basis for national and international public health policies.

## **Research methodology**

In order to monitor the use of tobacco products, a set of certain key questions (Tobacco Questions for Surveys – TQS) from the Global Adult Tobacco Study (GATS) was selected. These specific parts of the survey further included demographic characteristics of the respondent group.

### *Respondent group selection and characteristics:*

Information was obtained from a group of 1806 persons selected randomly on the basis of quotas.

The group is a representative sample of the Czech Republic's adult population. In terms of the primary demographic characteristics, the sample resembles a structure of the Czech population aged 15 and over according to age and gender (Age Distribution of the Population in 2016, Czech Statistical Office 2017). The respondent group also reflects the differences along regional lines.

### Demographic characteristics of the sample

Total	N (%)
	1 806 (100)
<i>Gender</i>	
Male	880 (48.7)
Female	926 (51.3)
<i>Age group</i>	
15-24	205 (11.4)
25-44	645 (35.7)
45-64	554 (30.7)
65+	402 (22.3)
<i>Residence</i>	
Urban	1 417 (78.5)
Rural	389 (21.5)
<i>Education*</i>	
Basic and secondary vocational schools	579 (36.2)
Secondary schools with a final exam	671 (42.9)
Universities	351 (21,9)

\* Education-related category refers to adults aged 25 and over (N=1601).

#### *Tobacco questionnaire description*

The tobacco use questionnaire consisted of questions covering all of the six MPOWER priorities.

##### *Priority One – Monitoring*

Most important are the first eight questions that determine the prevalence of cigarette smoking. Additional information is provided by questions four to twelve, monitoring the use of electronic cigarettes and smokeless tobacco.

##### *Priority Two – Protection of people against tobacco smoke*

Questions 13 to 16 sought to obtain answers about exposure to tobacco smoke at home and at the workplace.

##### *Priority Three – Offering assistance with quitting smoking*

This topic is dealt with by questions 17 to 19 dealing with respondents' attempts to quit smoking and whether they have been advised to give up smoking by healthcare professionals.

*Priority Four – Warning against the hazards of tobacco consumption*

Questions 20, 21, 23 and 24 seek to identify awareness of health hazard warnings in the press, on television and on cigarette packs and their influence on smokers' intentions to quit smoking.

*Priority Five – Enforcing a ban on advertising cigarettes, their promotion and sponsorship*

Questions 26 and 27 identify the scope of effectiveness of cigarette advertising at points of sale and the scope of various methods of their promotion.

*Priority Six – Increasing taxation on tobacco*

The last two questions deal with personal finances, identifying the amount of cigarettes last purchased and their cost.

In connection with the entry into force of Act No. 65/2017 Coll. On the Protection of Health from the Harmful Effects of Addictive Substances, questions have been added concerning satisfaction with the smoking ban in restaurants, pubs and bars (question twenty two) and the effects of the change of legal age for smoking (question twenty-five).

## B) RESULTS – TOBACCO

**Table 1. Detailed overview of smoking of tobacco products (Priority 1)**

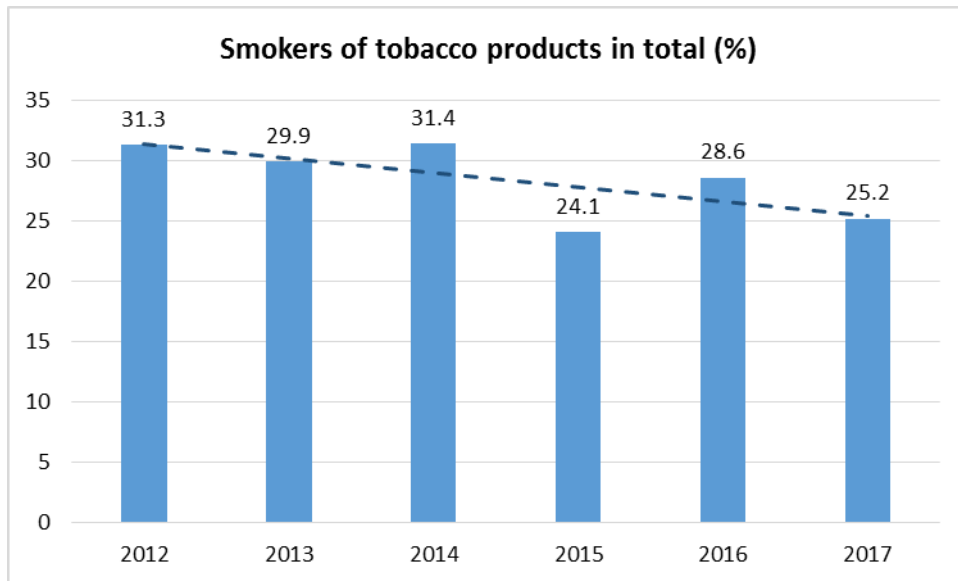
Scope of smoking habits	Total (N=1806)	Males (N=880)	Females (N=926)
<b>Current tobacco smoker</b>	<b>25.2</b> <b>(23.3;27.3)</b>	<b>30.8</b> <b>(27.8;33.9)</b>	<b>19.9</b> <b>(17.4;22.6)</b>
Daily smoker	18.4 (16.7;20.3)	22.6 (20.0;25.5)	14.5 (12.4;16.9)
Occasional smoker	6.8 (5.7;8.0)	8.2 (6.6;10.2)	5.4 (4.1;7.1)
<i>Occasional smoker, formerly daily</i>	3.2 (2.4;4.1)	4.0 (2.9;5.5)	2.4 (1.6;3.6)
<i>Occasional smoker, never daily</i>	3.6 (2.8;4.6)	4.2 (3.1;5.7)	3.0 (2.1;4.3)
<b>Current non-smoker</b>	<b>74.8</b> <b>(72.8;76.8)</b>	<b>69.2</b> <b>(66.1;72.2)</b>	<b>80.1</b> <b>(77.4;82.6)</b>
Former smoker	18.4 (16.7;20.3)	18.8 (16.3;21.5)	18.1 (15.8;20.8)
<i>Former daily smoker</i>	9.0 (7.8;10.4)	10.6 (8.7;12.8)	7.6 (6.0;9.4)
<i>Former occasional smoker</i>	9.4 (8.2;10.9)	8.2 (6.6;10.2)	10.6 (8.8;12.7)
Never smoker	56.4 (54.1;58.6)	50.5 (47.2;53.8)	62.0 (58.8;65.1)

*The data reported are percentages (95% CI)*

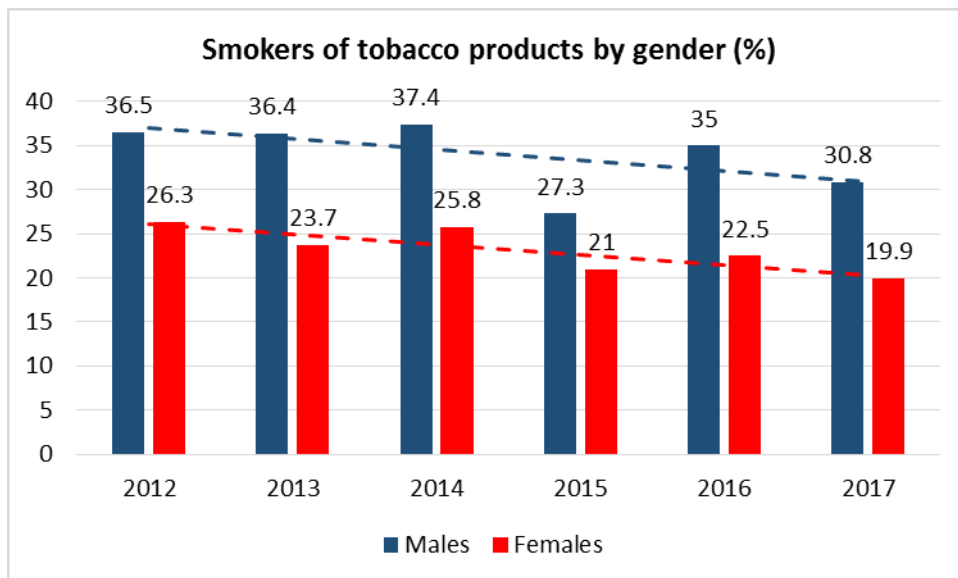
The results of the study suggest that the percentage of current smokers reached 25.2% in the 2017, (in 2016 total 28.6 %). Of the current smokers, three-quarters were daily smokers. Statistically, there is a noticeable difference between the numbers of current smokers by sex. In the daily smokers group there are significantly fewer female than male smokers. There is likewise a difference in the non-smoker group with a greater proportion of life-long female non-smokers.

The prevalence of smoking in 2012-2017 is presented in graphs 1 and 2.

**Graph no. 1: Prevalence of smoking in the Czech Republic in 2012 – 2017**



**Graph no. 2: Prevalence of smoking in the Czech Republic in 2012 – 2017 by gender (including trend)**



**Table 2A I. Current smokers of various types of tobacco products, by selected demographic characteristics (Priority 1) – of all respondents**

Demographic Characteristics	Any smoked tobacco product	Any cigarette <sup>1</sup>	Type of cigarette		Other smoked tobacco <sup>2</sup>
			Manufactured	Hand-rolled	
<b>Total (n=1806)</b>	25.2 (23.2;27.3)	24.6 (22.6;26.6)	22.9 (21.0;24.9)	3.0 (2.3;3.9)	4.7 (3.7;5.7)
<i>Gender</i>					
Male (n=880)	30.8 (27.8;34.0)	30.1 (27.1;33.3)	27.4 (24.5;30.5)	4.8 (3.5;6.4)	6.7 (5.1;8.6)
Female (n=926)	19.9 (17.3;22.6)	19.3 (16.8;22.0)	18.7 (16.2;21.3)	1.3 (0.7;2.3)	2.7 (1.8;4.0)
<i>Age</i>					
15-24 (n=205)	35.6 (29.1;42.6)	35.6 (29.1;42.6)	35.6 (29.1;42.6)	3.4 (1.4;6.9)	10.7 (6.8;15.8)
25-44 (n=645)	27.4 (24.0;31.1)	26.8 (23.4;30.4)	23.9 (20.6;27.4)	3.7 (2.4;5.5)	4.0 (2.6;5.9)
45-64 (n=554)	26.2 (22.6;30.0)	25.3 (21.7;29.1)	24.0 (20.5;27.8)	2.5 (1.4;4.2)	4.7 (3.1;6.8)
65+ (n=402)	14.9 (11.6;18.8)	14.4 (11.1;18.2)	13.4 (10.3;17.2)	2.2 (1.0;4.2)	2.5 (1.2;4.5)
<i>Residence</i>					
Urban (n=1417)	24.8 (22.6;27.2)	24.2 (22.0;26.5)	22.8 (20.6;25.1)	2.8 (2.0;3.8)	5.1 (4.0;6.4)
Rural (n=389)	26.5 (22.2;31.2)	26.0 (21.7;30.6)	23.4 (19.3;27.9)	3.6 (2.0;6.0)	3.1 (1.6;5.3)
<i>Education Level <sup>3</sup></i>					
Basic and apprenticeship (n=579)	27.3 (23.7;31.1)	26.9 (23.4;30.8)	24.5 (21.1;28.2)	4.5 (3.0;6.5)	3.1 (1.9;4.9)
Secondary with graduation (n=671)	24.0 (20.8;27.4)	23.2 (20.1;26.6)	21.6 (18.6;24.9)	2.4 (1.4;3.8)	4.9 (3.4;6.8)
University (n=351)	17.9 (14.1;22.4)	16.8 (13.0;21.1)	15.4 (11.8;19.6)	1.4 (0.5;3.3)	3.1 (1.6;5.5)

*The data reported are percentages (95% CI)*

Note: Current use includes both daily and occasional (less than daily) use.

<sup>1</sup> Includes manufactured cigarettes and hand rolled cigarettes;

<sup>2</sup> Includes cigars, pipes and water pipes;

<sup>3</sup> The category by education is processed for adults aged 25 and older (N = 1601).



**Table 2A II. Current smokers of various types of smoked tobacco products, by selected demographic characteristics (Priority 1) – from a set of current smokers**

Demographic Characteristics	Any smoked tobacco product	Any cigarette <sup>1</sup>	Type of cigarette		Other smoked tobacco <sup>2</sup>
			Manufactured	Hand-rolled	
<b>Total (n=455)</b>	100.0 (99.2;100.0)	97.6 (95.7;98.8)	91.0 (88.0;93.5)	11.9 (9.0;15.2)	18.5 (15.0;22.3)
<i>Gender</i>					
Male (n=271)	100.0 (98.6;100.0)	97.8 (95.2;99.2)	88.9 (84.6;92.4)	15.5 (11.4;20.4)	21.8 (17.0;27.2)
Female (n=184)	100.0 (98.0;100.0)	97.3 (93.8;99.1)	94.0 (89.6;97.0)	6.5 (3.4;11.1)	13.6 (9.0;19.4)
<i>Age</i>					
15-24 (n=73)	100.0 (95.1;100.0)	100.0 (95.1;100.0)	100.0 (95.1;100.0)	9.6 (3.9;18.8)	30.1 (19.9;42.0)
25-44 (n=177)	100.0 (97.9;100.0)	97.7 (94.3;99.4)	87.0 (81.1;91.6)	13.6 (8.9;19.5)	14.7 9.8;20.8)
45-64 (n=145)	100.0 (97.5;100.0)	96.6 (92.1;98.9)	91.7 (86.0;95.7)	9.7 (5.4;15.7)	17.9 (12.1;25.2)
65+ (n=60)	100.0 (94.0;100.0)	96.7 (88.5;99.6)	90.0 (79.5;96.2)	15.0 (7.1;26.6)	16.7 8.3;28.5)
<i>Residence</i>					
Urban (n=352)	100.0 (99.0;100.0)	97.4 (95.2;98.8)	91.8 (88.4;94.4)	11.4 (8.2;15.2)	20.5 (16.4;25.1)
Rural (n=103)	100.0 (96.5;100.0)	98.1 (93.2;99.8)	88.3 (80.5;93.8)	13.6 (7.6;21.8)	11.7 6.2;19.5)
<i>Education Level <sup>3</sup></i>					
Basic and apprenticeship (n=158)	100.0 (97.7;100.0)	98.7 (95.5;99.8)	89.9 (84.1;94.1)	16.5 (11.0;23.2)	11.4 6.9;17.4)
Secondary with graduation (n=161)	100.0 (97.7;100.0)	96.9 (92.9;99.0)	90.1 (84.4;94.2)	9.9 (5.8;15.6)	20.5 (14.5;27.6)
University (n=63)	100.0 (94.3;100.0)	93.7 (84.5;98.2)	85.7 (74.6;93.3)	7.9 (2.6;17.6)	17.5 9.1;29.1)

The data reported are percentages (95% CI)

Note: Current use includes both daily and occasional (less than daily) use.

<sup>1</sup> Includes manufactured cigarettes and hand rolled cigarettes;

<sup>2</sup> Includes cigars, pipes and water pipes;

<sup>3</sup> The category by education is processed for adults aged 25 and older (N = 1601).

**Graph no. 3: Smokers of various types of tobacco product by age (%)**

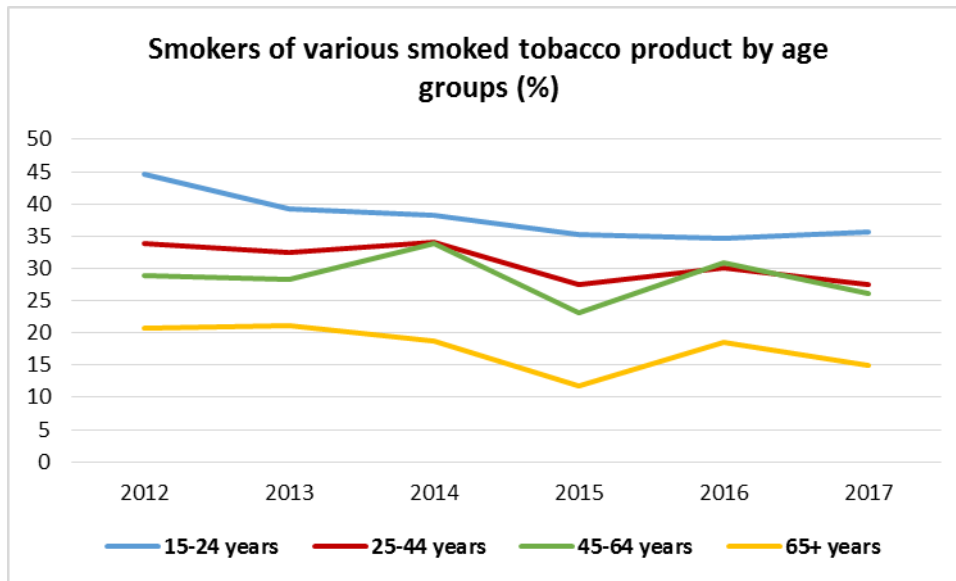


Table 2 clearly shows that the vast majority of the Czech population smokes cigarettes. The ratio of other tobacco products intended for smoking is negligible. These products were reported by 18.5 % of the respondents with men prevailing (21.8% vs. 13.6%). Although a limited number of smokers prefer to roll their own cigarettes the majority favors ready rolled. Tobacco products other than cigarettes include pipes, cigars and water pipes.

Regarding age groups, the highest prevalence of smoking tobacco products was recorded in the 15-24 age group (35.6%), dropping to 27.4% in persons aged 25-44 and continuing this downward trend to 26.2% in persons aged 45-64 and to 14.9% in those aged 65 and more. As in the previous year, the prevalence of smoking among people aged 65+ is lower compared to younger age groups.

From the perspective of completed education, the percentage of tobacco smoking is lower in the group of university educated respondents compared to respondents with primary and secondary education. No distinction between smoking tobacco in urban or rural areas is evident.

Current smokers consumed a daily average of 12.3 cigarettes (commercially produced and hand-rolled) in 2017, with no significant change compared to 2016 (12.3 vs. 12.4).

**Table 2B. Current users of electronic cigarettes (daily and occasional) according to selected demographic characteristics**

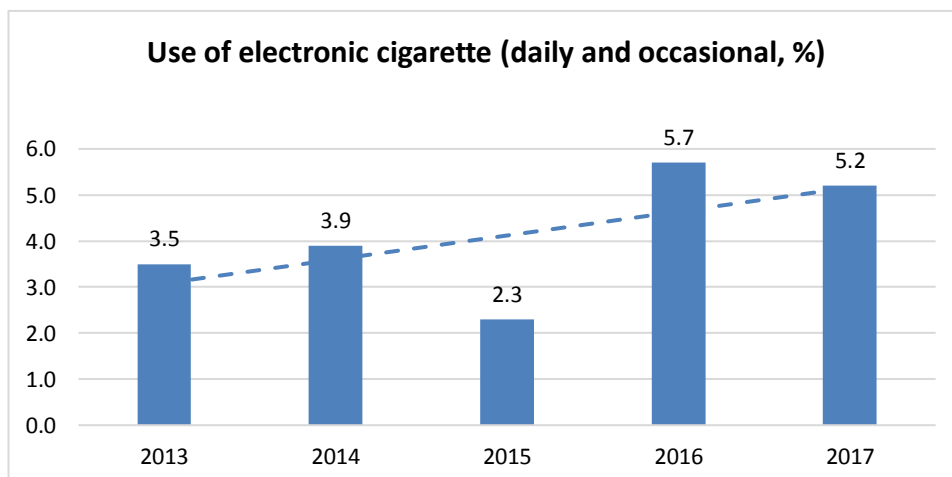
Demographic characteristics	Any type of electronic cigarette
<b>Total (N=1806)</b>	5.2 (4.2;6.3)
<i>Gender</i>	
<b>Male (n=880)</b>	5.9 (4.4;7.7)
<b>Female (n=926)</b>	4.5 (3.3;6.1)
<i>Age</i>	
<b>15-24 (n=205)</b>	12.2 (8.0;17.5)
<b>25-44 (n=645)</b>	6.8 (5.0;9.0)
<b>45-64 (n=554)</b>	3.6 (2.2;5.5)
<b>65+ (n=402)</b>	1.2 (0.4;2.9)
<i>Residence</i>	
<b>Urban (n=1417)</b>	5.4 (4.2;6.7)
<b>Rural (n=389)</b>	4.6 (2.8;7.2)
<i>Tobacco smoking at present <sup>1</sup></i>	
<b>Yes (n=455)</b>	12.7 (9.8;16.2)
<b>No (n=1351)</b>	2.7 (1.9;3.7)
<i>Education Level <sup>2</sup></i>	
<b>Basic and apprenticeship (n=579)</b>	4.8 (3.2;6.9)
<b>Secondary with graduation (n=671)</b>	4.2 (2.8;6.0)
<b>University (n=351)</b>	3.7 (2.0;6.3)

*The data reported are percentages (95% CI)*

<sup>1</sup> Includes current daily and occasional users (less than daily)

<sup>2</sup> The category by education is processed for adults aged 25 and older (N = 1601).

**Graph no. 4: Use of electronic cigarette**



In 2017, 5.2% of the population used electronic cigarettes. Compared to 2016 (5.7%) use among both men and women declined; in the 15-24 age group the percentage of users increased to 12.2%

**Table 3. Use of electronic and classic cigarettes according to selected demographic characteristics (Priority 1)**

Demographic characteristics	Simultaneous smoker of classic cigarettes	Former smoker of classic cigarettes	Non-smoker prior to use use of electronic cigarettes
<b>Total</b> (n=144)	56.3 (47.7;64.5)	21.5 (15.1;29.1)	22.2 (15.7;29.9)
<i>Gender</i>			
Males (n=77)	55.8 (44.1;67.2)	23.4 (14.5;34.4)	20.8 (12.4;31.5)
Females (n=67)	56.7 (44.0;68.8)	19.4 (10.8;30.9)	23.9 (14.3;35.9)
<i>Age</i>			
15-24 (n=37)	64.9 (47.5;79.8)	16.2 (6.2;32.0)	18.9 (8.0;35.2)
25-44 (n=66)	45.5 (33.1;58.2)	22.7 (13.3;34.7)	31.8 (20.9;44.4)
45-64 (n=31)	61.3 (42.2;78.2)	29.0 (14.2;48.0)	9.7 (2.0;25.8)
65+ (n=10)	80.0 (44.4;97.5)	10.0 (0.3;44.5)	10.0 (0.3;44.5)
<i>Residence</i>			
Urban (n=114)	53.5 (43.9;62.9)	21.9 (14.7;30.6)	24.6 (17.0;33.5)
Rural (n=30)	66.7 (47.2;82.7)	20.0 (7.7;38.6)	13.3 (3.8;30.7)
<i>Education</i> <sup>1</sup>			
Basic and apprenticeship (n=36)	61.1 (43.5;76.9)	30.6 (16.3;48.1)	8.3 (1.8;22.5)
Secondary with graduation (n=47)	46.8 (32.1;61.9)	19.1 (9.1;33.3)	34.0 (20.9;49.3)
University (n=24)	54.2 (32.8;74.4)	20.8 (7.1;42.2)	25.0 (9.8;46.7)

*The data reported are percentages (95% CI)*

<sup>1</sup> The category by education is processed for adults aged 25 and older (N = 1601).

It is clear from the table that more than half (56.3%) of electronic cigarette users smoke classic cigarettes simultaneously, more than one fifth (21.5%) are former classical cigarette users and more than one fifth (22.2%) before were non-smokers prior to use of electronic cigarettes. Domicile, education or gender have no effect on the use of electronic and classic cigarettes. Conversely, use of both types of cigarette varies with increasing age in favor of traditional cigarette smoking.

**Table 4. Current users of electronic cigarettes – reasons for using electronic cigarettes according to selected demographic characteristics (Priority 1)**

Demographic characteristics	A means to end or restrict smoking of classic cigarettes	Less harmful to health	Lower price	Experimentation	Higher tolerance to electronic cigarettes
<b>Total (n=144)</b>	32.6 (25.1;40.9)	26.4 (19.4;34.4)	10.4 (5.9;16.6)	41.7 (33.5;50.2)	20.1 (13.9;27.6)
<i>Gender</i>					
Males (n=77)	36.4 (25.7;48.1)	29.9 (20.0;41.4)	10.4 (4.6;19.4)	33.8 (23.4;45.4)	20.8 (12.4;31.5)
Females (n=67)	28.4 (18.0;40.7)	22.4 (13.1;34.2)	10.4 (4.3;20.3)	50.7 (38.2;63.2)	19.4 (10.8;30.9)
<i>Age</i>					
15-24 (n=37)	27.0 (13.8;44.1)	24.3 (11.8;41.2)	5.4 (0.7;18.2)	62.2 (44.8;77.5)	24.3 (11.8;41.2)
25-44 (n=66)	30.3 (19.6;42.9)	27.3 (17.0;39.6)	13.6 (6.4;24.3)	39.4 (27.6;52.2)	18.2 (9.8;29.6)
45-64 (n=31)	38.7 (21.8;57.8)	29.0 (14.2;48.0)	9.7 (2.0;25.8)	29.0 (14.2;48.0)	19.4 (7.5;37.5)
65+ (n=10)	50.0 (18.7;81.3)	20.0 (2.5;55.6)	10.0 (0.3;44.5)	20.0 (2.5;55.6)	20.0 (2.5;55.6)
<i>Residence</i>					
Urban (n=114)	33.3 (24.8;42.8)	22.8 (15.5;31.6)	10.5 (5.6;17.7)	45.6 (36.3;55.2)	17.5 (11.1;25.8)
Rural (n=30)	30.0 (14.7;49.4)	40.0 (22.7;59.4)	10.0 (2.1;26.5)	26.7 (12.3;45.9)	30.0 (14.7;49.4)
<i>Education</i> <sup>1</sup>					
Basic and apprenticeship (n=36)	44.4 (27.9;61.9)	36.1 (20.8;53.8)	19.4 (8.2;36.0)	25.0 (12.1;42.2)	13.9 (4.7;29.5)
Secondary with graduation (n=47)	34.0 (20.9;49.3)	23.4 (12.3;38.0)	12.8 (4.8;25.7)	38.3 (24.5;53.6)	21.3 (10.7;35.7)
University (n=24)	20.8 (7.1;42.2)	20.8 (7.1;42.2)	0.0 (0.0;14.2)	41.7 (22.1;63.4)	20.8 (7.1;42.2)

*The data reported are percentages (95% CI)*

<sup>1</sup> The category by education is processed for adults aged 25 and older (N = 1601).

The reason given for using electronic cigarettes is most frequently experimentation; for men aged over 45 and for users with lower education an electronic cigarette is most commonly used as a means of ending or reducing smoking of classic cigarettes. Rural users prefer electronic cigarettes for limiting harm to health.

**Table 5. Current users of electronic cigarettes – nicotine and nicotine free electronic cigarettes (Priority 1)**

Use of electronic cigarettes	Nicotine electronic cigarettes	Nicotine-free electronic cigarettes
<b>Total (n=94)</b>	76.6 (66.7;84.7)	33.0 (23.6;43.4)
<i>Gender</i>		
Males (n=52)	75.0 (61.1;86.0)	34.6 (22.0;49.1)
Females (n=42)	78.6 (63.2;89.7)	31.0 (17.6;47.1)
<i>Residence</i>		
Urban (n=76)	75.0 (63.7;84.2)	34.2 (23.7;46.0)
Rural (n=18)	83.3 (58.6;96.4)	27.8 (9.7;53.5)
<i>Tobacco smoking at present<sup>1</sup></i>		
Yes (n=58)	81.0 (68.6;90.1)	27.6 (16.7;40.9)
No (n=36)	69.4 (51.9;83.7)	41.7 (25.5;59.2)

*The data reported are percentages (95% CI)*

<sup>1</sup> Includes current daily and occasional users (less than daily)

The Table shows that more than three quarters (76.6%) of electronic cigarette users use electronic cigarettes with nicotine content, with no gender influence. In cities three-quarters of electronic cigarette users use a nicotine-containing form; in rural areas the figure exceeds 80%. Electronic cigarettes with nicotine are used by 81% of current tobacco smokers.

Note: Of the 94 respondents who are current users of electronic cigarettes, 63 respondents used nicotine-content cigarettes only, 22 nicotine-free only and 9 used both types concurrently.

**Table 6. Mean number of cigarettes smoked per day according to selected demographic characteristics (Priority 1)**

Demographic characteristic	Mean number of cigarettes smoked per day <sup>1</sup>				
	<5	5-9	10-14	15-24	≥25
<b>Total (n=333)</b>	10.5 (7.4;14.3)	21.6 (17.3;26.4)	31.5 (26.6;36.8)	30.6 (25.7;35.9)	5.7 (3.5;8.8)
<i>Gender</i>					
Males (n=199)	7.0 (3.9;11.5)	19.1 (13.9;25.3)	30.2 (23.9;37.0)	35.7 (29.0;42.8)	8.0 (4.7;12.7)
Females (n=134)	15.7 (10.0;23.0)	25.4 (18.3;33.6)	33.6 (25.7;42.2)	23.1 (16.3;31.2)	2.2 (0.5;6.4)
<i>Age</i>					
15-24 (n=43)	11.6 (3.9;25.1)	41.9 (27.0;57.9)	30.2 (17.2;46.1)	14.0 (5.3;27.9)	2.3 0.1;12.3)
25-44 (n=134)	11.2 (6.4;17.8)	21.6 (15.0;29.6)	27.6 (20.2;36.0)	34.3 (26.3;43.0)	5.2 2.1;10.5)
45-64 (n=111)	9.9 (5.1;17.0)	16.2 (9.9;24.4)	29.7 (21.4;39.1)	35.1 (26.3;44.8)	9.0 4.4;15.9)
65+ (n=45)	8.9 (2.5;21.2)	15.6 (6.5;29.5)	48.9 (33.7;64.2)	24.4 (12.9;39.5)	2.2 0.1;11.8)
<i>Residence</i>					
Urban (n=259)	10.0 (6.7;14.4)	21.2 (16.4;26.7)	34.0 (28.2;40.1)	29.3 (23.9;35.3)	5.4 (3.0;8.9)
Rural (n=74)	12.2 (5.7;21.8)	23.0 (14.0;34.2)	23.0 (14.0;34.2)	35.1 (24.4;47.1)	6.8 2.2;15.1)
<i>Education <sup>2</sup></i>					
Basic and apprenticeship (n=128)	6.3 (2.7;11.9)	16.4 (10.5;24.0)	30.5 (22.6;39.2)	39.8 (31.3;48.9)	7.0 3.3;12.9)
Secondary with graduation (n=118)	14.4 (8.6;22.1)	17.8 (11.4;25.9)	33.1 (24.7;42.3)	27.1 (19.3;36.1)	7.6 3.5;14.0)
University (n=44)	11.4 (3.8;24.6)	27.3 (15.0;42.8)	31.8 (18.6;47.6)	29.5 (16.8;45.2)	0.0 (0.0;8.0)

*The data reported are percentages (95% CI)*

<sup>1</sup> Daily smokers, cigarettes include both industrially manufactured and hand-rolled;

<sup>2</sup> The category by education is processed for adults aged 25 and older (N = 1601).

Men usually smoke 15-24 cigarettes a day (35.7%) whereas women most frequently smoke 10-14 cigarettes a day (33.6%). Women generally smoke less cigarettes than men. By education, persons at basic and apprenticeship levels most often smoke 15-24 cigarettes per day whilst college students and students with secondary school education smoke 10-14 cigarettes daily. The urban population most often smokes 10-14 cigarettes a day; in rural areas it is most often 15-24 cigarettes daily.

**Table 7. Detailed overview of smokeless tobacco products (Priority 1)**

<b>Scope of habits</b>	<b>Total (N=1806)</b>	<b>Males (N=880)</b>	<b>Females (N=926)</b>
<b>Current users of Smokeless Tobacco</b>	<b>2.5 (1.9;3.3)</b>	<b>3.4 (2.4;4.8)</b>	<b>1.6 (1.0;2.7)</b>
Daily users	0.2 (0.1;0.6)	0.2 (0.1;0.8)	0.2 (0.1;0.8)
Occasional users	2.3 (1.7;3.1)	3.2 (2.2;4.6)	1.4 (0.8;2.4)
<i>Occasional users, formerly daily</i>	0.3 (0.1;0.7)	0.5 (0.2;1.2)	0.1 (0.0;0.6)
<i>Occasional users, never daily</i>	2.0 (1.4;2.8)	2.7 (1.8;4.0)	1.3 (0.7;2.3)
<b>Current non-users of smokeless tobacco</b>	<b>97.5 (96.7;98.1)</b>	<b>96.6 (95.2;97.6)</b>	<b>98.4 (97.3;99.0)</b>
Former users	5.3 (4.4;6.5)	6.4 (4.9;8.2)	4.3 (3.2;5.8)
<i>Former daily users</i>	0.5 (0.3;0.9)	0.3 (0.1;1.0)	0.7 (0.3;1.4)
<i>Former occasional users</i>	4.8 (3.9;5.9)	6.0 (4.6;7.8)	3.7 (2.6;5.1)
Never smokeless tobacco users	92.4 (91.1;93.6)	90.7 (88.6;92.4)	94.1 (92.4;95.4)

*The data reported are percentages (95% CI)*

The use of smokeless tobacco products (snuff, chewing tobacco or tobacco pastilles) was very limited in the respondent group; 2.5% of current smokers also used these tobacco types with only 0.2% consuming these products daily.

Although men tend to consume these products more frequently than women the difference is not significant (3.4% vs. 1.6%).

Compared to 2016, there was a slight decrease (2.6% vs 2.5%) of current smokeless tobacco users



**Table 8. Exposure to tobacco smoke in the home environment according to smoking status and selected demographic characteristics (Priority 2)**

Demographic characteristic	Respondents exposed to tobacco smoke at home <sup>1</sup>	
	Total (N=1806)	Non-smokers (N=1351)
<b>Total</b>	<b>18.9</b> <b>(17.1;20.8)</b>	<b>9.9</b> <b>(8.4;11.6)</b>
<i>Gender</i>		
<b>Males</b>	20.9 (18.4;23.7)	8.4 (6.4;10.8)
<b>Females</b>	17.0 (14.7;19.5)	11.2 (9.1;13.7)
<i>Age</i>		
<b>15-24</b>	25.9 (20.0;32.4)	22.7 (15.9;30.8)
<b>25-44</b>	18.3 (15.5;21.5)	8.1 (6.0;11.0)
<b>45-64</b>	19.1 (16.1;22.6)	8.8 (6.4;12.0)
<b>65+</b>	15.9 (12.7;19.8)	8.8 (6.2;12.3)
<i>Residence</i>		
<b>Urban</b>	20.0 (18.0;22.1)	10.3 (8.6;12.3)
<b>Rural</b>	14.9 (11.7;18.8)	8.4 (5.5;12.2)
<i>Education <sup>2</sup></i>		
<b>Basic and apprenticeship</b>	21.1 (18.0;24.6)	9.0 (6.7;12.2)
<b>Secondary with graduation</b>	17.7 (15.0;20.8)	9.0 (6.8;11.8)
<b>University</b>	13.4 (10.2;17.4)	6.9 (4.3;10.5)

*The data reported are percentages (95% CI)*

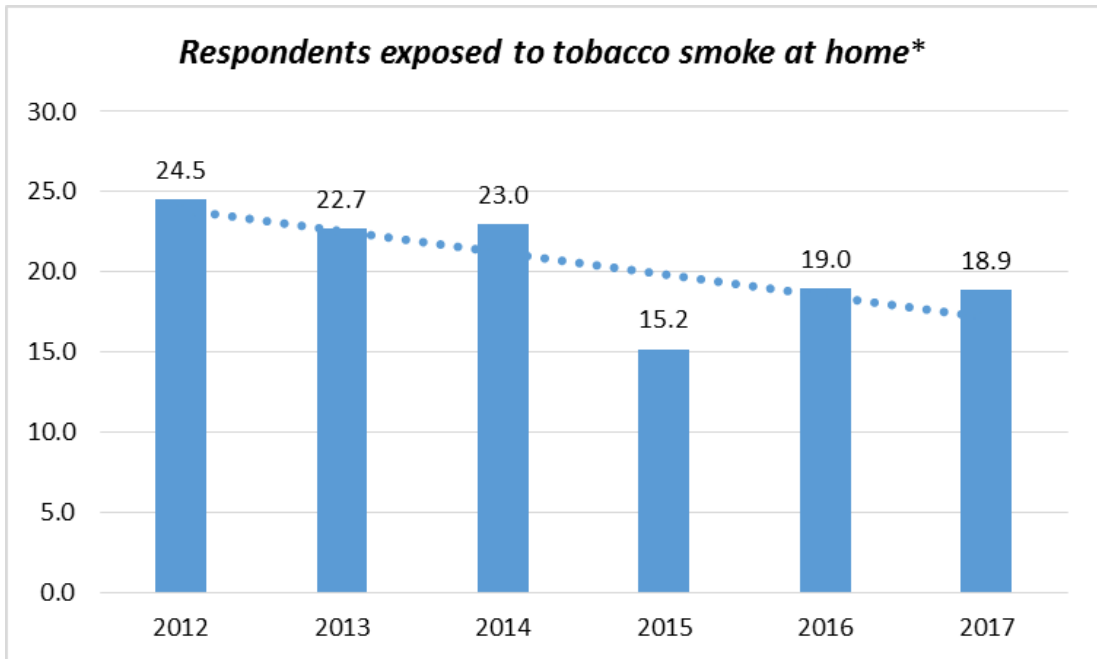
<sup>1</sup> Respondents who report that indoor smoking occurs daily, weekly or monthly;

<sup>2</sup> The category by education is processed for adults aged 25 and older (N = 1601).

Nearly 19% of respondents, over one half of whom are non-smokers, are exposed to tobacco smoke in their homes. The 15-24 years age group, including young people aged 15-18, continues to predominate in this category.

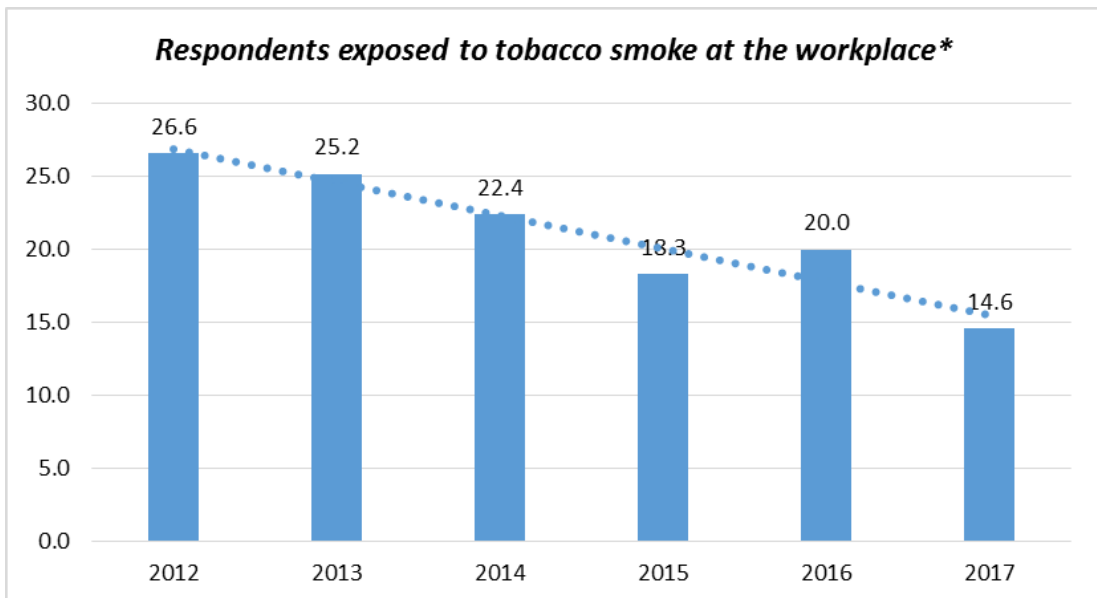
Domicile or education make no difference to these figures. Compared to 2016, the values are comparable (19.0% vs. 18.9%) to people exposed to tobacco smoke at home.

**Graph no. 5: Respondents exposed to tobacco smoke at home, in %**



\* Respondents who report that indoor smoking occurs daily, weekly or monthly.

**Graph no. 6: Respondents exposed to tobacco smoke at the workplace, in %**



\* In the last 30 days. Refers to respondents who work outside the home, usually working in confined spaces or in enclosed outdoor areas.

**Table 9. Exposure to tobacco smoke in enclosed workplaces according to smoking status and selected demographic characteristics (Priority 2)**

Demographic characteristics	Respondents exposed to tobacco smoke at the workplace <sup>1</sup>	
	Total (N=974)	Non-smokers (N=695)
<b>Total</b>	<b>14.6</b> (12.5;16.9)	<b>10.7</b> (8.6;13.2)
<i>Gender</i>		
<b>Males</b>	19.7 (16.4;23.4)	13.8 (10.5;17.9)
<b>Females</b>	9.1 (6.9;12.1)	7.7 (5.4;11.0)
<i>Age</i>		
<b>15-24</b>	17.8 (9.8;28.5)	14.0 (5.3;27.9)
<b>25-44</b>	13.9 (11.0;17.3)	11.5 (8.5;15.3)
<b>45-59</b>	15.7 (12.4;19.8)	10.3 (7.0;14.6)
<b>65+</b>	9.2 (3.5;19.0)	4.1 (0.5;14.0)
<i>Residence</i>		
<b>Urban</b>	14.8 (12.5;17.5)	10.8 (8.5;13.6)
<b>Rural</b>	13.6 (9.2;19.2)	10.1 (5.7;16.4)
<i>Education <sup>2</sup></i>		
<b>Basic and apprenticeship</b>	23.7 (18.6;29.5)	18.5 (12.7;25.4)
<b>Secondary with graduation</b>	13.1 (10.1;16.7)	10.0 (6.9;14.0)
<b>University</b>	6.9 (4.1;10.8)	4.6 (2.1;8.5)

*The data reported are percentages (95% CI)*

<sup>1</sup> In the last 30 days. Refers to respondents who work outside the home, usually working in confined spaces or in enclosed outdoor areas;

<sup>2</sup> The category by education is processed for adults aged 25 and older (N = 1601).

Men are exposed to tobacco smoke in the workplace more than twice as often as women; in the case of non-smokers exposure is almost twice as frequent. Age, residence or education do not play a significant role in this case.

Compared to 2016, the number of non-smokers exposed to tobacco smoke (15.9% vs. 10.7%) was significantly reduced. The percentage of non-smokers exposed to tobacco smoke in enclosed workplaces must be monitored despite legal prohibition.

**Table 10. Current smokers who have tried to stop smoking during the last 12 months, have been seeking healthcare and have been advised to stop smoking (Priority 3)**

Demographic characteristics	Smoking cessation and healthcare search		
	Tried to quit smoking <sup>1</sup> (N=455)	Visited a healthcare establishment <sup>1</sup> (N=455)	Were advised to quit smoking <sup>2</sup> (N=242)
<b>Total</b>	33.2 (29.0;37.6)	53.2 (48.6;57.7)	34.3 (28.3;40.7)
<i>Gender</i>			
<b>Males</b>	35.1 (29.4;41.1)	50.6 (44.4;56.7)	42.3 (34.0;51.1)
<b>Females</b>	30.4 (23.9;37.6)	57.1 (49.6;64.3)	23.8 (16.0;33.1)
<i>Age</i>			
<b>15-24</b>	39.7 (28.5;51.9)	56.2 (44.1;67.8)	9.8 (2.7;23.1)
<b>25-44</b>	35.6 (28.6;43.1)	46.9 (39.4;54.5)	28.9 (19.5;39.9)
<b>45-59</b>	29.7 (22.4;37.8)	55.9 (47.4;64.1)	44.4 (33.4;55.9)
<b>65+</b>	26.7 (16.1;39.7)	61.7 (48.2;73.9)	51.4 (34.4;68.1)
<i>Residence</i>			
<b>Urban</b>	31.8 (27.2;38.9)	52.3 (47.1;57.4)	32.1 (25.4;39.3)
<b>Rural</b>	37.9 (28.5;48.0)	56.3 (46.2;66.1)	41.4 (28.6;55.1)
<i>Education <sup>2</sup></i>			
<b>Basic and apprenticeship</b>	31.7 (24.5;39.5)	54.4 (46.3;62.4)	44.2 (33.5;55.3)
<b>Secondary with graduation</b>	31.7 (24.6;39.5)	49.7 (41.7;57.7)	36.3 (25.8;47.8)
<b>University</b>	33.3 (22.0;46.3)	55.6 (42.5;68.1)	34.3 (19.1;52.2)

The data reported are percentages (95% CI)

<sup>1</sup> Concerns current smokers;

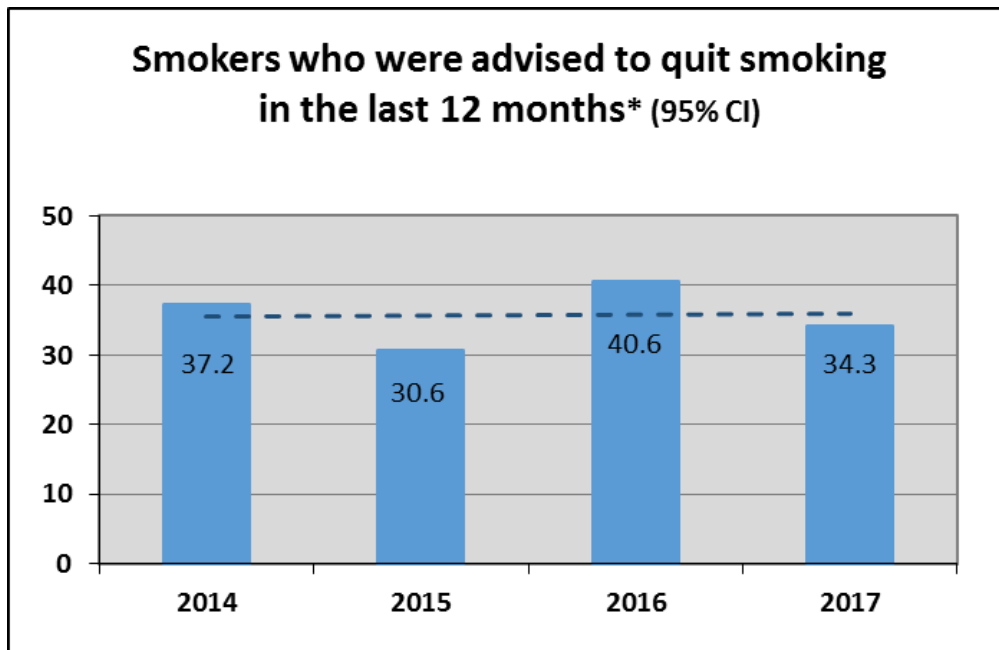
<sup>2</sup> Concerns current smokers who have visited a healthcare establishment during the last 12 months;

<sup>3</sup> The category by education is processed for adults aged 25 and older (N = 1601).

A third of current smokers have tried to quit smoking in the course of the preceding twelve months (35.1% of men and 30.4 % of women). The majority belong to the youngest age group (15-24 years). With increasing age efforts to quit decline, with a decrease in all age groups. Education level has no significant influence.

Compared to 2016, the percentage of people recommended by a doctor to quit smoking (40.0% vs. 34.3%) was significantly reduced; the percentage of such persons increases with the age of the patients.

**Graph no. 7: Smokers who were advised to quit smoking during the last 12 months**



\* Concerns current smokers who have visited a healthcare establishment during the last 12 months

**Table 11. Respondents who have noticed anti cigarette smoking information in newspapers, magazines or on television during the last 30 days, according to the extent of smoking habits and selected demographic characteristics (Priority 4)**

Location	Total (N=1806)	Gender		Age (in years)		Residence	
		Males (N=880)	Females (N=926)	15-24 (N=205)	≥ 25 (N=1601)	Urban (N=1417)	Rural (N=389)
In newspapers or magazines	<b>42.4</b> (40.2;44.7)	41.1 (37.9;44.4)	43.6 (40.5;46.8)	42.0 (35.1;49.0)	42.5 (40.1;44.9)	42.6 (40.0;45.2)	41.9 (37.1;46.9)
On TV	<b>36.2</b> (34.0;38.4)	35.3 (32.3;38.6)	36.9 (33.9;40.1)	36.1 (29.5;43.1)	36.2 (33.9;38.6)	36.1 (33.6;38.6)	36.5 (31.9;41.4)
<b>Current smokers<sup>1</sup></b> (N=455)							
In newspapers or magazines	<b>48.6</b> (44.0;53.2)	46.1 (40.1;52.3)	52.2 (44.7;59.6)	42.5 (31.0;54.6)	49.7 (44.8;54.7)	49.4 (44.2;54.6)	45.6 (35.8;55.7)
On TV	<b>40.0</b> (35.6;44.6)	41.7 (35.8;47.8)	37.5 (30.5;44.9)	37.0 (26.0;49.1)	40.6 (35.8;45.6)	40.9 (35.9;46.1)	36.9 (27.6;47.0)
<b>Non-smokers<sup>2</sup></b> (N=1351)							
In newspapers or magazines	<b>40.3</b> (37.8;43.0)	38.9 (35.1;42.9)	41.5 (38.0;45.1)	41.7 (33.2;50.6)	40.2 (37.5;43.0)	40.3 (37.4;43.6)	40.6 (34.8;46.5)
On the TV	<b>34.9</b> (32.4;37.4)	32.5 (28.9;36.3)	36.8 (33.4;40.3)	35.6 (27.5;44.4)	34.8 (32.2;37.5)	34.5 (31.7;37.4)	36.4 (30.8;42.2)

The data reported are percentages (95% CI)

<sup>1</sup> Includes current daily and occasional smokers (less than daily);

<sup>2</sup> Includes former smokers and lifelong non-smokers;

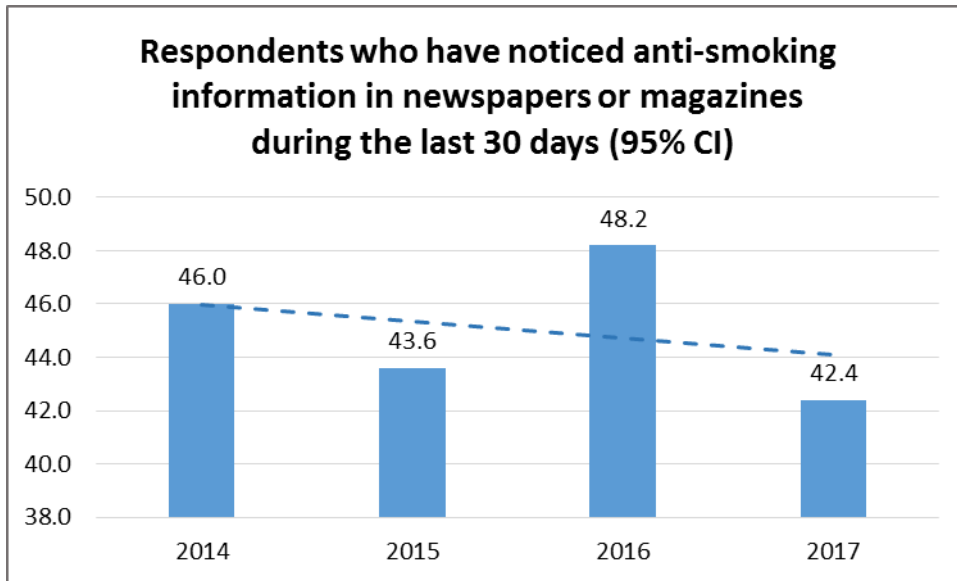
In total, more than four people out of ten surveyed have noticed anti-smoking information in newspapers, magazines or on television during the last 30 days. The distinction between media is significant, with the press being at the forefront as an information source.

There is no significant difference between men or women, or between age and domicile.

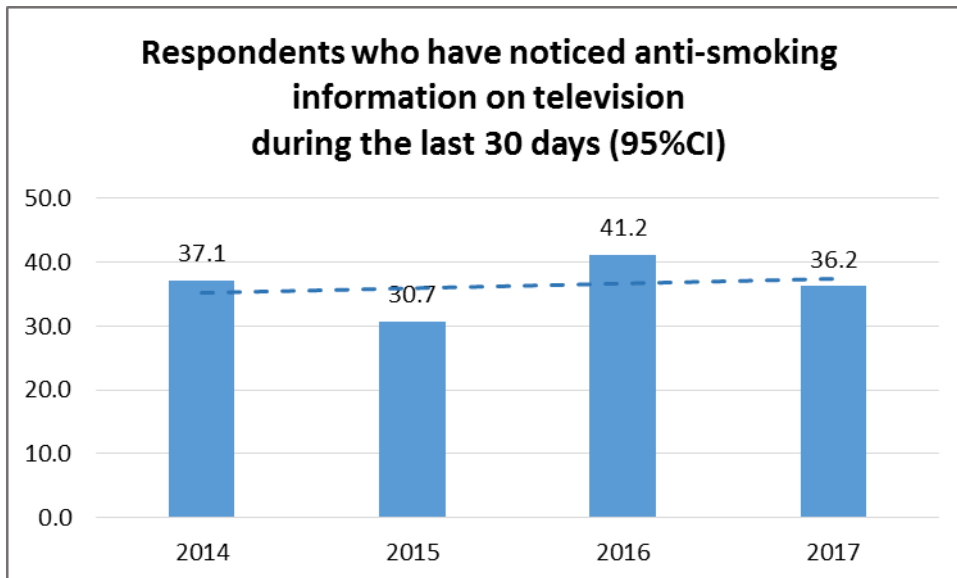
Significantly, such information was noticed more frequently by current smokers than non-smokers.

In 2016, the situation was similar although the number of respondents who noticing anti-smoking information declined in 2017. There may be a number of reasons for this - less published information, lower TV viewing rates, less interest by respondents in such information, etc.

**Graph no. 8: Respondents who have noticed anti-smoking information in newspapers or magazines during the last 30 days (95% CI)**



**Graph no. 9: Respondents who have noticed anti-smoking information on television during the last 30 days (95%CI)**



**Table 12. Current smokers who have noticed health warnings on cigarette packets during the past 30 days and considered quitting smoking as a result, according to selected demographic characteristics (Priority 4)**

Demographic characteristics	Current smokers <sup>1</sup> , who...	
	have noticed a health warning on cigarette packets <sup>2</sup> (N=455)	have been considering quitting smoking because of warning label <sup>2</sup> (N=419)
<b>Total</b>	<b>92.1</b> (89.2;94.2)	<b>12.4</b> (9.6;15.9)
<i>Gender</i>		
<b>Males</b>	92.3 (88.4;95.1)	13.2 (9.3;18.0)
<b>Females</b>	91.9 (86.9;95.4)	11.2 (6.9;17.0)
<i>Age</i>		
<b>15-24</b>	95.9 (88.5;99.1)	17.1 (9.2;28.0)
<b>25-44</b>	91.0 (85.7;94.7)	11.8 (7.3;17.8)
<b>45-59</b>	92.4 (86.8;96.2)	13.4 (8.2;20.4)
<b>65+</b>	90.0 (79.5;96.2)	5.6 (1.2;15.4)
<i>Residence</i>		
<b>Urban</b>	92.1 (88.7;94.4)	11.1 (8.1;15.0)
<b>Rural</b>	92.2 (85.3;96.6)	16.8 (9.9;25.9)
<i>Education <sup>2</sup></i>		
<b>Basic and apprenticeship</b>	93.0 (87.9;96.5)	14.3 (9.1;21.0)
<b>Secondary with graduation</b>	90.1 (84.4;94.2)	9.0 (4.9;14.8)
<b>University</b>	90.5 (80.4;96.4)	10.5 (4.0;21.5)

*The data reported are percentages (95% CI)*

<sup>1</sup> Includes current daily and occasional smokers (less than daily);

<sup>2</sup> During the last 30 days;

<sup>3</sup> The category by education is processed for adults aged 25 and older (N = 1601).

More than nine out of ten current smokers have noticed health warnings on a cigarette packs. However, only 12.4% of smokers were motivated to quit smoking by these warnings, with no significant difference in gender. Compared to 2016 less people considering quitting smoking were recorded in all age groups, places of residence and levels of education.

Against 2016, there was a significant difference in the number of people who considered quitting smoking in connection to health warnings on cigarette packets (22.8% vs. 12.4%).



**Table 13. Respondents who have noticed different forms of cigarette advertising during the last 30 days, according to selected demographic characteristics (Priority 5)**

Location	Total (N=1806)	Gender		Age (in years)		Residence	
		Males (N=880)	Females (N=926)	15-24 (N=205)	≥ 25 (N=1601)	Urban (N=1417)	Males (N=880)
<b>Noticed advertisement in shop</b>	42.8 (40.5;45.0)	44.8 (41.5;48.1)	40.8 (37.7;44.0)	55.6 (48.5;62.5)	41.1 (38.7;43.5)	43.9 (41.3;46.5)	38.6 (33.9;43.5)
<b>Noticed cigarette promotions</b>							
Free samples	<b>3.6</b> (2.8;4.6)	4.1 (3.0;5.6)	3.1 (2.2;4.5)	1.5 (0.3;4.2)	3.9 (3.0;4.9)	3.8 (2.9;4.9)	2.8 (1.6;5.0)
Discounts on cigarette prices	<b>6.5</b> (5.5;7.8)	7.2 (5.6;9.1)	5.9 (4.6;7.7)	6.3 (3.4;10.6)	6.6 (5.5;7.9)	6.0 (4.9;7.4)	8.5 (6.1;11.7)
Coupons for cigarettes	<b>3.7</b> (2.9;4.7)	4.1 (3.0;5.6)	3.4 (2.4;4.7)	3.4 (1.4;6.9)	3.8 (2.9;4.8)	3.7 (2.8;4.8)	3.9 (2.4;6.3)
Gifts/discounts on other products	<b>20.3</b> (18.5;22.2)	20.2 (17.7;23.0)	20.4 (17.9;23.1)	28.3 (22.2;35.0)	19.3 (17.4;21.3)	21.2 (19.2;23.5)	17.0 (13.6;21.0)
Clothing/item with a cigarette brand or logo	<b>21.4</b> (19.5;23.3)	23.3 (20.6;26.2)	19.6 (17.1;22.2)	31.2 (25.0;38.1)	20.1 (18.2;22.2)	23.1 (21.0;25.3)	15.2 (11.9;19.1)
Promotion of cigarettes by post	<b>1.4</b> (0.9;2.0)	2.0 (0.5;4.9)	1.3 (0.9;2.0)	2.0 (0.5;4.9)	1.3 (0.9;2.0)	1.5 (1.0;2.3)	1.0 (0.4;2.6)

*The data reported are percentages (95% CI)*

Less than half of respondents, comprising more men than women (44.8% vs. 40.8%) noticed cigarette advertising at the place of sale. A significant difference was found between the respondents' age; many more (55.6%) were under the age of 25 years, while less than 50% were older. The place of residence of respondents does not play a role in the perception of cigarette advertising.

Compared to 2016, the percentage of respondents who noticed advertising has decreased. Perception of promotional activities has not changed. It should be noted that promotion of tobacco products is prohibited in the Czech Republic.

A certain percentage of respondents answered affirmatively to noticing cigarette promotion, mainly in the form of gifts, discounts on other goods or brands, cigarette logos on clothing or other items. Compared to the previous year, discounts on the cost of clothing or other cigarette branded items were down (10.7% vs. 6.5%).

**Table 14 A. Expression of satisfaction with the ban on smoking in restaurants, pubs and bars, introduced on May 31, 2017, under Act No. 65/2017 Coll., On the protection of health from harmful effects of addictive substances, according to selected demographic indicators.**

(Data source: National Monitoring Centre for Drugs and Addiction)

Demographic characteristics	YES	NO	NO OPINION
<b>Total (n=1806)</b>	61.4 (59.1;63.7)	22.2 (20.3;24.2)	16.4 (14.7;18.2)
<i>Gender</i>			
Males (n=880)	56.4 (53.0;59.7)	26.8 (23.9;29.9)	16.8 (14.4;19.5)
Females (n=926)	66.2 (63.1;69.2)	17.8 (15.4;20.4)	16.0 (13.7;18.5)
<i>Age</i>			
15-24 (n=205)	63.9 (56.9;70.5)	23.9 (18.2;30.3)	12.2 (8.0;17.5)
25-44 (n=645)	63.1 (59.2;66.8)	25.0 (21.7;28.5)	11.9 (9.5;14.7)
45-64 (n=554)	59.6 (55.3;63.7)	23.3 (19.8;27.0)	17.1 (14.1;20.6)
65+ (n=402)	60.0 (55.0;64.8)	15.4 (12.0;19.3)	24.6 (20.5;29.1)
<i>Residence</i>			
Urban (n=1417)	61.3 (58.7;63.9)	22.8 (20.6;25.1)	15.9 (14.0;17.9)
Rural (n=389)	61.7 (56.7;66.6)	20.1 (16.2;24.4)	18.3 (14.5;22.5)
<i>Education</i> <sup>1</sup>			
Basic and apprenticeship (n=579)	54.6 (50.4;58.7)	23.1 (19.8;26.8)	22.3 (19.0;25.9)
Secondary with graduation (n=671)	61.0 (57.1;64.7)	23.7 (20.5;27.1)	15.4 (12.7;18.3)
University (n=351)	72.1 (67.1;76.7)	16.8 (13.0;21.1)	11.1 (8.0;14.9)

*The data reported are percentages (95% CI)*

<sup>1</sup> The category by education is processed for adults aged 25 and older (N = 1601).

Satisfaction with the ban on smoking in restaurants, pubs and bars, introduced by 31 May 2017, Act No. 65/2017 Coll., On Protection of Health from the Harmful Effects of Drugs, was expressed by 61.4% of the respondents, more women than men.

**Table 14 B. Expression of satisfaction with the ban on smoking in restaurants, pubs and bars, introduced on May 31, 2017, Act No. 65/2017 Coll., On the protection of health from harmful effects of addictive substances – smokers vs. non-smokers**

(Data source: National Monitoring Centre for Drugs and Addiction)

Demographic characteristics	YES	NO	NO OPINION
<b>Non-smokers (N=1351)</b>	72.2 (69.8;74.6)	10.9 (9.3;12.7)	16.9 (15.0;19.0)
<b>Smokers (N=455)</b>	29.2 (25.2;33.6)	55.8 (51.2;60.3)	15.0 (12.0;18.5)

*The data reported are percentages (95% CI)*

Satisfaction with the ban on smoking in restaurants, pubs and bars, introduced by 31 May 2017, Act No. 65/2017 Coll., On the protection of health from the harmful effects of addictive substances, was expressed by 72.2% of non-smokers and 29.2% of smokers.

**Table 15. Average cost per pack of cigarettes and price of 100 cigarette packets as a percentage of gross domestic product per person (Priority 6)**

	Currency
The average cost per pack of 20 industrially manufactured cigarettes	90.20 Kč
Price of 100 cigarette packets as a percentage of Gross Domestic Product (GDP) per person	1.9 %

The Table shows the average cost of one pack of industrially manufactured cigarettes is calculated, according to respondents, corresponding to the price of the cheapest cigarette brands sold in the Czech Republic.

The second item on the Table shows the level of cigarette availability. The price of 100 cigarette packets represents 1.9% of GDP per capita (GDP according to the CZSO for 2017).

Table 16. Smoking of tobacco products – comparing data from 2012 – 2017

Scope of smoking habits	Year	Total	Males	Females
<b>Current tobacco smoker</b>	<b>2017</b>	<b>25.2 (23.3;27.3)</b>	<b>30.8 (27.8;33.9)</b>	<b>19.9 (17.4;22.6)</b>
	2016	28.6 (26.6;30.7)	35.0 (31.9;38.1)	22.5 (19.9;25.3)
	2015	24.1 (22.1; 26.1)	27.3 (24.4; 30.5)	21.0 (18.5; 23.8)
	2014	31.4 (29.3;33.6)	37.4 (34.2;40.7)	25.8 (23.0;28.7)
	2013	29.9 (27.8; 32.1)	36.4 (33.2; 39.7)	23.7 (21.0; 26.6)
	2012	31.3 (29.2;33.5)	36.5 (33.4;39.8)	26.3 (23.5;29.3)
<b>Daily smokers</b>	<b>2017</b>	<b>18.4 (16.7;20.3)</b>	<b>22.6 (20.0;25.5)</b>	<b>14.5 (12.4;16.9)</b>
	2016	19.6 (17.2;21.5)	23.8 (21.2;26.7)	15.6 (13.4;18.0)
	2015	18.2 (16.5;20.1)	21.8 (19.1;24.7)	14.8 (12.6;17.3)
	2014	23.5 (21.6;25.5)	28.2 (25.3;31.3)	19.0 (16.6;21.7)
	2013	22.2 (20.3; 24.2)	27.2 (24.3; 30.3)	17.4 (15.1; 20.1)
	2012	23.1 (21.2;25.1)	26.7 (23.9;29.8)	19.6 (17.1;22.4)
<b>Occasional smokers</b>	<b>2017</b>	<b>6.8 (5.7;8.0)</b>	<b>8.2 (6.6;10.2)</b>	<b>5.4 (4.1;7.1)</b>
	2016	9.0 (7.7;10.4)	11.1 (9.2;13.4)	6.9 (5.4;8.7)
	2015	5.9 (4.9;7.1)	5.5 (4.2;7.3)	6.2 (4.8; 8.0)
	2014	8.0 (6.8;9.3)	9.2 (7.4;11.4)	6.8 (5.3;8.6)
	2013	7.7 (6.5; 9.0)	9.2 (7.4; 11.3)	6.3 (4.8; 8.1)
	2012	8.2 (7.0;9.6)	9.8 (7.9;12.0)	6.7 (5.2;8.6)
<b>Current non-smokers</b>	<b>2017</b>	<b>74.8 (72.8;76.8)</b>	<b>69.2 (66.1;72.2)</b>	<b>80.1 (77.4;82.6)</b>
	2016	71.4 (69.3;73.5)	65.0 (61.9;68.1)	77.5 (74.8;80.1)
	2015	75.9 (73.9;77.9)	72.7 (69.5;75.6)	79.0 (76.2;81.5)
	2014	68.6 (66.4;70.7)	62.6 (59.3;65.8)	74.2 (71.3;77.0)
	2013	70.1 (67.9; 72.2)	63.6 (60.3; 66.8)	76.3 (73.4; 79.0)
	2012	68.7 (66.5;70.8)	63.5 (60.2;66.7)	73.7 (70.7;76.5)
<b>Former smokers</b>	<b>2017</b>	<b>18.4 (16.7;20.3)</b>	<b>18.8 (16.3;21.5)</b>	<b>18.1 (15.8;20.8)</b>
	2016	15.3 (13.0;18.0)	16.3 (13.0;20.3)	14.4 (11.4;18.2)
	2015	17.2 (15.5; 19.0)	18.1 (15.6; 20.9)	16.3 (14.0; 18.9)
	2014	14.7 (13.1;16.4)	15.5 (13.2;18.1)	13.8 (11.7;16.3)
	2013	12.6 (11.1; 14.2)	15.1 (12.8; 17.7)	10.2 (8.4; 12.4)
	2012	13.1 (11.6;14.8)	14.6 (12.3;17.1)	11.7 (9.7;14.0)
<b>Never smokers</b>	<b>2017</b>	<b>56.4 (54.1;58.6)</b>	<b>50.5 (47.2;53.8)</b>	<b>62.0 (58.8;65.1)</b>
	2016	56.1 (53.8;58.4)	48.8 (45.5;52.1)	63.1 (59.9;66.2)
	2015	58.7 (56.4;61.0)	54.6 (51.2;57.9)	62.6 (59.4; 65.7)
	2014	53.9 (51.6;56.2)	47.1 (43.8;50.5)	60.4 (57.1;63.5)
	2013	57.5 (55.2; 59.8)	48.5 (45.2; 51.9)	66.1 (63.0; 69.1)
	2012	55.6 (53.3;57.9)	48.9 (45.6;52.3)	62.0 (58.7;65.1)

Table 16 shows the development of smoking in the Czech Republic since 2012, when we started using the standardized TQS methodology developed by the CDC in the US and recommended by the World Health Organization. A comparison over the past 6 years shows that the incidence of smoking in the Czech population has a slightly declining tendency. A certain change was seen in 2015 when the main monitored indicators had significantly lower values than in the previous three years, and subsequent years thereafter. Firstly, in 2015 we recorded a lower percentage of current smokers and daily smokers than in previous years. The decrease in these indicators was due in particular to a lower prevalence of smoking among men. In 2015, there was logically also a higher percentage of non-smokers, both former smokers and non-smokers. Research in 2016 showed that the decline in 2015 (amidst the long term trends monitored since 1997) was only temporary.

## E) Summary and implications for public health policies

### *Summary of results*

In 2017, the adult population of the Czech Republic contained 25.2% smokers. Of that, more than two-thirds (18.4%) were smokers consuming at least one cigarette a day. In the long run, we can see that despite isolated annual deviations a reduction in the prevalence of adult smoking can be observed in the years under review (2012-2017).

The Czech population smokes predominantly classic cigarettes. The proportion of other tobacco products used for smoking is small. Electronic cigarettes are used 5.2% of current smokers and smokeless tobacco by 2.5% of current smokers.

Men usually smoke 15 to 24 cigarettes a day (35.7%), and women most often 10 to 14 cigarettes a day (33.6%).

Almost one fifth of respondents are exposed to tobacco smoke in their homes, mostly in the 15-24 years age group.

A relatively high percentage of non-smokers is exposed to tobacco smoke in the workplace despite statutory protection. In total, this concerns 14.6% of employees, with men predominating (19.7%).

Approximately one third of current smokers attempted to quit smoking during the last year. Over half of respondents visited a GP during the last year. More than a third of respondents reported that their doctor advised them to stop smoking.

Cigarette advertising at the place of sale was reported by almost 40% of respondents in the last month; their promotion, although prohibited by law, was noted by up to 24% of respondents, predominantly young men.

Satisfaction with the ban on smoking in restaurants, pubs and bars, introduced on 31 May 2017, under Act No. 65/2017 Coll., On Protection of Health from the Harmful Effects of Drugs, was expressed by 61.4% of respondents: 72.2% of non-smokers and 29.2% of smokers.

In 2017, current smokers smoked 12.3 cigarettes per day on average (commercially produced and hand-rolled), which is almost the same as in 2016 (12.4 units).

### **Recommendation**

To reduce the damage caused by tobacco, the Czech Republic should use recommendations formulated by the World Health Organization in the WHO World Tobacco Poverty Report 2008: MPOWER (WHO 2008). The effectiveness of the strategies recommended by these documents has been scientifically verified.

The implementation of the following measures is advised:

- Regulation of tobacco product marketing, especially in relation to youth;
- Regulating and restricting the availability of tobacco products;
- Reducing demand through tax and price mechanisms;
- Attracting and supporting policies to reduce tobacco consumption;
- Providing affordable and effective treatments for people with tobacco addiction;
- Implementation of screening programs and short interventions for hazardous and harmful use of tobacco into health practice (especially primary health care).

Some of these recommendations are already being implemented in the Czech Republic, particularly as part of the implementation of the 2015-2018 Tobacco Control Action Plan. This Action Plan is based on strategic objective 1 – To improve the health of the population and reduce health inequalities, Health 2020 - National Health and Disease Prevention and Prevention Strategy.

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## Dedication

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## G) Resources

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