Objective To investigate the influence of Social Support for Physical Activity (PASS) and individual factors on the LPA levels in adults of a large urban center.

Methods Household survey was carried out with 4048 adults. Demographic, social determinants and health information were collected. The LPA levels were categorised into inactive, insufficiently active and active, according to the International Physical Activity Questionnaire. The PASS scale was constructed using three indicators: PASS neighbourhood, encouragement and commitments from friends and family, with responses ranging from “no” to “high support”. Associations between LPA levels and PASS were investigated using multivariate ordinal logistic model.

Results Our study consisted of 3453 adults aged 18–69 yo (1595 men; 1858 women); 59.9% (n=2171) were classified into inactive, 23.3% (n=727) insufficiently active, and 16.8% (n=555) sufficiently active. Participants were more likely to be male (OR=1.55), no partners (OR=1.50), education level higher than nine years (OR=1.97), and highest family income (≥5 minimum wage) (OR=1.76), were more likely to be in a better level of LPA. Moreover, those participants no PASS were more likely to be in a worse LPA levels than those with highest PASS (low:OR=1.80; medium: OR=2.54; high:OR=2.73).

Conclusion Participants with highest PASS were more likely to achieve the current recommendation for LPA (≥150 min/week). Social Support may be an important aspect for Physical Activity interventions and some encouragement from family and friends may have a positive impact in the behaviours changes.

Introduction Smoking is the leading cause of premature mortality and Russia is among the countries with the highest prevalence of smoking. Pregnancy is considered as a good time-point for smoking cessation and midwives can play an important role in this process. However, it is generally unknown how prevalent is smoking among midwives in Russia. The aim is to assess the prevalence of and attitudes towards smoking among midwives in Northwest Russia.

Methods A questionnaire on smoking and attitudes was sent to all 83 midwives in the city of Arkhangelsk and 72% of them responded. All data were analysed using χ² tests.

Results The prevalence of smoking among midwives was 43.5%. Forty-five percent of midwives considered that it is necessary to implement antismoking program in antenatal clinics. Most midwives (72.6%) did not agree that nurses should be involved in smoking prevention program for pregnant women. Only 17% of smokers counselled women on smoking cessation while among non-smokers this proportion was 52.0% (p=0.024). Surprisingly, 67.0% of midwives stated that it might be harmful to immediately quit smoking during pregnancy. Midwives reflected lack of knowledge to counsel pregnant women about tobacco. Many could not list main negative effects of smoking. Only 35.1% of midwives mentioned that smoking during pregnancy can cause feto-placental insufficiency, 24.6% named low birth weight and 5.0% mentioned miscarriage, intrauterine infections and lung diseases in infants.

Conclusions A high proportion of midwives are smokers themselves and many are poorly informed about effects of smoking.