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CHILD EXPERIMENTATION WITH, AND EXPOSURE TO, TOBACCO AND E-CIGARETTES: A MIXED METHODS STUDY OF PRIMARY SCHOOL CHILDREN IN WALES FROM 2007 TO 2019

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Background Children in the United Kingdom (UK) today have grown up amidst strong smoking restrictions, decreasing tobacco use and increasing e-cigarette use. It is debated whether e-cigarettes interrupt downward trends in children's smoking uptake or offer a means for adults to limit tobacco use in front of their children. This study examines change over time in experimentation with, and exposure to, smoking (2007–2019) and e-cigarettes (2014–2019).

Methods Mixed methods design combining data from four national surveys of Year 6 primary school pupils in Wales from 2007–2019 (n=6,741) and qualitative data from 22 focus groups within four primary schools.

Results Parental smoking (OR=0.85 95%CI=0.78–0.94), child tobacco experimentation (OR=0.50, 95%CI=0.40–0.63), and exposure to tobacco in all locations declined over time. Exposure to e-cigarettes increased in all locations from 2014–2019, as did pupil awareness (OR=2.56, 95%CI=2.13–3.09), and parental use (OR=1.26 95%CI=1.01–1.57). Child ever e-cigarette use was unchanged (OR=0.80, 95%CI=0.58–1.12). Since 2014, pupils' reports that parents used only e-cigarettes increased. Qualitative research identified strong disapproval for smoking and vaping indoors among children. Pupils from smoking families were more knowledgeable about e-cigarettes, with family smoking and e-cigarette use important in shaping children's exposure to, and perceptions of, smoking and vaping.

Conclusion Children's experimentation with, and exposure to, tobacco continues to decline. Further research is needed to understand whether use of e-cigarettes in cars and homes is displacing prior smoking in these locations or being introduced into environments where smoking had already been eliminated.

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GAPS IN THE LEGAL REGULATION OF SURROGATE ALCOHOLS CONSUMED FOR DRINKING IN RUSSIA

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Background During the past fifteen years significant progress has been made in Russia in reducing the total per capita alcohol consumption, which has contributed to a reduction in total and alcohol-attributable mortality. Part of this success was due to the implementation of the control policies targeting surrogate alcohols (SAs). However, the suppression of consumption of these alcohols was uneven, and at some periods after 2005 progressed rather slowly. Until now, a number of types of SAs still remain available, affordable, and consumed for drinking by subjects with alcohol use disorders (e.g. antiseptics, not denatured eau-de-colognes, medicinal spirits). This study was purported at assessing the

quality and identifying gaps in laws and regulations aimed at controlling the consumption of surrogate alcohols that were effective, newly enacted or amended in Russia between 2005 and 2019.

Methods Laws and regulations directed at SAs were identified by computer search in the Russian electronic reference systems for legislation (e.g. Consultant Plus; Garant), and on the web-sites of relevant state agencies. The content analysis of texts of regulations, evaluation of diversity of provided control policies, and of timing of their implementation, was performed.

Results Seventeen key regulatory documents (e.g. laws, decrees, orders, codes) were identified and analysed. The major identified gaps, related to control of SAs, included: 1) limited range of implemented control policies (e.g. no established minimal prices, or separate excise taxes on different types of SAs), 2) discrepancies and lack of harmonisation between different decrees and orders (e.g. while one decree banned production of medicinal tinctures in larger bottles (>25 ml of volume), another order allowed it in bottles up to 100 ml of volume), 3) poor enforcement (e.g. existence of sizable market of counterfeit methanol-based antifreeze and windshield washer liquids despite legal ban on their production and sale), 4) recommendatory character of some regulations (e.g. denaturing is recommended, but not obligatory), 5) delayed implementation of effective policies (e.g. ban on sale of specific types of SAs (cheap spirituous lotions, tonics, bath additives, food flavour enhancers) was implemented only after the large scale outbreak of poisonings with spirituous bath additive in Irkutsk in 2016), 6) temporality of implemented policies (e.g. bans on sale of cheap SAs are effective only for 6–9 months and may or may not be extended for the next periods of time), 7) overall lack of harmonization and coordination between different state agencies responsible for control of SAs (e.g. while one agency effectively suppressed consumption of specific perfumery and cosmetic alcohols, another agency responsible for medicinal spirits doesn't do this), and other gaps.

Conclusion Despite the progress achieved in controlling the consumption of specific types of surrogate alcohols, Russia still needs to do substantial work to improve quality of regulation of other types of surrogate alcohols. The fragmentary delayed control, and the reduced quality and insufficient enforcement of regulations can be partially explained by the lobby of manufacturers of surrogate alcohols, some of which are large-scale businesses capable of influencing the alcohol policy-making process.

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MAPPING INTERVENTIONS TO REDUCE THE PUBLIC HEALTH BURDEN OF GAMBLING RELATED HARMS

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Background Gambling is a highly profitable commercial activity with providers that include international corporations and governments. However, growing international recognition that gambling is a source of serious harm, and of inequity in the distribution of this harm, has led to demands for action and the production of policy documents proposing public health strategies to reduce harms at international, national and local