

Research casts sober light on Russia's mortality crisis

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With the collapse of the Soviet Union, Russians were faced with more than the demise of a political system. Working-age men began dying in droves, and the country saw a 40 percent surge in deaths between 1990 and 1994.

The killer was often alcohol – that much was clear. And for years, many economists and political scientists have blamed Russia's lurch toward democracy and capitalism for driving those men to drink. They reasoned that privatization left many people unskilled and unemployable, ushering in a sense of listlessness and depression that mixed too easily with cheap vodka.

But Stanford researchers have dug up evidence that helps get democracy and capitalism off the hook and points to a new culprit: the end of an anti-alcohol campaign that contributed to a plunge in mortality rates during its short life in the Gorbachev era.

"Most things that kill people disproportionately kill babies and the elderly," said Grant Miller, an assistant professor of medicine and faculty member of the Center for Health Policy. "But working-age men accounted for the largest spike in deaths in the early 1990s. Many people suspect that's somehow entwined with political and economic transition, but there's a lot more to it than that."

Most of the deaths during Russia's mortality crisis were from alcohol poisoning, drunken violence or slower killers like heart attacks and

strokes, he said.

Miller has outlined the findings – based on newly compiled and digitized archival data – in a working paper written in collaboration with associate professor of medicine Jay Bhattacharya and Christina Gathmann, an assistant professor of economics at the University of Mannheim in Germany. Their research was supported in part by the National Institutes of Health through Stanford's Center on the Demography and Economics of Health and Aging.

Their study shows a steady rise in the number of deaths between the early 1960s and 1984 in one of the world's heaviest drinking countries. Recognizing that alcoholism was a major cause of death and low work productivity, Mikhail Gorbachev instituted an aggressive anti-alcohol campaign in 1985, shortly after he became the Soviet Union's secretary general.

New regulations slashed official alcohol sales by two-thirds, drove up prices by as much as 50 percent and prohibited stores from selling booze before 2 p.m. on business days. Showing up drunk at work or on the streets could cost Russians a hefty fine or land them in prison.

"It was common practice for workers to take their breaks, go to a liquor store and come back to work drunk," said Bhattacharya, who is also a Stanford Center for Health Policy faculty member. "So the people behind the campaign thought closing the stores during the day could lead to more productivity and fewer work-related deaths and injuries."

But the campaign also emphasized alternatives to drinking. A national temperance society was formed, propaganda promoted sobriety and administrators in all Soviet districts – called oblasts – were required to build more parks and sports clubs to encourage family-friendly fun.

The campaign worked. The number of deaths plummeted in 1985 and remained below the pre-campaign trend throughout the late 1980s. That translated to a 12 percent decline in mortality rates: about 665,000 fewer deaths. But by the early 1990s, shortly after the campaign was dropped – and at the same time that the Soviet Union crumbled – the number of deaths began to climb.

The temperance campaign officially folded in 1988 for two main reasons: It was wildly unpopular and the government realized it was losing too much money from low [alcohol](#) sales. By 1991, consumption was back to pre-campaign levels.

And Russia's heaviest drinkers – working-age men – fell off the wagon and got back to dying at alarming rates. The end of the campaign accounts for as much as half of Russia's four-year mortality crisis, Miller and Bhattacharya said.

"Welfare and health are not exactly the same thing," Miller said. "You can restrict people's choices in a way that improves health, but that doesn't unambiguously mean that people are better off. "

Provided by Stanford University

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