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**What factors do affect adolescent health behavior: parental family and more**

The paper presents the results of an econometric analysis of factors affecting health behavior of adolescents and young adults. In our study we try to understand what individual and household characteristics contribute or, on the contrary, reduce the risks of starting smoking and drinking alcohol.

Two age groups were considered in the analysis: children under 18 (the age of legal purchase of cigarettes and alcohol in Russia), and children and young adults under 21. Due to significant gender differences in smoking and alcohol consumption, the analysis was carried out separately for men and women. Two panel samples were considered: a significantly larger 20-year sample covering the period from 2000 to 2019 and a nine-year sample from 2011 to 2019, which better takes into account the significant decline in smoking and alcohol consumption among younger age groups observed in recent years. In assessing the factors of risky behavior in adolescents, we used survival regression analysis (nonparametric Cox model).

Below are the main results of the study.

A comparative analysis of the time of smoking initiation for different generations shows that nowadays adolescents start smoking at an age significantly below the age limit for buying cigarettes. Another important feature of the changes in the age of smoking initiation is the gradual smoothing of gender differences: if for the generation born in 1961-1980, women began to smoke much later than men, often after they left their parental families, then for the generation born in 2001 and later, men and women begin to smoke approximately equally early. Such a situation – the mass initiation of smoking before reaching the age of legal purchase of cigarettes – clearly indicates that the ban on the sale of tobacco products to minors is implemented ineffectively. Due to the rapid shift in cigarette sales from kiosks and small stores to supermarkets and large chain stores in recent years, one can expect an increase in the age of smoking initiation, but no such change has yet been observed in current data.

In contrast, the period after 18 years of age (young adults) plays a decisive role in the initiation of hard alcohol consumption. After the age of 18, largely due to the entry into the legal age of buying alcohol, the consumption of spirits is growing rapidly. And it is from this age that the difference in alcohol consumption between people from families with different levels of education begins to accumulate, which in the future will become the determining factor of differences in their health.

The performed regression analysis shows that health behavior of parents significantly affects the risks of starting smoking and drinking alcohol by their children in adolescence. In particular, maternal and paternal smoking significantly increases the risk that their adolescent children will start smoking too. In the case of alcohol consumption, parental consumption of spirits has a similar effect.

The absence of one of the parents (usually the father) in families also affects the lifestyle of the children brought up in them. More than 40% of the 14-17-year-old children live in a household without a father, about 10% – without a mother. The absence of a father in the family is a significant and important factor of the early start of smoking for both genders, as well as a factor of the early start of alcohol consumption for men.

In addition to the parental lifestyle and lack of parental attention in the case of a single parent family, there are other reasons for the early onset of smoking and drinking alcohol. In particular, it was shown that being overweight significantly increases the risks of starting smoking for girls. Another specifically feminine factor in smoking initiation is leaving in rural settlements (reduces the likelihood of early smoking initiation), where there may be greater public disapproval of harmful habits among women. A similar decline is also observed for the consumption of alcohol by adolescent girls.

The mother's higher education significantly opposes the initiation of smoking, regardless of gender. This factor greatly reduces the risks of starting smoking, and it is significant in all specifications of the regression model. Children raised in more educated families adopt from their parents a more rational attitude to their own health, which over time contributes to the emergence of a significant socio-economic gradient in the health of the generation.

In conclusion, it should be noted that the most reliable results were obtained for the analysis of smoking factors. The results obtained for alcohol consumption analysis are more difficult to interpret for a number of reasons. Various alcoholic beverages differ markedly in strength, and moderate alcohol consumption may not affect people's behavior and health. As a result, it is not so easy to identify a group with a dangerous type of consumption. In addition, the RLMS database contains retrospective data on the age of smoking initiation, which allows further refinement of the dependent variable used in the survival analysis.