



COMMISSION  
OF THE EUROPEAN  
COMMUNITIES

**EUROPE AGAINST CANCER**

EUROPEANS AND THE PREVENTION OF CANCER

Degree of awareness of the programme  
and the European Code against cancer :  
attitudes and behaviour with regard  
to the rules in the 'Code  
Opinions on the Community action

(October - November 1988)

June 1989

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## SUMMARY

EUROPEANS AND THE "EUROPEAN CODE AGAINST CANCER"  
Summary results of the October - November 1988 Eurobarometer Survey

The October - November 1988 Eurobarometer survey evaluated the degree of awareness and the degree of implementation of the European Code against Cancer. The same survey will be reconducted at the end of 1989, in order to evaluate the effectiveness of each of the awareness campaigns which will be organized in all countries of the European Community in 1989, as part of the "European Year of Information on Cancer".

I. DEGREE OF AWARENESS OF THE PROGRAMME AND THE EUROPEAN CODE AGAINST CANCER

Several questions were asked to find out how well the programme and the Code were known, that is to say to establish the strong and the weak points in the public awareness campaign.

1. In some countries the majority of the population had "recently" heard or read something about the "European Programme against Cancer": Portugal (68%), Italy (56%) and Belgium (56%). The programme was less well known in the Netherlands (28%), the Federal Republic of Germany (27%) and the United Kingdom (18%).

Compared with the previous survey, the programme is now significantly better known (October -November 1987) in Ireland, Portugal and Belgium. The decrease in Luxembourg is difficult to explain even if one considers the small sample size.

2. In countries where people have heard or read about the programme, people were also more likely to have heard about the "European Code against Cancer" and inversely. Graph 1A shows this correlation.

3. Another question was asked after the interviewer showed the European Code to the person being interviewed. This stimulates memory and the percentage of those who say they have read or heard about the Code increases significantly: 59% of the Portuguese, 49% of the Spanish, 44% of the Belgians, but only 23% of the British.

4. Where did they hear about the European Code? Mainly on television or in a newspaper magazine. Television seems to have been particularly effective in Portugal and Spain.

II. % OF PEOPLE JUDGING THE EUROPEAN CANCER PREVENTION RULES "VERY IMPORTANT"

For each of the rules included in the survey, the question was asked whether it was judged "very important, fairly important or not important in reducing the risks of cancer".

"Very important" is of course a very strong statement and it is this response we will be commenting on later. The meaning of a statement like this may not be strictly comparable from one country to another. This question will therefore be repeated in future surveys to draw further conclusions.

- The people of Portugal and Greece are the most aware of the great importance of the five rules dealing with lifestyle and cancer (tobacco, alcohol, fruit and vegetables, overweight, sun). Surprisingly, the Germans, the Danes and the Dutch are often not as aware as they should be.
- "Do not smoke": Europeans are well aware of the importance of this rule (76%) but surprisingly, Northern Europeans are the least aware: Netherlands (65%), Germany (68%), Denmark (69%).
- "Moderate consumption of alcoholic drinks": A small minority of Europeans are well aware of the great importance of this rule (57%). Here again, Northern Europeans are least aware: Denmark (30%), United Kingdom (38%), Germany (48%), Ireland (49%), Netherlands (50%).
- "Avoid excessive exposure to the sun": Only 44% of Europeans are aware of the great importance of this rule. Interestingly enough, among the least aware are the countries which are the highest hit by skin cancer: Netherlands (37%), Denmark (39%), Germany (40%).
- "Eat fresh fruits and vegetables frequently": A tiny majority of Europeans (56%) are aware of the importance of this rule.
- "Avoid being overweight": Only 47% are aware of its great importance.
- "Check your breasts regularly" and "Have a cervical smear regularly": At least three out of four European women are aware of the great importance of these two rules (72% and 71% respectively). Portuguese women are the least aware, possibly for cultural reasons and, surprisingly, German women.

All the above results are of great help in indicating to each country the particular European rules on which they should increase their information effort in order to attain the degree of awareness already achieved at the end of 1988 by certain other countries.

III. % OF PEOPLE IMPLEMENTING THE EUROPEAN RULES

- "Do not smoke": Two out of three Europeans are non-smokers, the least reasonable countries being Denmark and the Netherlands (55%). One European smoker in four says he wants to stop smoking, but the situation is rather different between countries: Germany (9%) and Italy (47%).
- "Moderate consumption of alcoholic drinks": Eight out of ten Europeans say they implement this rule: Germany (60%), Italy (89%).
- "Avoid excessive exposure to the sun": Two out of three Europeans say they implement this rule. The score is rather low in Germany (47%) and in the Netherlands (54%) where the death rate from skin cancer is particularly high.
- "Eat fresh fruit and vegetables frequently": Three out of four Europeans say they eat fresh fruit and vegetables every day or so. The percentage is the lowest in Germany (45%), where the death rate from stomach cancer is the highest in the Community.
- "Avoid being overweight": Two out of three Europeans say they implement this rule: from 54% (Germany) to 78% (Greece).
- "Cervical smear": Only 29% of European women state that they have a PAP test at least once every three years, which is the frequency normally recommended by cancer experts. Portugal (3%) and Spain (7%) rank the lowest, possibly due to cultural factors. France and Luxembourg (55%) hold the first rank, but even in these two countries more effort is required to prevent three quarters of the deaths by cervix uteri cancer which is an objective attainable today thanks to systematic smear testing.
- "Check your breasts": Only 37% of European women aged over 50 said they had a mammography every two to three years, which is the frequency recommended by cancer experts. There is therefore a long way to go for all Community countries in order to prevent one third of deaths by breast cancer, which is the potential benefit attributable to such a screening policy.

With regard to the implementation of a particular rule of the cancer code,

(iv)

it is evident that it will take more than one year for the least advanced countries to attain the results already achieved at the end of 1988 by certain countries. Significant changes in people's behaviour can be achieved only by a continuous effort over a long period of time. That is why the Committee of cancer experts has chosen the year 2000 as the target year to obtain a significant reduction (15%) in mortality due to cancer. Further, the Ministers for Health, in the Council Meeting of 31 May 1988, have taken due account of this fact in concluding that European information campaigns should be repeated regularly.

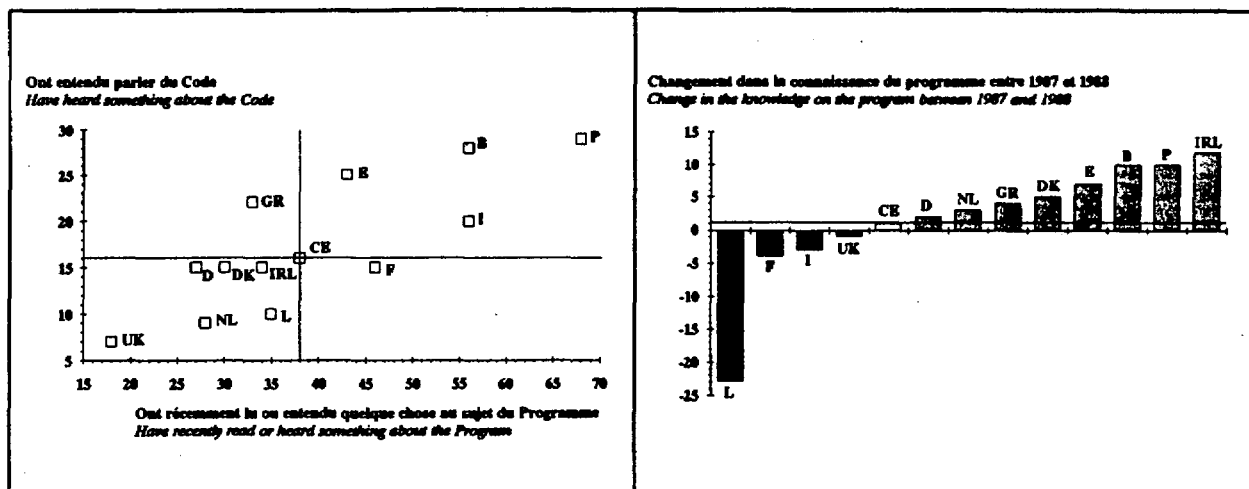
**TABLEAU 1 : % DE PERSONNES JUGENT "TRES IMPORTANT" LES COMMANDEMENTS EUROPEENS CONTRE LE CANCER**  
**TABLE 1 : % OF PEOPLE JUDGING THE EUROPEAN COMMANDMENTS AGAINST CANCER "VERY IMPORTANT"**  
(OCT. - NOV. 1988)

	B	DK	D	GR	E	F	IRL	I	L	NL	P	UK	CE (1)
	%	%	%	%	%	%	%	%	%	%	%	%	%
Ont récemment lu ou entendu quelque chose au sujet du Programme <i>Have recently read or heard something about the Program</i>													
(OCT. - NOV. 1987)	46	25	25	29	36	50	22	59	58	25	58	19	37
(OCT. - NOV. 1988)	56	30	27	33	43	46	34	56	35	28	68	18	38
<i>Différence - Difference</i>	+10	+5	+2	+4	+7	-4	+12	-3	-23	+3	+10	-1	+1
Ont entendu parler du "Code européen contre le cancer" <i>Have heard something about the "European code against cancer"</i>	28	15	15	22	25	15	15	20	10	9	29	7	16
Estiment "très important" chacun des commandements suivants <i>Judge "very important" each of the following commandments</i>													
- Ne pas fumer <i>Do not smoke</i>	73	69	68	81	77	77	81	81	75	65	83	78	76
- Modérer la consommation de boissons alcoolisées <i>Moderate consumption of alcoholic drinks</i>	59	30	48	70	70	71	49	63	62	50	77	38	57
- Eviter les expositions excessives au soleil <i>Avoid excessive exposure to the sun</i>	47	39	40	60	47	49	58	33	41	37	71	45	44
- Consommer fréquemment des fruits et des légumes frais <i>Eat frequently fresh fruit and vegetables</i>	63	59	57	69	61	52	59	52	61	61	73	52	56
- Eviter l'excès de poids <i>Avoid being overweight</i>	51	45	45	66	55	39	51	43	45	54	67	45	47
Femmes estimant "très important" de : <i>Women judging "very important" to :</i>													
- Surveiller ses seins régulièrement <i>Check their breasts regularly</i>	68	73	50	67	64	76	77	80	80	68	53	83	72
- Faire pratiquer régulièrement un frottis vaginal <i>Have a cervical smear regularly</i>	64	73	55	66	63	74	76	78	77	70	49	89	71

(1) MOYENNE PONDEREE - WEIGHTED AVERAGE

GRAPHE 1.a : % DE PERSONNES INFORMEES DE L'EXISTENCE DU PROGRAMME ET DU CODE EUROPEENS CONTRE LE CANCER  
GRAPH 1.a : % OF PEOPLE AWARE OF THE EXISTENCE OF THE EUROPEAN PROGRAM AND CODE AGAINST CANCER

(OCT. - NOV. 1988)



GRAPHE 1.b : % DE PERSONNES JUGENT "TRES IMPORTANT" LES COMMANDEMENTS EUROPEENS CONTRE LE CANCER  
GRAPH 1.b : % OF PEOPLE JUDGING THE EUROPEAN COMMANDMENTS AGAINST CANCER "VERY IMPORTANT"

(OCT. - NOV. 1988)

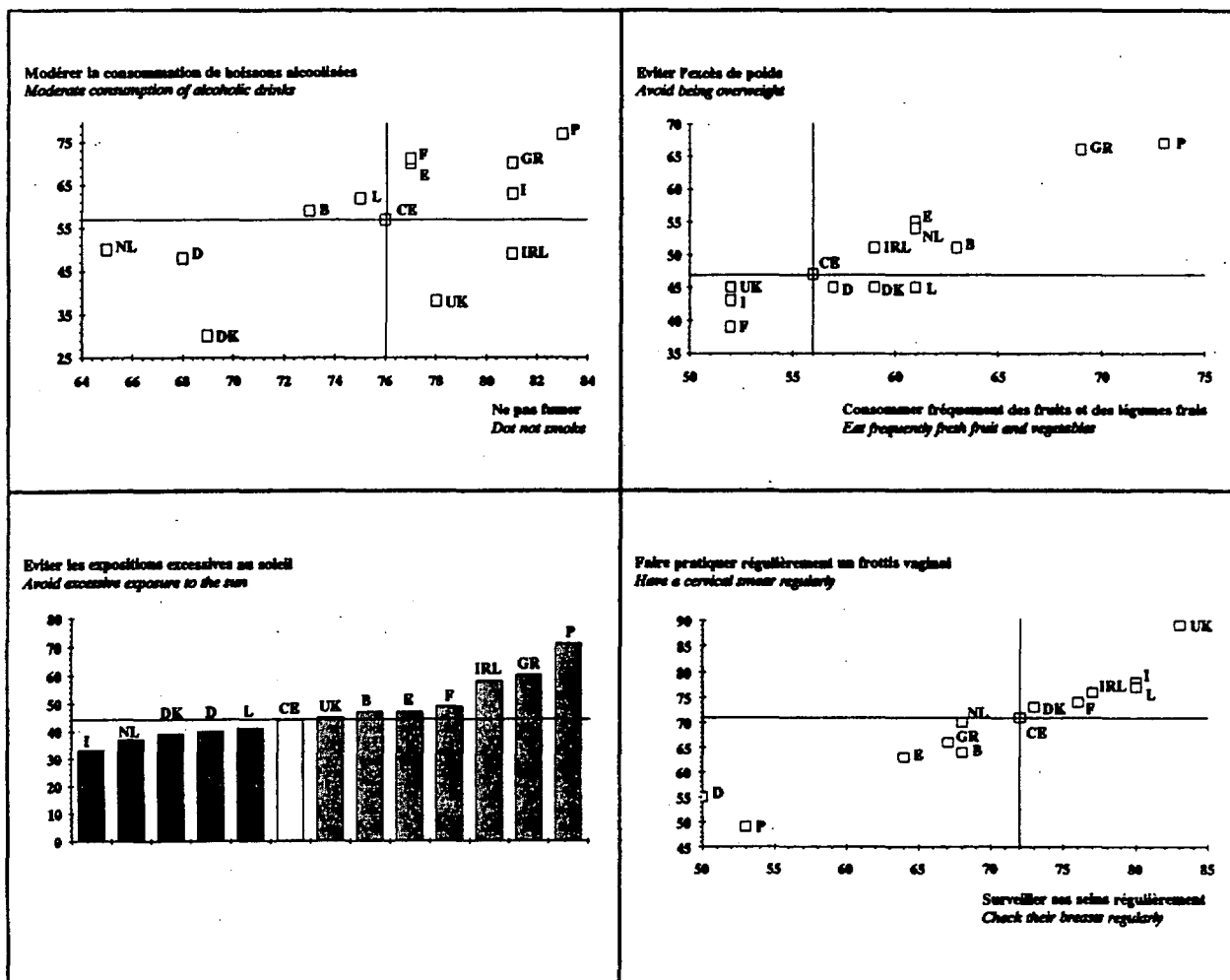




TABLEAU 2 : % DE PERSONNES APPLIQUANT LES COMMANDEMENTS DU "CODE EUROPEEN CONTRE LE CANCER"  
 TABLE 2 : % OF PEOPLE IMPLEMENTING THE EUROPEAN COMMANDMENTS AGAINST CANCER

(OCT. - NOV. 1988)

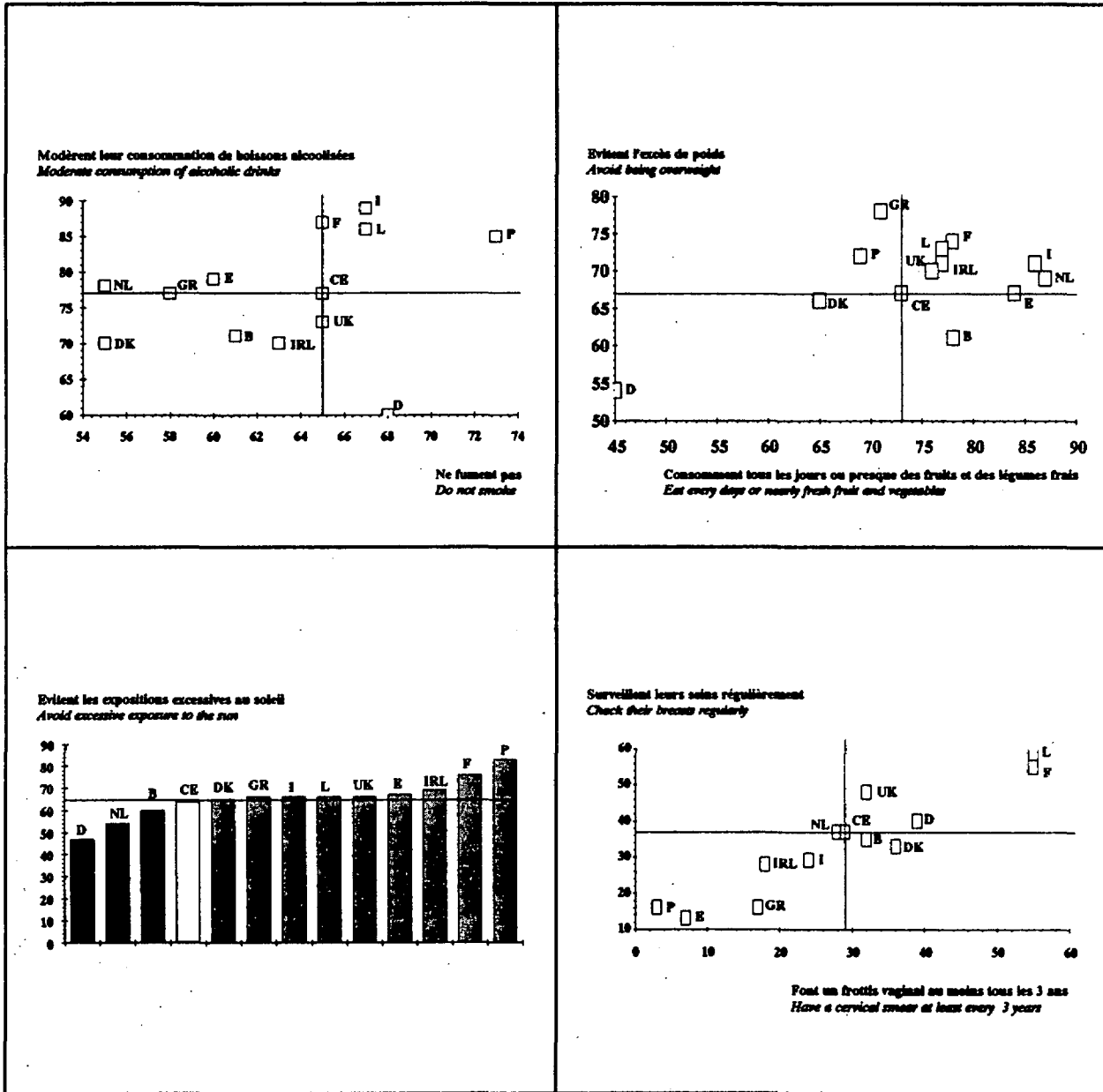
	B	DK	D	GR	E	F	IRL	I	L	NL	P	UK	CE (1)
	%	%	%	%	%	%	%	%	%	%	%	%	%
Commandement N°1 : Tabac <i>Tobacco</i>													
1. Non-fumeurs <i>Non-smokers</i>	61	55	68	58	60	65	63	67	67	55	73	65	65
2. Fumeurs disant avoir envie d'arrêter <i>Smokers saying they want to stop smoking</i>	23	22	9	40	26	25	38	47	30	20	19	28	26
Commandement N°2 : Alcool <i>Alcohol</i>													
Modèrent leur consommation de boissons alcoolisées <i>Moderate their consumption of alcoholic drinks</i>	71	70	60	77	79	87	70	89	86	78	85	73	77
Commandement N°3 : Soleil <i>Sun</i>													
Evitent les expositions excessives au soleil <i>Avoid excessive exposure to the sun</i>	60	65	47	66	67	76	69	66	66	54	83	66	64
Commandement N°5 : Fruits et légumes <i>Fruit and vegetables (3-4 1988)</i>													
Consomment tous les jours ou presque <i>Eat fresh fruit and vegetables every day or so</i>	78	65	45	71	84	78	77	86	77	87	69	76	73
Commandement N°6 : Excès de poids <i>Overweight</i>													
Evitent les excès de poids <i>Avoid being overweight</i>	61	66	54	78	67	74	71	71	73	69	72	70	67
Et pour les femmes <i>And for women</i>													
Commandement N°9 : Frottis vaginal <i>Smear test (3-4 1988)</i>													
Font au moins tous les 3 ans <i>Have a smear test at least every 3 years</i>	32	36	39	17	7	55	18	24	55	28	3	32	29
Commandement N°10 (a) : Seins <i>Breasts</i>													
Surveillent régulièrement leurs seins <i>Check their breasts regularly</i>	35	33	33	16	13	55	28	29	59	37	16	48	37
Commandement N°10 (b) : Mammographie <i>Mammography (3-4 1988)</i>													
Femmes de 50 ans ou plus qui le font tous les 2 ou 3 ans <i>Women aged over 50 having a mammography every 2 to 3 years</i>	3	4	2	10	1	2	1	1	(3)	7	1	1	2

(1) MOYENNE PONDEREE - WEIGHTED AVERAGE

(2) Les résultats par pays doivent être interprétés avec prudence, compte tenu de la taille du sous-échantillon étudié

GRAPHE 2 : % DE PERSONNES APPLIQUANT LES COMMANDEMENTS DU "CODE EUROPEEN CONTRE LE CANCER"  
GRAPH 2 : % OF PEOPLE IMPLEMENTING THE EUROPEAN COMMANDMENTS AGAINST CANCER

(OCT. - NOV. 1988)



**FINAL REPORT**

THIS SURVEY WAS MADE IN THE TWELVE COMMUNITY COUNTRIES AT THE REQUEST OF THE COMMISSION OF THE EUROPEAN COMMUNITIES IN CONNECTION WITH THE EUROPE AGAINST CANCER PROGRAMME.

AN IDENTICAL QUESTIONNAIRE OF SOME TWENTY QUESTIONS WAS PUT TO REPRESENTATIVE POPULATION SAMPLES IN THE TWELVE MEMBER STATES OF THE COMMUNITY IN OCTOBER-NOVEMBER 1988 IN ADDITION TO THE EUROBAROMETER NO 30 SURVEY. IN ALL 11 795 PEOPLE WERE INTERVIEWED IN PERSON IN THEIR HOMES BY PROFESSIONAL INTERVIEWERS.

THE SURVEY WAS CARRIED OUT BY TWELVE SPECIALIZED INSTITUTES, MEMBERS OF THE EUROPEAN OMNIBUS SURVEY, AND GENERAL COORDINATION WAS ENSURED BY "FAITS ET OPINIONS" IN PARIS. THE NAMES OF THE INSTITUTES ASSOCIATED WITH THE RESEARCH AND OTHER TECHNICAL INFORMATION ARE CONTAINED IN THE ANNEX.

THIS REPORT WAS DRAWN UP BY "FAITS ET OPINIONS" WITH THE ADVICE OF JACQUES-RENE RABIER. IN ACCORDANCE WITH NORMAL PRACTICE FOR THIS TYPE OF WORK THE EEC COMMISSION DISCLAIMS ANY RESPONSIBILITY FOR THE WORDING OF THE QUESTIONS, THE RESULTS PRESENTED AND ANY COMMENTS.

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## INTRODUCTION

In connection with the Europe against Cancer programme, the Committee of cancer experts appointed to the Commission of the European Communities drew up ten rules to help prevent cancer which were incorporated in the European Code against Cancer.

This document was officially transmitted to the Heads of State or Government in December 1987 and made available to the general public in 1988. It will, however, be widely disseminated throughout the twelve Member States of the European Community in 1989, which is the European Year of Information on Cancer.

This new study is part of the Community campaign against cancer and mainly concerns the knowledge and application of the European Code against Cancer. Its aim is to establish the current level of knowledge and awareness of Europeans before launching information campaigns in every Community country in 1989.

This report is in three main parts concerning:

- present awareness of the Community campaign and the Code against Cancer;
- public attitudes to the main rules in the Code;
- opinions of Community citizens on the Community cancer prevention campaigns.

Before tackling these questions we present the responses to a question included at the beginning of the survey showing that in many cases there is a personal involvement with the cancer problem. Most Europeans feel concerned by this disease.

**Question:** Have you ever thought that you might have cancer or that you might be in danger of developing it?

. Yes	68%
. No	29%
. No reply	<u>3%</u>
TOTAL	100%

Personal awareness of the risk of contracting cancer is widespread throughout the Community countries although the percentage of positive replies is a little lower in Greece and the United Kingdom, and among the younger members of the population.<sup>1</sup>

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<sup>1</sup> The findings by country and according to the main social/demographic criteria are set out in Annex A1.

CHAPTER 1

AWARENESS OF THE COMMUNITY CAMPAIGN AND  
THE EUROPEAN CODE AGAINST CANCER

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### 1.1 PUBLIC AWARENESS OF THE COMMUNITY CAMPAIGN AGAINST CANCER

Since the information campaign on the European programme against cancer was launched in October 1987, the Commission has sought periodically to measure the impact of the campaign in the Community countries.

The following question was asked for the first time in October/November 1987 when the campaign was launched and then again in the spring of 1988. This survey provides a new point of comparison one year later.

**Question:** Have you recently read or heard anything about the Community campaign against cancer?

	Autumn 1987 %	Spring 1988 %	Autumn 1988 %
. Yes	37	38	38
. No	59	58	59
No reply	<u>4</u>	<u>4</u>	<u>3</u>
TOTAL	100	100	100

Over one year there has been little change in the level of awareness of Community citizens as a whole: 38% state they have recently read or heard information about the European campaign against cancer but, as in the past, there are considerable differences between countries.

Today, two groups of countries emerge when their national results are compared with the Community average.

The first group includes countries where the level of public awareness is higher than average: Portugal (68%), Belgium (56%), Italy (56%), followed by France (46%) and Spain (43%).

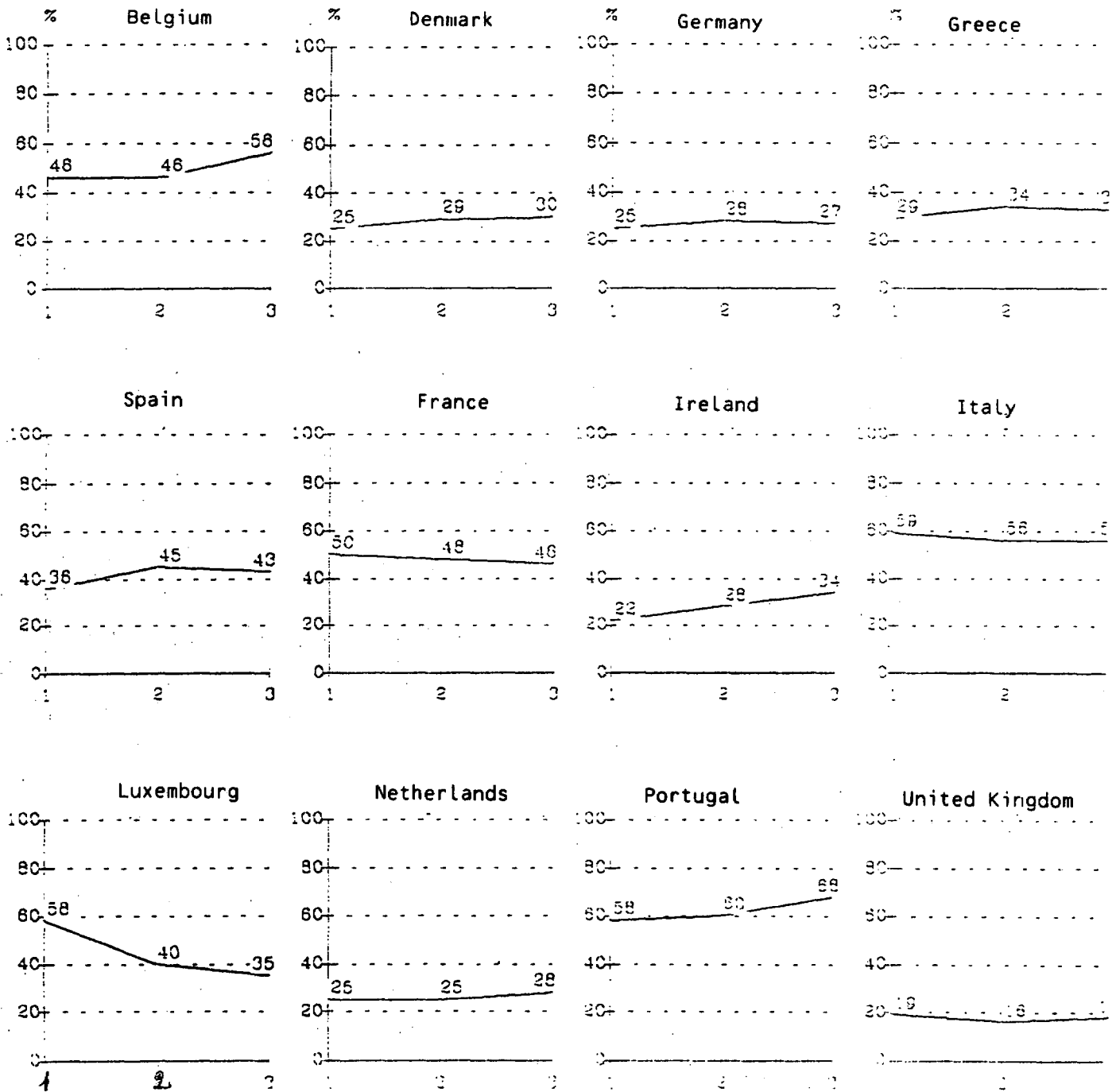
For the sake of symmetry, the second group is composed of countries with lower ratings: Luxembourg (35%), Ireland (34%), Greece (33%), Denmark (30%), the Netherlands (28%), Germany (27%) and, last, the United Kingdom (18%).

PUBLIC AWARENESS OF THE COMMUNITY CAMPAIGN AGAINST CANCER

(Persons who have recently read or heard something about this subject)

CHANGE SINCE 1987 BY COUNTRY

1 : Autumn 1987      2 : Spring 1988      3 : Autumn 1988



Although the results for the Community as a whole have remained remarkably stable since last year, this is not true in the case of every country (see graph on previous page). In some countries there has been a marked change, positive or negative.

The level of awareness in Portugal and Belgium was already high and has continued to improve, especially in the last six months (a total of 10 points in both cases). But the most marked increase occurred in Ireland. One year ago awareness of the Community programme stood at 22%, almost the lowest in the Community and close to the level in the United Kingdom. It has improved steadily and today stands at 34% whereas there has been no change in the United Kingdom.

On the other hand, the level of awareness of the public in Luxembourg continues to decline markedly.

In this connection it should be stated that the word "recently" included in the question focuses the attention of the respondent on the immediate past. This is not a measurement of overall awareness of the Community programme but rather a means of studying the impact of an information campaign in recent months. Therefore it is understandable that the replies should vary considerably in either direction from one survey to another.

As in the past, social and demographic differences are relatively slight compared with national differences (see table on following page). Young people, persons with an average or high level of education and persons in the upper income bracket are less often aware of the Community campaign against cancer, at least in the recent past. This situation is not often observed in opinion surveys but has been encountered in each of the three studies. It may, perhaps, be partly explained by young people's lesser awareness of the threat of cancer, as noted previously.

PUBLIC AWARENESS OF THE COMMUNITY CAMPAIGN AGAINST CANCER  
 BY THE MAIN SOCIAL/DEMOGRAPHIC CRITERIA:  
 CHANGES SINCE 1987

	Autumn 1987 %	Spring 1988 %	Autumn 1988 %
OVERALL	37	38	38
SEX:			
Men	36	37	37
Women	38	39	39
AGE:			
15-24 years	29	30	33
25-39 years	33	34	36
40-54 years	41	42	41
55 years and over	42	43	40
EDUCATIONAL LEVEL: *			
Low	40	42	42
Average	34	34	34
High	36	34	37
HOUSEHOLD INCOME: *			
Low	37	40	41
-	39	40	39
+	37	40	39
High	36	36	36

\* See Annex B1 for the definition of these groups.

Generally speaking, the fact of becoming aware of the possibility of one day developing cancer is related to awareness of the Community programme as shown by the table below.

	HAS THOUGHT ABOUT DEVELOPING CANCER AND THE RISK	
	YES	NO
	%	%
Has seen, read or heard something about the European campaign against cancer		
. Yes	42	30
. No	56	68
No reply	<u>2</u>	<u>2</u>
TOTAL	100	100

It should be pointed out that over a period of months and in the course of surveys, awareness of the Community campaign differs markedly from one country to another. This would seem to confirm the existence of significant differences in media coverage of the campaign in the Community countries.

### 1.2 PUBLIC AWARENESS OF THE CODE AGAINST CANCER

Question: Have you heard anything about a European Code against Cancer?

. Yes	16%
. No	81%
No reply	<u>3</u>
TOTAL	100

Few Europeans have heard of the Code. Only 16% say they have heard of this document when its name is mentioned.

But, awareness of the Code increases sharply when the respondent is shown the document: one person in three is aware of having seen it before.

Here is the "European Code Against Cancer" consisting of ten elementary rules for the possible prevention of cancer, which have been developed by a European Committee of cancer experts. This expert committee includes cancer specialists from all member countries of the Community, including (your country).

Now, do you remember having read or heard anything about this European Code Against Cancer?

Yes	37%
No	53%
Hesitates in replying	7%
No reply	3%
	100%

The discrepancy between remembering the name and awareness of the document is an indication of its recent appearance. Many are still unaware of the title, "European Code against Cancer" although they may remember having read or heard something about the document when it is shown to them.

Of course awareness of the Code is related to awareness of the Community campaign. Most people questioned - the better informed - who spontaneously say they know the document had previously replied that they knew something about the campaign.

HAVE RECENTLY READ OR HEARD SOMETHING ABOUT THE COMMUNITY CAMPAIGN

	YES	NO	NO REPLY	TOTAL
OVERALL	38	59	3	100
Those who have heard of the European Code				
. Yes	80	19	1	100
. No	29	69	2	100
Those who remember having read or heard something about the Code when they are shown it				
. Yes	59	39	2	100
. No	24	74	2	100

This link is still more apparent in the country-by-country results, namely, overall the countries where people have the most frequently read or heard something about the campaign are also the countries where many people say they know the Code and vice-versa. The graphs on the next two pages illustrate this correlation.

Thus, taking the two questions together, awareness of the Code is highest in Portugal, Belgium, Italy and Spain; while it is the least well known in the United Kingdom and Luxembourg.

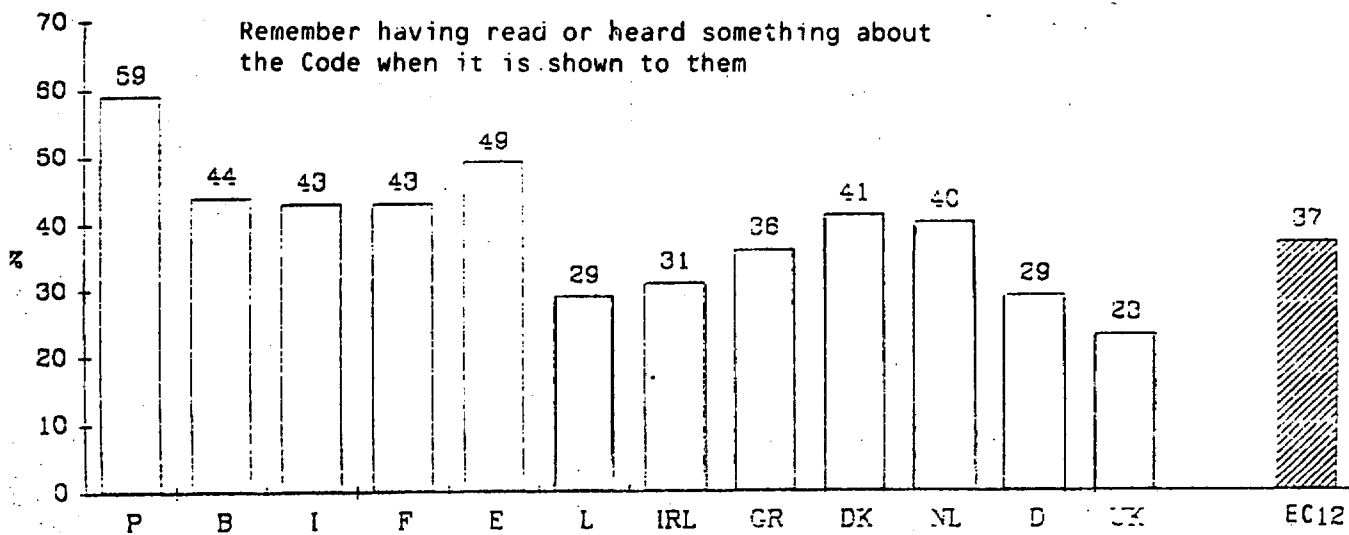
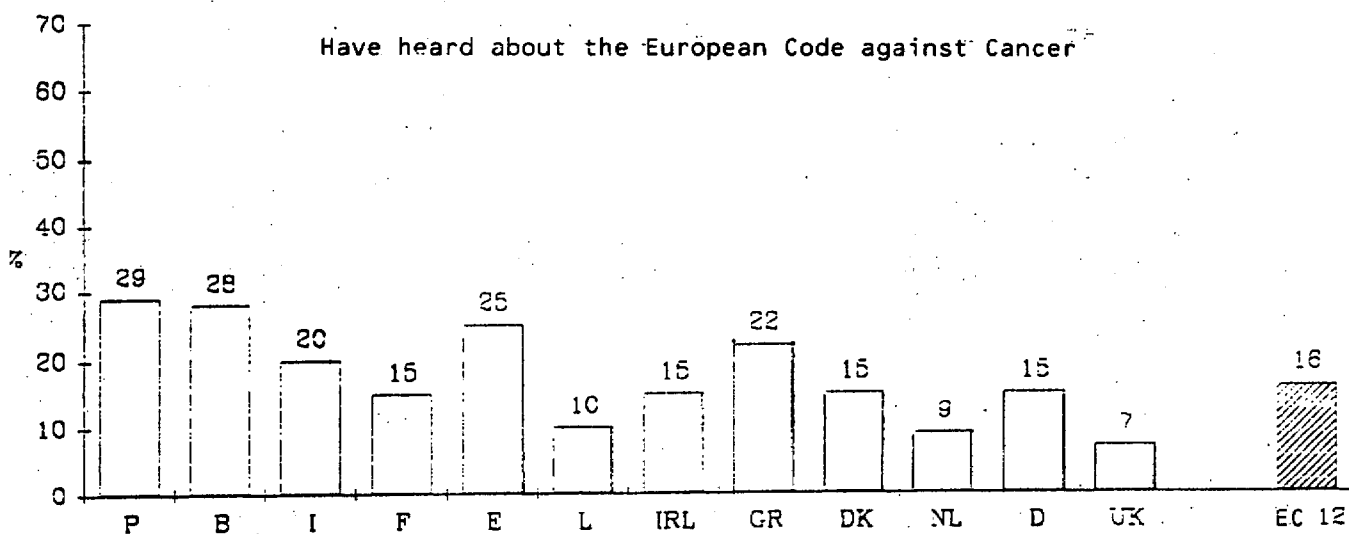
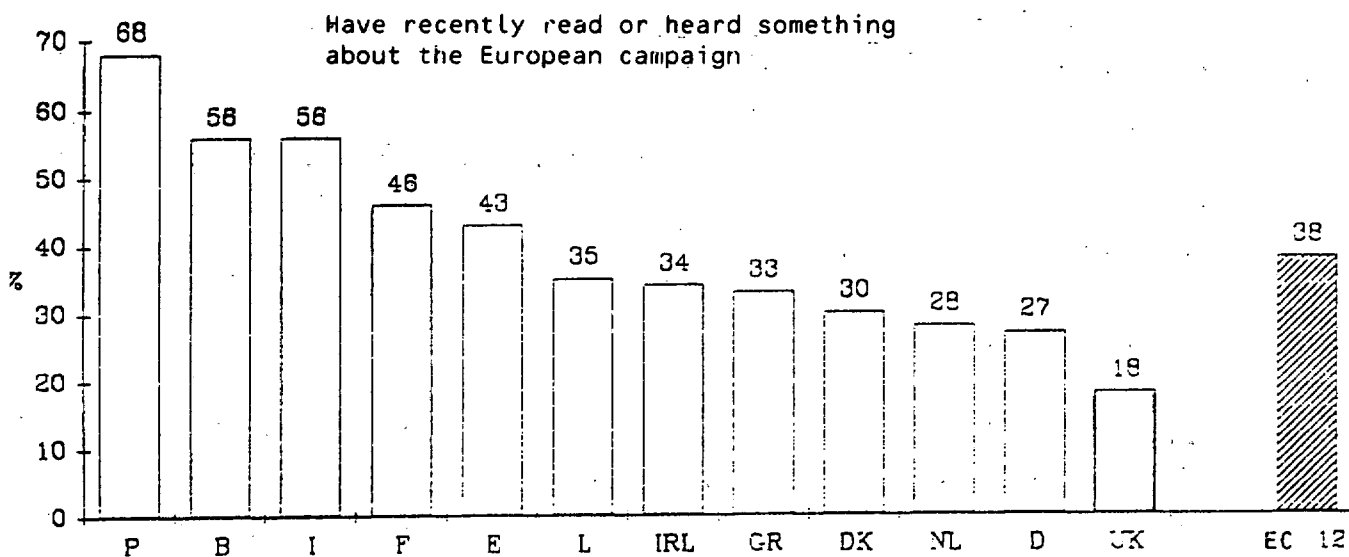
However, some countries are in a special position:

- . In Denmark and the Netherlands where the level of knowledge of the campaign is low, few people spontaneously say they know the Code. On the other hand, the percentage rises rapidly once the document is shown to them.

In Denmark, the situation is explained by the fact that the title "European Code against Cancer" was not often used. The document was more frequently disseminated under the title "Ten personal rules against cancer". The results seemed to reflect this specific feature.

In both these countries, efforts to disseminate the rules to prevent cancer have reached a large number of the public.

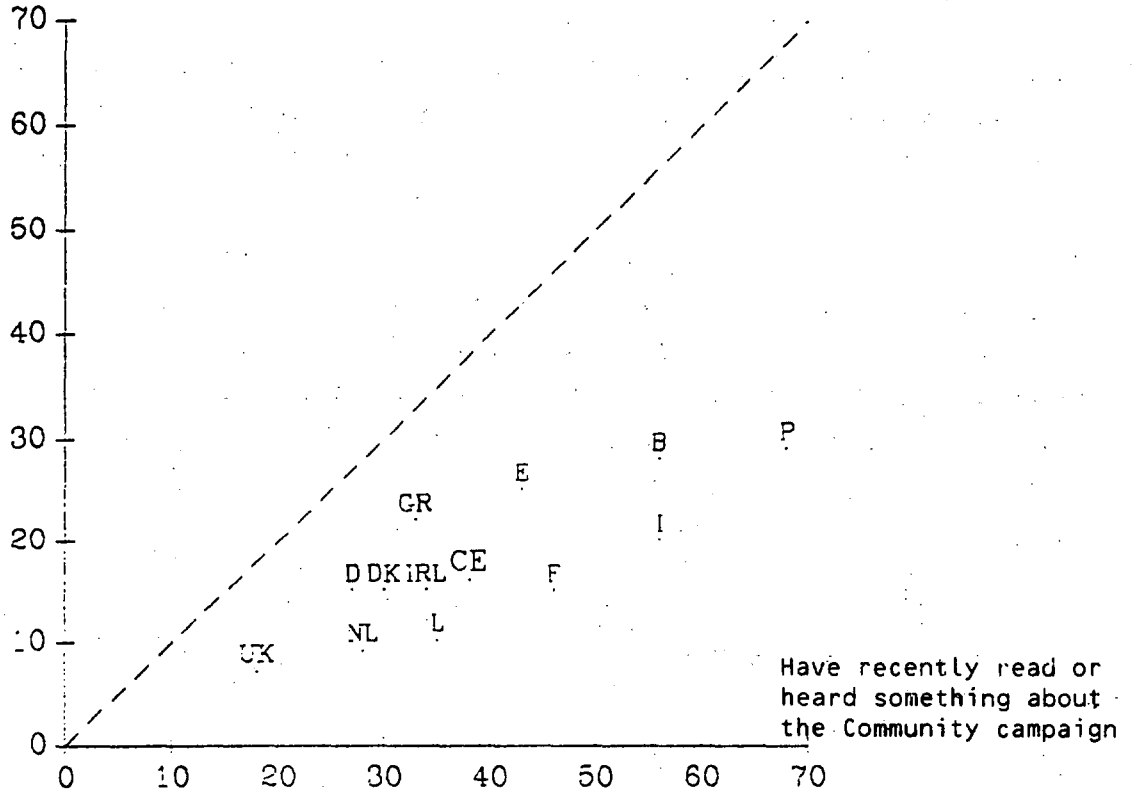
AWARENESS OF THE CAMPAIGN AND  
THE EUROPEAN CODE AGAINST CANCER BY COUNTRY  
(in decreasing order of awareness)



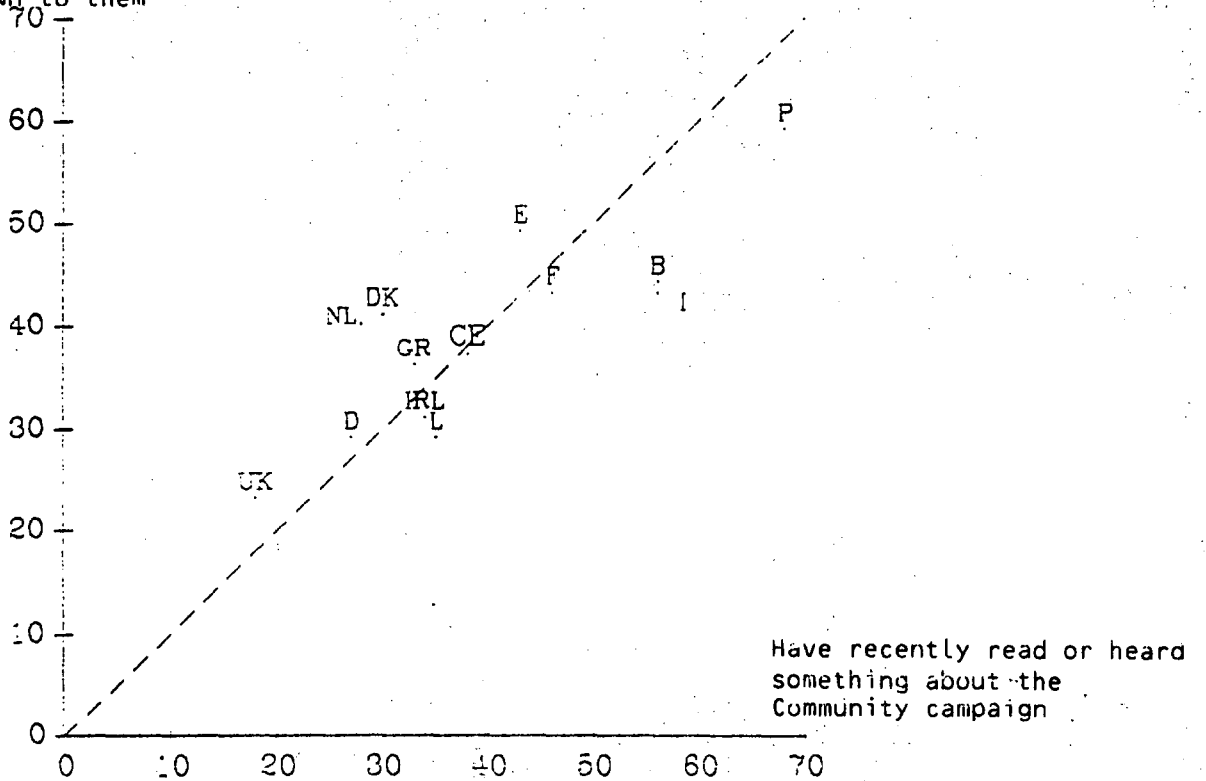


LINK BETWEEN AWARENESS OF THE CAMPAIGN AND  
OF THE CODE AGAINST CANCER

Have heard about the  
Code against Cancer



Remember having read or heard  
something about the Code when  
it is shown to them



- . France is close to the previous cases with a difference of 28 points between the number remembering the name and remembering having seen the document. However, nearly one French person in two (46%) has heard of the Community campaign, which is higher than the Community average.
- . Lastly, the number of Greeks who have heard of the European Code against Cancer is among the highest in the Community with 22%, but only 36% are aware of the document, which is the same as the Community average.

As before, analysis of awareness of the Code by the usual social/demographic criteria is of little interest. However, the number of respondents who remember having seen or heard something about it is slightly higher among women, among the better educated and among those with a level of cognitive mobilization (see table on following page).

AWARENESS OF THE CODE AGAINST CANCER  
IN THE LIGHT OF THE MAIN SOCIAL/DEMOGRAPHIC  
AND SOCIAL/POLITICAL CRITERIA

	Have heard about the Code	Remember the Code when it is shown
B	%	%
OVERALL	16	37
SEX:		
Men	16	34
Women	17	41
AGE:		
15-24 years	14	36
25-39 years	16	40
40-54 years	18	38
55 years and over	17	36
EDUCATIONAL LEVEL:		
Low	17	36
Average	18	37
High	18	41
COGNITIVE MOBILIZATION: *		
High ++	18	39
+	19	40
-	18	37
Low —	18	33

\* See the definition of this criterion in Annex B2.

### 1.3 IMPACT OF THE ACTIONS DISSEMINATING THE CODE AGAINST CANCER IN 1988

In 1988 many agents were mobilized in the twelve Community countries to promote the European Code against Cancer, particularly during the European Week against Cancer on 1-8 May.

Many types of actions were carried out: television broadcasts, press articles, special issues of specialized reviews, information days, dissemination of the Code to doctors, chemists or directly to households, etc..

As seen above, over one-third of Community citizens (37%) stated they had read or heard about the Code when it was shown to them. The question below was asked with a view to obtaining an initial assessment of the dissemination campaign while distinguishing between the specific impact of the main types of actions.

Results were calculated on the basis of the 37% who said they had seen or heard about the Code, but the second column shows the proportion of the total population questioned to establish the proportion of the public affected by dissemination campaigns.

Question: This document, for example, have you seen it for example:

	Those who remember seeing the Code when it is shown them (37% of the total)	Total population
	%	%
On television	49	19
At the chemist's	19	7
At the doctor's surgery	36	14
In a newspaper or magazine	47	18
Elsewhere	22	8

Generally speaking, the European public became aware of the Code through the media - television and press. Of those who remember it, almost half had heard about it on television, and almost as many had seen it in a newspaper or review. In relating these figures to the total population it is noted that nearly one person in five became aware of the Code through television and almost as many through the press.

Displaying the Code on posters at the chemist's and the doctor's surgery also had a significant impact since it became known to 7% and 14% respectively of the European public.

The graph on the following page shows the impact of the various supports on the information level of the public. As we know, this differs significantly from one country to another.<sup>1</sup> To make comparison possible the results are presented on the basis of the persons who say they have seen or heard about the Code.

The impact of national television on the level of public awareness is very high in four countries in particular: Portugal (70%), Spain (68%), Greece (62%) and Denmark (58%). On the other hand, the impact of television was less in Ireland (42%), Germany (41%), France (39%) and Luxembourg (27%). The results in the latter country should be treated with caution in view of the small population involved.

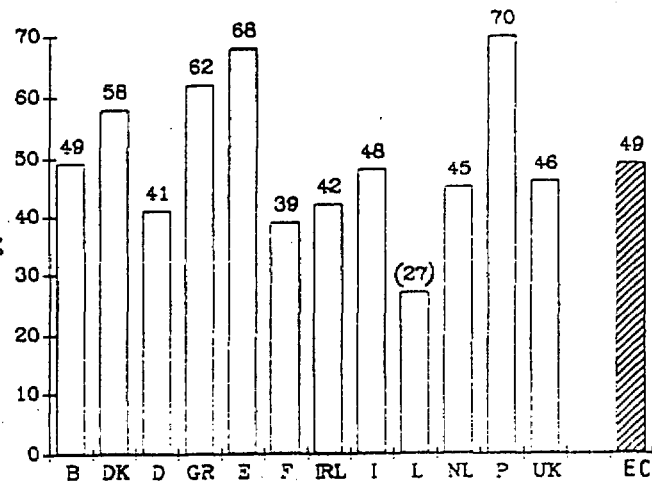
In Portugal and the Netherlands displaying the Code in chemists' shops seems to have been the most effective, whereas it seems to have had but little impact in the United Kingdom and Ireland. Dissemination of the Code to doctors obtained relatively high results in every country, especially in Germany, the Netherlands and France.

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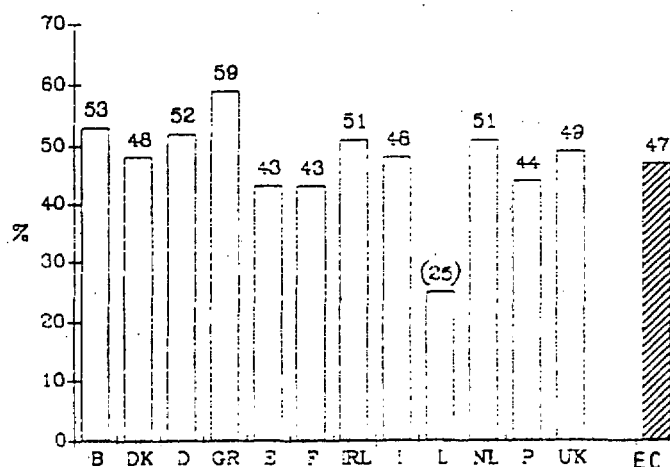
1 The figures range from 59% in Portugal to 23% in the United Kingdom.

PLACES AND SUPPORTS ON WHICH THE CODE WAS SEEN, BY COUNTRY  
(persons who had read about it or remembered hearing  
about it when the Code was shown to them)

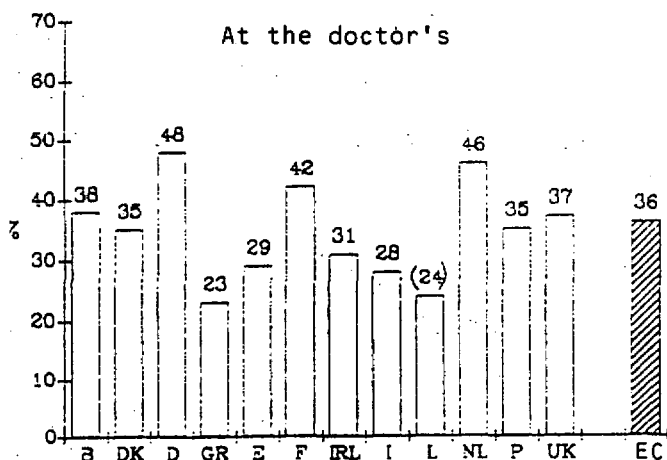
On television



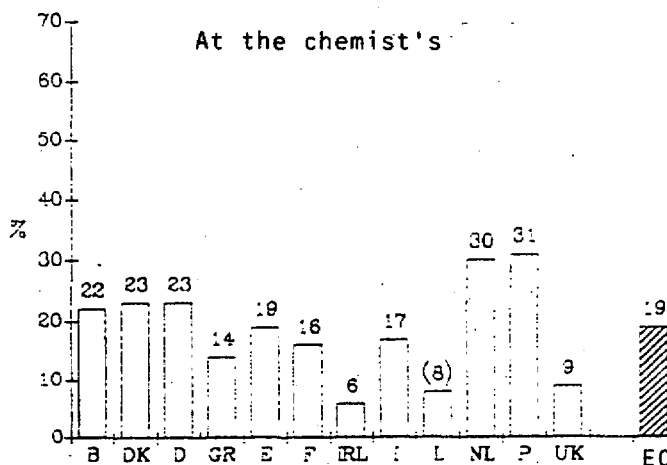
In a newspaper or review



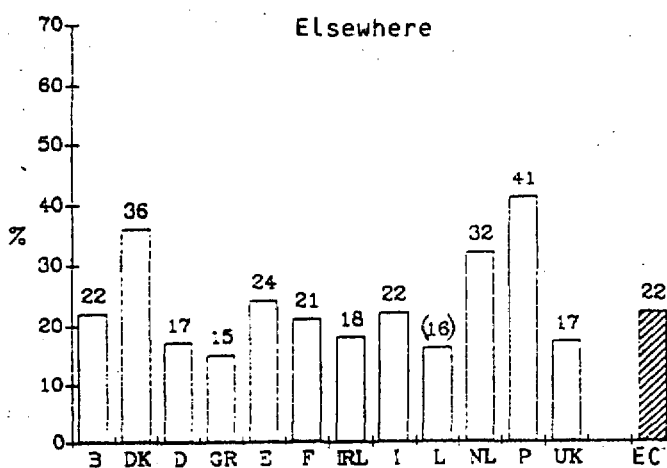
At the doctor's



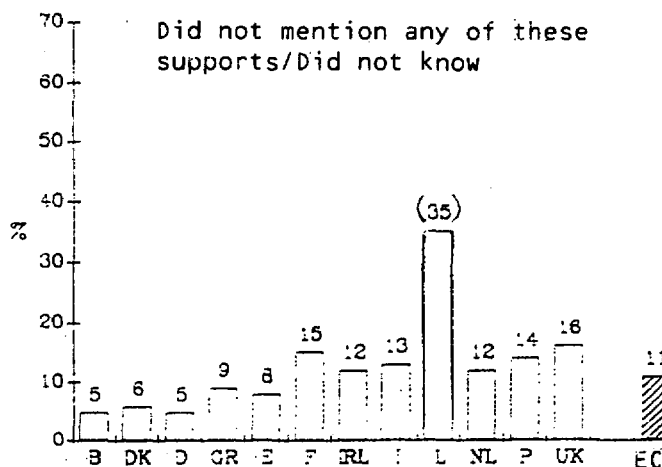
At the chemist's



Elsewhere



Did not mention any of these supports/Did not know



NB. The results for Luxembourg should be treated with caution given the small population.

#### 1.4 SUMMING UP OF THE LEVEL OF AWARENESS OF EUROPEANS

When the replies to the four questions presented in the foregoing paragraphs are analysed together, it is possible to assess the public's current level of awareness, or more precisely, to identify different groups in the population according to their level of information about the Community campaign against cancer as a whole.

The following four criteria were applied:

- had recently read or heard something about the campaign
- had recently heard about the European Code against Cancer
- remembered having read or heard something about the Code when it was shown to them
- remembered at least one place where they had seen the Code.

An analysis of the various combinations of results makes it possible to divide the population into four main groups each with its own characteristics (see table on following page).

These four groups are not of the same size.

The first represents 10% of the general public. It includes Europeans with a good knowledge of the campaign against cancer carried out by the Commission of the European Communities. They have heard about the programme and the Code, they are familiar with the document and its ten rules and remember the circumstances in which they had seen it. In other words, they gave a positive answer to the four questions.

The common point of the 23% of Europeans in the second group is that they are familiar with the Code. All remember having seen it when shown it, and know how they first heard of it. Almost one in two is also aware of the Community campaign.

In autumn 1988, it can be concluded that the efforts to disseminate the Code have had an impact on one in three Europeans.

The third group includes those who replied positively once or twice to the four reference questions, but have only a partial and vague knowledge of the subject. They represent 21% of the population aged 15 years and over. Most of them say they have heard of the Community campaign against cancer, but only one in five believe they have seen the Code, but do not remember where.

The remaining 46% have not recently heard about the campaign and in particular are unaware of the Code.

The size of the latter group varies considerably from one country to another as shown in the following table and the graph on page 21. It includes two-thirds of the population in the United Kingdom and over half in Germany, but only 21% in Portugal, and a little over 30% in Italy, Belgium, Spain and France.

On the other hand, the proportion of those with a good knowledge is 22% in Portugal but only 3% in the United Kingdom.

**LEVEL OF AWARENESS OF THE CAMPAIGN AND THE CODE,  
BY COUNTRY**

	++ (%)	+ (%)	- (%)	— (%)	TOTAL (%)
TOTAL COMMUNITY	10	23	21	46	100
COUNTRY:					
BELGIUM	20	22	25	33	100
DENMARK	11	28	14	47	100
GERMANY	11	17	13	59	100
GREECE	14	20	18	48	100
SPAIN	15	30	21	34	100
FRANCE	8	28	29	35	100
IRELAND	10	18	20	52	100
ITALY	13	15	31	31	100
LUXEMBOURG	6	13	28	53	100
NETHERLANDS	5	30	18	47	100
PORTUGAL	22	29	28	21	100
UNITED KINGDOM	3	16	14	67	100



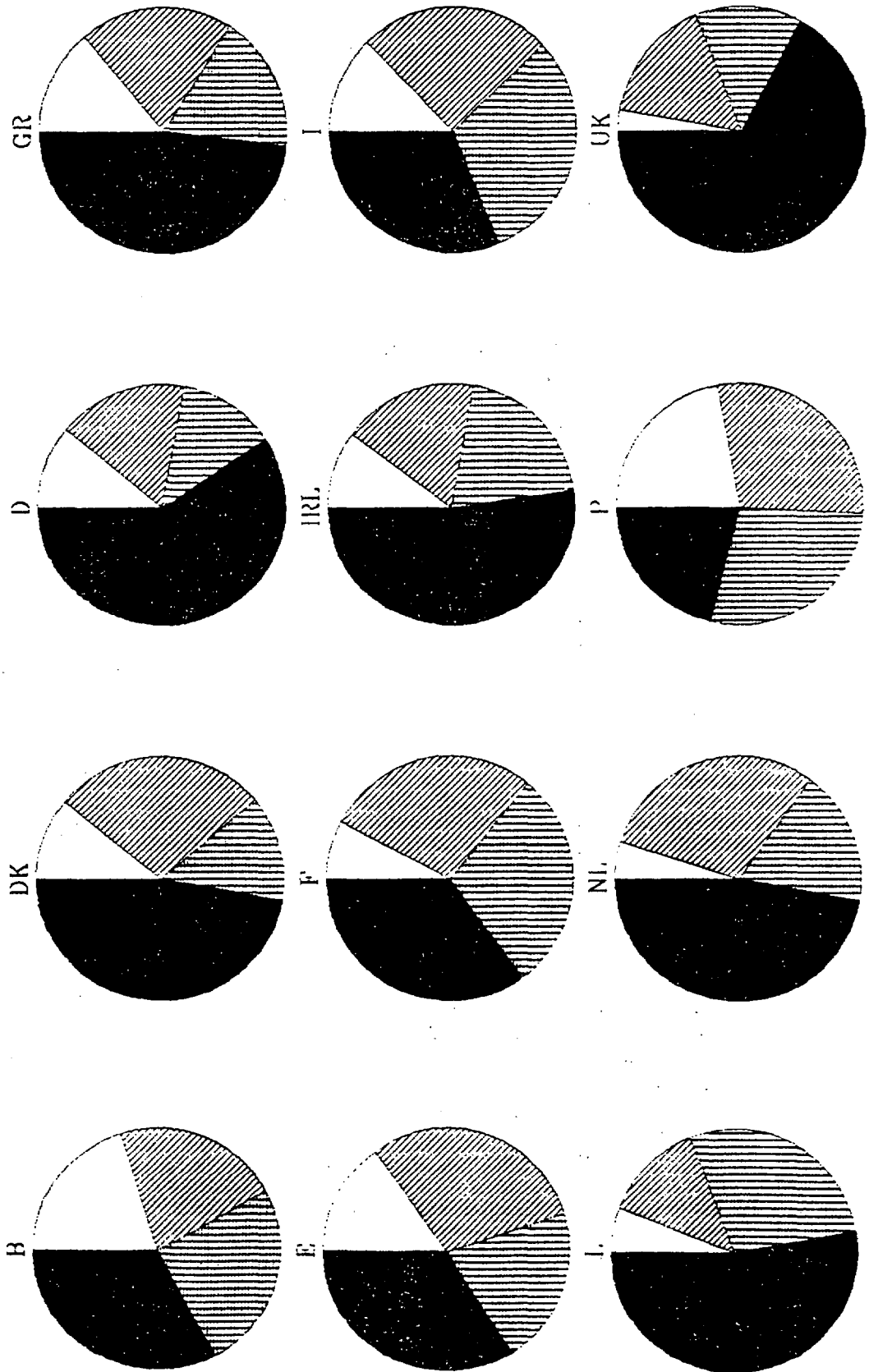
LEVEL OF AWARENESS OF THE CAMPAIGN AND THE CODE AGAINST CANCER

High	++	10 %
	+	23
	-	21
Zero	--	46
		<u>100</u>

	++ (%)	+ (%)	- (%)	-- (%)	TOTAL (%)
- Have recently read or heard something about the campaign:					
Yes.....	100	42	85	-	38
No .....	-	55	15	96	59
No reply .....	-	3	-	4	3
TOTAL.....	100	100	100	100	100
- Have heard about the Code:					
Yes.....	100	9	20	-	16
No .....	-	88	77	96	81
No reply .....	-	3	3	4	3
TOTAL.....	100	100	100	100	100
- Remember having heard something about the Code when it is shown to them:					
Yes.....	100	100	19	-	37
No .....	-	-	65	86	53
Not sure .....	-	-	11	9	7
No reply.....	-	-	5	5	3
TOTAL.....	100	100	100	100	100
- Remember having seen the Code:					
- on television .....	58	54	-	-	19
- at the chemist's .....	24	21	-	-	7
- at the doctor's .....	41	41	-	-	14
- in a newspaper or review .....	53	53	-	-	18
- elsewhere .....	26	24	-	-	8
- don't remember .....	-	-	100	100	50
TOTAL.....	(1)	(1)	(1)	(1)	(1)

(1) Total over 100 due to multiple replies.

LEVEL OF AWARENESS OF THE CAMPAIGN AND THE CODE AGAINST CANCER



Whereas the size of the four groups described above varies considerably from one Community country to the other, no specific features stand out in their social/demographic structure. Regardless of sex, age, educational level, income or degree of cognitive mobilization the proportion of people who are very well, quite well, barely or not at all informed scarcely varies.

Lastly, it should be noted that the persons with the highest level of awareness of the campaign and the Code are also the most aware of the dangers of cancer (see table below).

By level of awareness of the campaign and the Code	Have thought about having cancer or the danger of having one			Total
	Yes	No	No Reply	
High level ++	79	19	2	100
-	74	25	1	100
-	69	27	4	100
Level zero —	51	35	4	100

LEVEL OF AWARENESS OF THE CAMPAIGN AND THE CODE AGAINST CANCER

	++	+	-	--	TOTAL
TOTAL .....	10	23	21	46	100
<b>S E X :</b>					
MEN .....	13	20	22	49	100
WOMEN .....	11	26	20	43	100
<b>A G E :</b>					
15-24 years .....	8	23	21	48	100
25-39 years .....	10	25	20	45	100
40-54 years .....	13	22	20	45	100
55 years and over .....	11	21	23	45	100
<b>EDUCATIONAL LEVEL (*) :</b>					
Low .....	10	22	24	44	100
Average .....	10	23	19	48	100
High .....	11	25	20	44	100
<b>HOUSEHOLD INCOME (*) :</b>					
Low -- .....	10	22	24	44	100
- .....	11	22	21	46	100
+ .....	10	25	23	42	100
High ++ .....	13	23	17	47	100

CHAPTER 2

EUROPEANS AND THE CODE AGAINST CANCER:  
IMPORTANCE AND APPLICATION OF THE RULES

---

Seven of the ten rules in the Code against Cancer were surveyed.

Five rules are of general application for men and women and are specific preventive measures. The other two, however, concern only women and the aim is to achieve early detection of cancer of the uterus or the breast.

In each case, respondents were questioned on the importance of reducing cancer risks and personal application of the rule.

This chapter is in four parts, which considered in turn, will provide an overall view of the results, followed by a comparative analysis of the views and behaviour of the respondents with respect to each of the rules surveyed (general rules and rules for women) and finally the effect of certain variables on the attitudes of Europeans with regard to cancer prevention.

## 2.1 OVERALL PRESENTATION

### (a) Importance of the rules in reducing the risk of cancer

#### General rules

Question: Can you tell me, for each of the rules I am going to mention if it is very important, fairly important or not important in reducing the risk of cancer?

	Very Important	Fairly Important	Not Important	No Reply	TOTAL
Do not smoke	75	19	5	1	100
Moderate consumption of alcoholic beverages	57	33	8	2	100
Avoid excessive exposure to the sun	44	39	13	4	100
Eat frequently fresh fruit and vegetables	56	31	10	3	100
Avoid being overweight	47	35	14	4	100

Of the five rules concerning lifestyle, Europeans are the most often agreed that smoking is dangerous: three in four consider that it is a very important rule in combating cancer. The study made in Spring 1987 showed that this rule was by far the best known.<sup>1</sup>

The other rules are considered essential by about half the population (44 to 57%). Rules concerning the consumption of alcohol and fresh products received fewer "very important" replies than the other two.

#### Rules for women

It is generally recommended that a smear test be carried out at least every two or three years, from the beginning of regular sexual intercourse and from the age of thirty until the menopause, and that a self-examination of the breasts to detect any abnormality be carried out at the end of the monthly cycle.

On the whole, European women are generally aware of the importance of these two rules: in both cases, 71% of women consider it is "very important" in reducing the risk of cancer.

#### FOR WOMEN ONLY

Question: Here are two pieces of advice for women. For each of them please tell me if it is very important, fairly important or not important at all in lessening the risks of cancer.

	Very Important	Fairly Important	Not Important	No Reply	TOTAL
Regularly have a cervical smear	71	19	3	7	100
Check your breasts regularly	71	20	3	6	100

<sup>1</sup> At that time 88% of Europeans stated they were familiar with it. See Europeans and the prevention of cancer: a survey of public attitudes and behaviour. Commission of the European Communities, June 1988.

b) Application of the rules

General rules

With respect to each rule, over six in ten Europeans say they apply the rule in question, that is over three-quarters regarding the consumption of alcohol (77%) and fresh products (76%).

It should be said that four of the five rules surveyed express the idea of moderation rather than frequent consumption. Consequently, these are subjective notions and it can be assumed that some of the rules are not interpreted in the same way by everyone, in particular national results are not rigorously comparable, given the differences in the lifestyle and cultural habits of each country surveyed.

It is not a question of measuring precise consumption levels of one or other product or the real frequency of certain behaviour. More simply, the results make it possible to determine the proportion of the public which takes account in its lifestyle of the consumption patterns and activities that are recommended or advised against in the Code whatever the reason may be.

Question: As far as you personally are concerned, for each of these rules would you say that you are following it already, you have the intention to try to follow it, or you don't intend to try?<sup>1</sup>

	Following them	Intend to follow	to do not intend to follow	No reply	TOTAL
Do not smoke	63	17	19	1	100
Moderate consumption of alcoholic drinks	77	13	9	1	100
Avoid excessive exposure to the sun	64	14	19	3	100
Eat frequently fresh fruit and vegetables	76	15	7	2	100
Avoid becoming overweight	67	21	9	3	100

<sup>1</sup> During the interview, this question was asked immediately after the question about the importance of the five rules. It was then followed by the two questions concerning women. See questionnaire in the annex.



Rules for women

The cervical smear test and breast examination are not practised regularly by a majority of European women. About one third has never carried out these screening tests and about one in four has carried them out from time to time.

Only for women

Question: And for you personally for each of these rules do you do it regularly, from time to time or not at all?

	Regularly	From time to time	Not at all	No reply	TOTAL
Have a cervical smear regularly	38	23	35	4	100
Check your breasts regularly	37	29	30	4	100

2.2 GENERAL RULES

In each country we will jointly examine the number of people who gave the following replies concerning each of the five rules surveyed:

The rule is very important in reducing cancer risks

I apply it already<sup>1</sup>.

This will make it possible to determine what proportion of the European public is aware of these cancer prevention measures and the number of persons who take them into account in their behaviour.

With respect to smoking, however, two additional questions were included in the survey, one concerning the number of smokers, former smokers and non-smokers, the other concerning the number who wish to stop or cut down smoking.

(a) Do not smoke

For the third time since 1987 we asked respondents to state their position with respect to smoking. On the whole the results are very stable.

	TOTAL EEC		
	Spring 1987	Spring 1988	Autumn 1988
Of 100 Europeans, men and women aged 15 years and over:			
Smoke cigarettes	35%	34%	33%
Smoke cigars or a pipe	3	2	3
Have stopped smoking	19	17	21
Have never smoked	43	46	43
No reply	1	1	1

Three quarters of the respondents (75%) state that the rule not to smoke is of major importance. A little over six out of ten (63%) say they already apply it, that they have never smoked or that they have stopped smoking.<sup>1</sup>

The importance of this rule is generally more widely recognized by non-smokers, but the table below shows that over one smoker in ten (59%) also believes it is very important not to smoke to reduce the risk of cancer.

Do not smoke

	Believe it is "very important"
<u>TOTAL-SMOKERS</u>	59%
<u>NON-SMOKERS</u>	
Former smokers	83%
Have never smoked	85%

<sup>1</sup> Sometimes there are discrepancies between the responses concerning the application of the rule and concerning the situation with respect to smoking (total non-smokers compared to replies "already apply it") but they are minimal in every country.

There is, however, some discrepancy between the opinions and behaviour of Europeans since in every Community country the percentage considering this rule "very important" is considerably higher than the percentage of those who say they apply it. This confirms the finding highlighted in the Spring 1987 survey,<sup>1</sup> namely that the rule "do not smoke" was the most difficult to apply responsdentally.

The following table shows for each country the proportion of the public which believes the rule "do not smoke" to be very important and the proportion of those who say they apply it. It also contains a more precise analysis, which combines the two preceding replies by highlighting the agreement or disagreement regarding the importance attached to the rule and its application.

Thus, it would appear that some non-smokers do not attach great importance to the rule of abstinence in reducing the risk of cancer (column 5 below). They abstain for other reasons. On the other hand some smokers are convinced of the importance of abstaining (column 4 below); they are in a contradictory position. There are many, especially in Greece.

"DO NOT SMOKE"

	<i>Believe it is very important</i>	<i>Apply it already</i>	<i>Believe it is very important and apply it</i>	<i>Believe it is very important but do not apply it</i>	<i>Apply it but do not believe it is very important</i>
TOTAL	75%	63%	54%	21%	9%
BELGIUM	73	59	50	23	9
DENMARK	69	53	41	28	12
GERMANY	68	62	52	16	10
GREECE	81	59	50	31	9
SPAIN	77	59	50	27	9
FRANCE	77	67	57	20	10
IRELAND	81	61	56	25	5
ITALY	81	68	59	22	9
LUXEMBOURG	75	68	55	20	13
THE NETHERLANDS	65	52	42	23	10
PORTUGAL	83	73	63	20	10
UNITED KINGDOM	78	62	55	23	7

NB Total of column 3 + 4 = column 1/Total of columns 3 + 5 = column 2.

1 Op. cit. p. 25.

Given that the respective proportions of men and women who smoke vary considerably from one country to another, the replies of men and women were analyzed separately. The full table is given in the annex. Here we include some significant extracts.

In Greece, where six out of ten men smoke, and only a little over two women in ten, the proportion of men in a contradictory position is 44% against 18% of women, in other words 44% of Greek men say that the rule "do not smoke" is very important but continue to smoke. They can be said to be poisoning themselves in full knowledge of the facts. In Spain, the proportions are 33% of men and 22% of women.

In Germany on the other hand, the proportion of smokers in a contradictory position is very low and almost the same for both sexes: the reason for this is that in Germany much less importance is attached to the rule "do not smoke". See detailed table in Annex A9

The following table shows for the whole of the Community, how opinions and behaviour, are affected by the sex, age and educational level of the respondents. Those who most frequently disregard the rule of abstinence despite being aware of its importance, are, apart from men, the younger and better educated members of society.

"DO NOT SMOKE"

	<i>Believe it is very important</i>	<i>Apply it already</i>	<i>Believe it is very important and apply it</i>	<i>Believe it is very important but do not apply it</i>	<i>Apply it but do not believe it is very important</i>
TOTAL	75%	63%	54%	21%	9%
SEX					
Men	74	56	48	26	8
Women	77	69	59	18	10
AGE					
15-24 years	71	58	47	24	11
25-29 years	74	56	47	27	9
40-54 years	75	62	53	22	9
55 years and over	80	72	64	8	8
EDUCATIONAL LEVEL					
Low	76	66	58	18	8
Average	74	61	61	23	10

It should further be stressed that as noted in previous surveys, smokers are today in a minority in every Community country. It is likely that their number will tend to fall in the future, given that among present smokers, over one-quarter (26%) say they want to stop smoking, the proportion ranging from 9% in Germany to 47% in Italy. The altogether extraordinary position of Germany on this point was noted previously in the Spring 1988 survey.

In nearly every country, the wish to stop smoking is higher among women smokers than among men smokers. (See table below showing the proportion of smokers of each sex by country).

SMOKERS WISHING TO STOP SMOKING

	Smokers (of 100 persons interviewed)			Smokers wishing to stop smoking (of 100 smokers)		
	Total	Men	Women	Total	Men	Women
TOTAL	35%	43%	29%	26%	25%	29%
BELGIUM	39	49	30	23	21	25
DENMARK	45	44	46	22	21	23
GERMANY	32	38	27	9	6	12
GREECE	43	62	24	40	36	49
SPAIN	40	51	32	26	21	32
FRANCE	35	44	27	25	23	27
IRELAND	37	37	37	38	38	38
ITALY	33	38	27	47	46	48
LUXEMBOURG	33	36	29	30	25	39
THE NETHERLANDS	45	51	38	20	21	20
PORTUGAL	27	43	13	19	19	18
UNITED KINGDOM	35	40	31	28	28	29

(b) Moderate your consumption of alcoholic drinks

This rule comes in second place as regards its importance in the eyes of the public: 57% of Europeans consider it is essential to follow this rule to reduce the risk of cancer. There are also very marked differences between countries (see table below). On the whole North Europeans are less aware of this rule: 30% believe it is "very important" in Denmark, 38% in the United Kingdom, 48% in Germany, 49% in Ireland and 50% in the Netherlands, whereas the proportion is 60% in Belgium, Italy and Luxembourg, 70% in Greece and Spain, 71% in France and 77% in Portugal.

"MODERATE YOUR CONSUMPTION OF ALCOHOLIC DRINKS"

	<i>Believe it is very important</i>	<i>Apply it</i>	<i>Believe it is very important and apply it</i>	<i>Believe it is very important but do not apply it</i>	<i>Apply it but do not believe it is very important</i>
TOTAL	57%	77%	49%	8%	28%
BELGIUM	59	71	48	11	23
DENMARK	30	70	25	5	45
GERMANY	48	60	37	11	23
GREECE	70	77	60	10	17
SPAIN	70	79	59	11	20
FRANCE	71	87	65	6	22
IRELAND	49	70	38	11	32
ITALY	63	89	58	5	31
LUXEMBOURG	62	87	57	5	30
THE NETHERLANDS	50	78	43	7	35
PORTUGAL	77	85	68	9	17
UNITED KINGDOM	38	73	32	6	41

What is the position with regard to application?

Although in the case of smoking the percentage of Europeans believing that the rule to abstain is very important is everywhere higher than the number of those who actually apply it, we note the opposite is true in the case of the rule concerning alcoholic drinks. Many people believe that they effectively moderate their consumption (compared with others, or by abstaining from certain drinks, or even by abstaining from all drinks) but they do not consider this behaviour of great importance in reducing the risk of cancer.

Nevertheless over three-quarters of Europeans (77%) state that they "moderate" their consumption of alcoholic drinks: nine in ten Italians, nearly as many French, Luxembourgers and Portuguese.

Those who believe it is very important to moderate their consumption of alcoholic drinks to reduce the risk of cancer and who claim to apply this rule are in a large majority in Portugal (68%), in France (65%), in Greece (60%), in Spain (59%), in Italy (58%), in Luxembourg (57%) with only (32%) in the United Kingdom and (25%) in Germany.

The importance of the rule concerning the consumption of alcohol is more generally recognized by women, older respondents and the less well educated.<sup>1</sup> On the other hand, application of the rule varies little in the light of these criteria, except for the criterion of sex: women more often claim to moderate their consumption of alcohol than men. (See below).

"MODERATE YOUR CONSUMPTION OF ALCOHOLIC DRINKS"

	<i>Believe it is very important</i>	<i>Apply it already</i>	<i>Believe it is very important and apply it</i>	<i>Believe it is very important but do not apply it</i>	<i>Apply it but do not believe it is very important</i>
TOTAL	57%	77%	49%	8%	28%
SEX					
Men	51	69	41	10	28
Women	62	84	56	6	28
AGE					
15-24 years	53	76	44	9	32
25-29 years	56	75	46	10	29
40-54 years	58	76	49	9	27
55 years and over	60	80	54	6	26
EDUCATIONAL LEVEL					
Low	64	80	57	7	23
Average	53	74	44	9	30
High	49	75	42	7	33

1 Note that the level of education is closely correlated with the sex and above all the age of the respondent, which partly accounts for what has just been said.

It should be stressed that contrary to what was said earlier about smoking, only a small proportion of the public (8% on average) find themselves in a contradictory position, namely, while they believe that moderation in the consumption of alcoholic drinks is a very important element in reducing the risk of cancer they admit that they do not apply the rule.

A separate analysis was made for the men and women in each country. It shows that the highest proportion of people in a contradictory position are the men in Greece (18%), Spain and Portugal (16%). See complete table in Annex A10.



(c) Avoid excessive exposure to the sun

This rule is aimed at everyone - men and women - and its importance as regards cancer prevention is the least widely understood: only 44% of Europeans consider it "very important".

On the other hand it is applied by almost two thirds of Europeans. As in the case of alcohol, here again there is a difference between the respondents' behaviour which entails protecting themselves from excessive exposure to the sun and their opinion with respect to cancer prevention. This again is mainly an information problem (see table below).

AVOID EXCESSIVE EXPOSURE TO THE SUN

	Consider it very important	Apply it	Consider it very important and apply it	Consider it very important but do not apply it	Apply it but do not consider it very important
TOTAL	44%	64%	35%	9%	29%
BELGIUM	47	60	37	10	23
DENMARK	39	65	30	9	25
GERMANY	40	47	27	13	20
GREECE	60	66	46	14	20
SPAIN	47	67	36	11	31
FRANCE	49	76	43	6	33
IRELAND	58	69	46	12	23
ITALY	33	66	27	6	39
LUXEMBOURG	41	66	36	5	30
THE NETHERLANDS	37	53	28	9	23
PORTUGAL	71	83	63	8	20
UNITED KINGDOM	45	66	36	9	30

With regard to these two points there are very great differences between countries but they do not necessarily reflect a difference between the North and South of the Community, in other words the sunshine rate of the countries. The Portuguese and Greeks are largely aware of the importance of this advice, whereas the Dutch, the Danes and the Germans are not convinced of it. The Italians, however, seem to be the least aware of this rule (33%).

Portugal would seem to be the country where the highest proportion of the population avoids excessive exposure to the sun, while in Denmark, Greece, Spain, Ireland, Luxembourg and the United Kingdom about the same proportion

applies this rule (some two thirds of the population).

Here again the Germans stand out from the other Europeans: only 47% apply this rule, and only 53% in the Netherlands.

Although a general rule cannot be applied to the Community as a whole, it should be pointed out that the three countries in Northern Europe with the lowest figures as regards the respondents who consider the rule important, namely the Netherlands, Germany and Denmark, are the most affected by skin cancer. The Germans and the Dutch apply this rule the least.

As before, opinions and behaviour with regard to exposure to the sun vary according to sex, age and educational level.

Women with a low level of education, particularly older people compared with younger Europeans more often take this rule to heart and recognize its importance in cancer prevention (see below). The analysis by sex and by country is set out in Annex A11).

AVOID EXCESSIVE EXPOSURE TO THE SUN

	CONSIDER IT VERY IMPORTANT	APPLY IT	CONSIDER IT VERY IMPORTANT AND APPLY IT	CONSIDER IT VERY IMPORTANT BUT DO NOT APPLY IT	APPLY IT BUT DO NOT CONSIDER IT VERY IMPORTANT
TOTAL	44 %	54 %	35 %	9 %	29 %
SEX					
MEN	38	59	29	9	30
WOMEN	49	68	39	10	29
AGE					
15 - 24 years	36	54	26	10	28
25 - 39 years	41	51	31	10	30
40 - 54 years	47	64	35	11	28
55 years and over	48	71	42	6	29
EDUCATIONAL LEVEL					
Low	47	59	39	9	30
Average	41	51	31	10	30
High	36	54	26	10	28

d) Eat fresh fruit and vegetables frequently

This rule is considered "very important" by 56% of Europeans: it ranks third, almost on a par with a moderate consumption of alcohol.

Once again, application of the rule is more widespread than is the public's awareness of applying a very important cancer prevention rule. Nearly one in three Europeans (28%) state they frequently eat fresh fruit and vegetables without thinking that this is an essential cancer prevention rule.

EAT FRESH FRUIT AND VEGETABLES FREQUENTLY

	Consider it very important	Apply it	Consider it very important and apply it	Consider it very important but do not apply it	Apply it but do not consider it very important
TOTAL	56 %	26 %	46 %	8 %	28 %
BELGIUM	63	71	52	11	19
DENMARK	59	74	49	10	25
GERMANY	57	63	45	12	18
GREECE	69	30	59	10	21
SPAIN	61	32	53	8	29
FRANCE	52	32	47	5	35
IRELAND	59	77	51	8	25
ITALY	52	78	46	6	32
LUXEMBOURG	61	33	55	6	28
THE NETHERLANDS	61	30	54	7	26
PORTUGAL	73	33	63	10	20
UNITED KINGDOM	52	30	46	6	34

There is little difference in national opinions as regards the importance of the consumption of fresh products and the consumption of alcohol or exposure to the sun. Of all Europeans, the French, Italians and British are those who give it the least importance (52% of "very important" replies in the three countries).

Application of this rule would seem to be widespread and in a fairly uniform manner throughout the Community, excluding Germany, where only 63% state they frequently eat fresh products, compared with a European average of 76%. It should be noted that three in 10 Germans state they intend to apply this rule.<sup>1</sup>

In the Spring 1988 survey it was noted that the stated consumption of fresh fruit and vegetables in Germany was much lower than in the other European countries. This would still seem to be the case.

Once again, recognition of its importance and its application is much higher among women, elderly respondents and the less well educated.

EAT FRESH FRUIT AND VEGETABLES FREQUENTLY\*

	<i>Believe it is very important</i>	<i>Apply it already</i>	<i>Believe it is very important and apply it</i>	<i>Believe it is very important but do not apply it</i>	<i>Apply it but do not believe it is very important</i>
TOTAL	56%	76%	48%	8%	28%
SEX					
Men	51	72	43	8	29
Women	60	81	53	7	28
AGE					
15-24 years	48	71	40	8	31
25-29 years	54	74	46	8	28
40-54 years	59	77	51	8	26
55 years and over	61	82	54	7	28
EDUCATIONAL LEVEL					
Low	61	80	54	7	26
Average	53	74	45	8	29
High	51	76	43	8	33

\* See results by country in Annex 12.

<sup>1</sup> See results in Annex A6.

(e) Avoid being overweight

This rule by the cancer experts is regarded as "very important" by an average of a little under one in two Europeans (47%), but the difference is quite marked between countries: over seven in ten in Portugal (67%) and in Greece (66%) compared with a little under four in ten in France (39%).

Two thirds of Europeans, however, say they avoid becoming overweight. Here again application of the rule is more widespread than is the understanding of its importance. Better public information would lead to a better understanding of the link between avoiding being overweight and cancer prevention.

Weight watching would seem to be quite general behaviour, with a maximum of 77% in Greece and a minimum of 54% in Germany.

AVOID BEING OVERWEIGHT

	Consider it very important	Apply it	Consider it very important and apply it	Consider it very important but do not apply it	Apply it but do not consider it very important
TOTAL	47%	67%	36%	11%	31%
BELGIUM	51	60	39	12	21
DENMARK	45	66	35	10	31
GERMANY	45	54	32	13	22
GREECE	66	77	54	12	23
SPAIN	55	67	40	15	27
FRANCE	39	74	34	5	40
IRELAND	51	71	40	11	31
ITALY	43	71	33	10	38
LUXEMBOURG	45	73	40	5	33
THE NETHERLANDS	54	69	43	11	26
PORTUGAL	67	72	53	14	19
UNITED KINGDOM	45	70	35	10	35

The discrepancy between application and recognition of the importance of the rule varies markedly by country: the number of respondents who watch their weight but are not convinced that it is an important factor in cancer prevention ranges from 40% in France to 19% in Portugal. See analysis by sex in Annex A13.

The importance of this rule is more frequently recognized by women, the elderly and the less well educated, but the same is not true of its application. Although there is a small difference by sex, the rate of application is almost constant regardless of the age and educational level of the respondent. It is even slightly higher among the better educated.

AVOID BEING OVERWEIGHT

	<i>Believe it is very important</i>	<i>Apply it already</i>	<i>Believe it is very important and apply it</i>	<i>Believe it is very important but do not apply it</i>	<i>Apply it but do not believe it is very important</i>
TOTAL	47%	57%	36%	11%	31%
SEX					
Men	44	65	34	10	31
Women	50	69	38	12	31
AGE					
15-24 years	41	69	33	8	36
25-29 years	45	66	33	12	33
40-54 years	47	65	36	11	29
55 years and over	52	68	41	11	27
EDUCATIONAL LEVEL					
Low	52	66	40	12	26
Average	43	67	33	10	34
High	42	69	33	9	36

(f) Overall analysis

Having presented the results in terms of the importance and application of each rule surveyed, the question is what answers did Europeans give to these two questions taken together: how many of the rules do they regard as "very important" in reducing cancer risks? How many do they apply? In other words, to what extent are they informed and aware of cancer prevention measures as a whole.

	Number of rules considered "very important"	Number of rules applied
	%	%
None	12	6
1	14	6
2	19	12
3	17	18
4	14	27
5	<u>24</u>	<u>31</u>
Total	100	100
Average	2.79	3.47

The above table shows the very wide dispersion of results with respect to opinions on the importance of preventive measures: one in ten Europeans believes that none of these rules is essential, but almost one in four considers all five are of major importance.

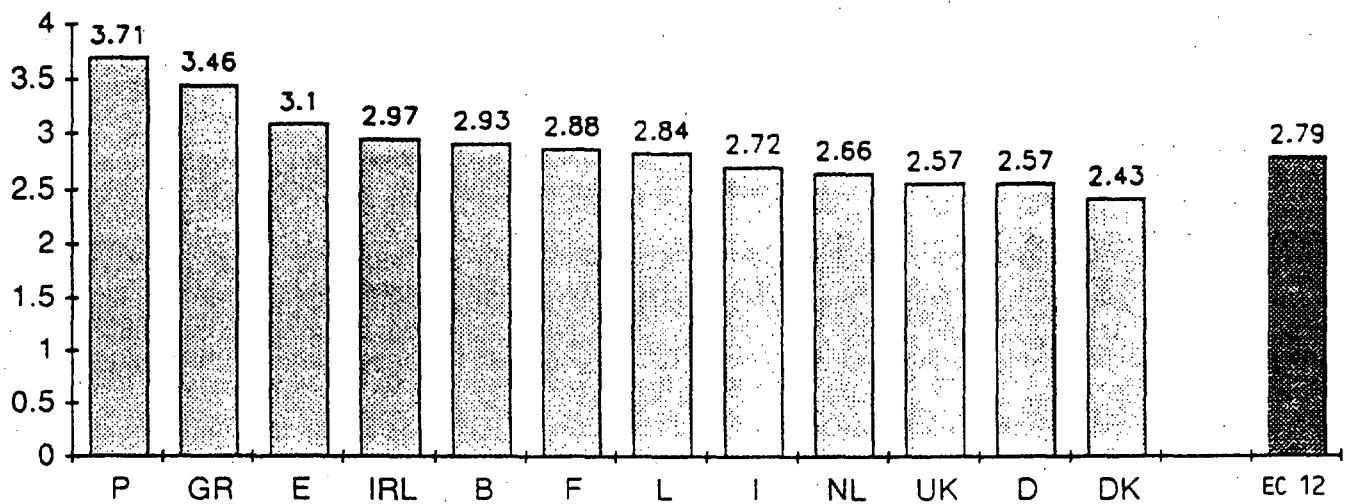
More than one in two Europeans (58%) claims to apply at least four of the five rules. Overall, practice would seem to be more widespread than the importance attributed to these cancer prevention rules. This is not surprising, since this had already been noted in all cases, except the rule on smoking.

#### Analysis by country

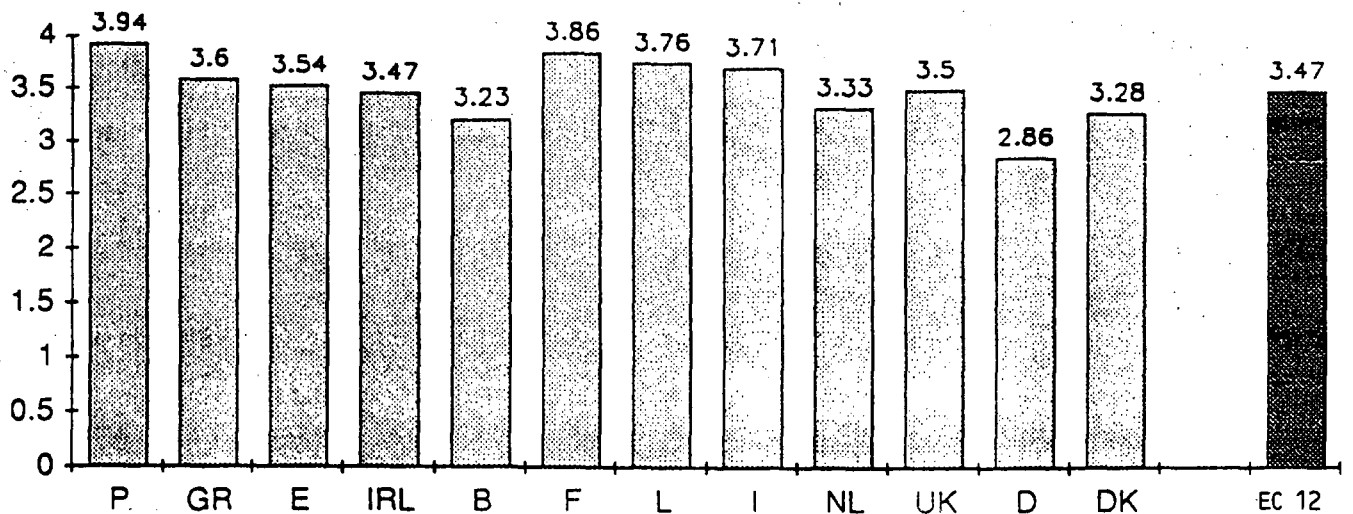
The tables on page 44 set out all the results, by country. The graph on the following page gives a summary view of the countries' relative positions. It is based on the averages for the rules in question.

DEGREE OF IMPORTANCE AND APPLICATION  
OF THE FIVE GENERAL RULES, BY COUNTRY

Average number of rules considered "very important"



Average number of rules applied





Number of rules considered "very important"

	None	1	2	3	4	5	TOTAL	Average
TOTAL	12	14	19	17	14	24	100	2.79
BELGIUM	11	13	17	16	15	28	100	2.93
DENMARK	14	19	21	18	13	15	100	2.43
GERMANY	15	18	19	13	12	23	100	2.57
GREECE	11	7	11	13	12	46	100	3.46
SPAIN	13	9	17	11	15	35	100	3.10
FRANCE	12	11	17	22	14	24	100	2.88
IRELAND	10	12	17	19	14	28	100	2.97
ITALY	9	14	22	22	15	18	100	2.72
LUXEMBOURG	12	12	19	17	16	24	100	2.84
NETHERLANDS	15	13	17	18	19	18	100	2.66
PORTUGAL	14	5	6	7	6	62	100	3.71
UNITED KINGDOM	11	19	21	18	14	17	100	2.57

Number of rules applied

	None	1	2	3	4	5	TOTAL	Average
TOTAL	6	6	12	18	27	31	100	3.47
BELGIUM	8	8	14	21	24	25	100	3.23
DENMARK	8	7	12	18	31	24	100	3.28
GERMANY	12	11	17	21	19	20	100	2.86
GREECE	5	5	11	18	25	36	100	3.60
SPAIN	5	6	10	18	31	30	100	3.54
FRANCE	3	4	8	16	27	42	100	3.86
IRELAND	8	5	11	16	27	33	100	3.47
ITALY	3	4	8	20	33	32	100	3.71
LUXEMBOURG	3	3	10	18	31	35	100	3.76
NETHERLANDS	4	8	14	24	28	22	100	3.33
PORTUGAL	4	3	7	15	25	46	100	3.94
UNITED KINGDOM	7	6	13	13	28	33	100	3.50

These results clearly show that the public in Portugal is the most keenly aware of the problem of cancer prevention: more than six in ten respondents (62%) consider that the five general rules in the Code are essential and nearly one in two (46%) states that they take account of these rules in their lifestyle.

After Portugal, Greece is the country where the overall importance of the rules is the most often recognized, whereas they seem to be more widely applied in France, Luxembourg and Italy. At the bottom of the scale Germany stands out sharply from the other countries.

#### Analysis by sex, age and educational level

The effect of these criteria has been pointed out with respect to each rule. It is the same in every case: women and the less educated are the most aware of the importance and most often state that they apply all five cancer prevention measures. Secondly, the number who believe in the importance of and apply the rules increases sharply with age. It may be recalled that these groups of respondents, particularly women and the elderly, are also those who are the most interested in health information.<sup>1</sup> (See table on page 46.)

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<sup>1</sup> See the report on the first survey in spring 1987 "Europeans and the prevention of cancer" - Commission of the European Communities, June 1988.

NUMBER OF RULES CONSIDERED "VERY IMPORTANT"

	None	1	2	3	4	5	TOTAL	Average
OVERALL .....	12	14	19	17	14	24	100	2.79
S E X								
Men .....	14	16	20	17	13	20	100	2.57
Women .....	10	12	17	18	15	28	100	2.98
A G E								
15-24 years .....	16	17	20	17	11	19	100	2.49
25-39 years .....	14	13	20	17	14	22	100	2.69
40-54 years .....	11	16	17	17	13	26	100	2.86
55 years and over .....	10	13	17	17	15	28	100	3.00
EDUCATION LEVEL								
Low .....	12	11	17	16	14	40	100	3.01
Average .....	13	16	28	17	14	21	100	2.64
High .....	11	18	20	20	13	18	100	2.51

NUMBER OF RULES APPLIED

	None	1	2	3	4	5	TOTAL	Average
OVERALL .....	6	6	12	18	27	31	100	3.47
S E X								
Men .....	8	8	15	19	25	25	100	3.21
Women .....	4	5	9	17	29	36	100	3.71
A G E								
15-24 years .....	7	7	13	22	26	25	100	3.28
25-39 years .....	7	7	12	18	28	29	100	3.32
40-54 years .....	6	7	12	18	28	29	100	3.43
55 years and over .....	4	5	9	15	26	41	100	3.74
EDUCATION LEVEL								
Low .....	6	6	9	15	27	36	100	3.61
Average .....	7	7	13	19	26	28	100	3.34
High .....	5	5	14	20	30	26	100	3.42

Analysis according to respondental involvement with the risk of cancer

Persons who state they have already respondentally become aware of the risk of contracting cancer were also the most convinced of the importance of the preventive measures in the Code. They also seem to take more account of the rules in their behaviour.

It would seem that depending on their level of concern regarding the disease, Europeans are more or less receptive to any information concerning cancer prevention. It has already been noted in the first part that the Europeans most aware of the risk of the disease are also the most frequently aware of the Code and the Community campaign against cancer.

**Have thought they had cancer or might have it**

	Yes	No
<b>Number of rules considered "very important"</b>		
None	10	16
1	14	16
2	18	19
3	18	16
4	14	12
5	28	21
<b>TOTAL</b>	<b>100</b>	<b>100</b>
<b>Average</b>	<b>2.90</b>	<b>2.56</b>

**Number of rules applied**

None	5	7
1	6	7
2	11	13
3	19	17
4	29	24
5	30	32
<b>TOTAL</b>	<b>100</b>	<b>100</b>
<b>Average</b>	<b>3.52</b>	<b>3.40</b>

Analysis according to awareness of the campaign and the Code against cancer

The level of awareness of the campaign and the Code as defined in part 1 also has a direct impact on the importance attached to the cancer prevention rules. On the whole they are applied more frequently by respondents who are better informed.

**Awareness of the campaign and the Code**

Size of groups	++ (10%)	+ (23%)	- (21%)	— (46%)
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**Number of rules considered  
"very important"**

None	9	10	11	15
1	11	13	11	17
2	15	18	18	20
3	15	18	20	16
4	15	16	15	11
5	36	25	25	21
	—	—	—	—
TOTAL	100	100	100	100
Average	3.27	2.93	2.90	2.55

**Number of rules applied**

None	4	3	5	8
1	7	5	6	7
2	10	11	10	13
3	17	19	18	18
4	29	30	28	25
5	33	32	33	29
	—	—	—	—
TOTAL	100	100	100	100
Average	3.61	3.63	3.55	3.32

### 2.3 RULES FOR WOMEN

As in the case of the smear test and breast examination, we were interested in the number of women who considered these rules very important and the number who stated they carried out the tests regularly.<sup>1</sup>

#### (a) "Have a cervical smear regularly"

The importance of this rule is, on the whole, generally recognized by European women (71%) but it is regularly applied by no more than four out of ten women (38%).

#### "HAVE A CERVICAL SMEAR REGULARLY"

	Consider it very important	Apply it	Consider it very important and apply it	Consider it very important but do not apply it	Apply it but do not consider it very important
	%	%	%	%	%
TOTAL (women)	71	38	36	35	3
BELGIUM	64	34	31	33	1
DENMARK	73	38	35	38	-
GERMANY	55	40	36	19	4
GREECE	66	14	14	52	-
SPAIN	63	16	15	4	1
FRANCE	74	54	49	25	4
IRELAND	76	22	22	54	-
ITALY	78	29	27	49	2
LUXEMBOURG	77	57	54	23	3
NETHERLANDS	70	30	28	42	2
PORTUGAL	49	14	12	37	2
UNITED KINGDOM	90	56	55	35	1

<sup>1</sup> The questions did not reveal a precise frequency.

There are marked contrasts in the situation between countries.

In Luxembourg, France and the United Kingdom, smear tests are carried out regularly by a majority of women (53 to 57%). The importance of the screening test is widely recognized, especially in the United Kingdom (90%).

In Portugal the number of "very important" responses is the lowest (49%). It should be stressed that a fairly high proportion of women did not answer this question (23%).<sup>1</sup>

The situation is not surprising given that in the previous survey in spring 1988 only 40% of Portuguese women knew about this test. In this country 14% of women have it carried out regularly.

Regular testing is also rare in Italy (29%), in Ireland (22%), in Spain (16%) and in Greece (14%), but the importance of the test is more widely recognized there than in Portugal. In these countries there are great differences between the importance attached to the rule and its regular application.

It should be pointed out that in Germany women seldom consider this screening test essential, and generally regard it as only fairly important.<sup>1</sup> However, 40% have a smear test regularly.

The importance of the test is more widely recognized by women in the 25 to 54 age group, and above all the rate of regular application is higher among them. The rate of application is considerably lower where the level of education is low. Likewise, the percentage of "very important" responses increases with the educational level.

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<sup>1</sup> See results in Annex A8.

"HAVE A CERVICAL SMEAR REGULARLY"

	Consider it very important	Apply it	Consider it very important and apply it	Consider it very important but do not apply it	Apply it but do not consider it very important
	%	%	%	%	%
OVERALL (women)	71	38	36	35	3
AGE					
15-24 years	60	21	18	42	3
25-39 years	79	50	48	31	2
40-54 years	76	49	45	27	4
55 and over	66	30	29	37	1
EDUCATION LEVEL					
Low	67	29	27	40	2
Average	73	45	42	31	3
High	76	46	42	34	4



(b) "Check your breasts regularly"

The importance of this rule, like the previous one, is widely recognized, and to roughly the same extent in each country.

Moreover, regular application of the rule presents a structure of responses very close to that observed for the cervical smear.

In other words, here too there are wide differences between the importance attached to the rule and its regular application, and on the other hand between national results.

The rate of regular self-examination of the breasts is very low in the four Mediterranean countries and in Ireland (13 to 29%) whereas it is carried out by over half the women in France (55%) and in Luxembourg (59%).

It is surprising to note that the rate of regular breast examination is not higher than of the cervical smear, since the former is a self-examination whereas the second requires a visit to the doctor.

"CHECK YOUR BREASTS REGULARLY"

	Consider it very important	Apply it	Consider it very important and apply it	Consider it very important but do not apply it	Apply it but do not consider it very important
	%	%	%	%	%
OVERALL (women)	71	37	34	37	3
BELGIUM	68	35	33	35	2
DENMARK	72	33	29	43	4
GERMANY	60	40	35	25	5
GREECE	67	16	15	52	1
SPAIN	64	13	12	52	1
FRANCE	76	55	50	26	5
IRELAND	77	29	28	49	1
ITALY	80	29	27	53	2
LUXEMBOURG	80	59	58	22	1
NETHERLANDS	68	37	33	35	4
PORTUGAL	53	16	14	39	2
UNITED KINGDOM	83	48	47	36	1

As in the case of the cervical smear, the importance of checking the breasts is more often recognized by women in the 25 to 54 age group, and also by the better educated. The rate of application of the rule is also higher for these categories.

Differences in practice by age group correspond to the cancer experts' advice, since the monthly self-examination of the breasts is essentially recommended for women from the age of 30 years and up to the menopause.

"CHECK YOUR BREASTS REGULARLY"

	Consider it very important	Apply it	Consider it very important and apply it	Consider it very important but do not apply it	Apply it but do not consider it very important
	%	%	%	%	%
OVERALL (women)	71	37	34	37	3
<b>AGE</b>					
15-24 years	64	24	21	43	3
25-39 years	79	49	45	34	4
40-54 years	77	46	43	34	3
55 and over	66	28	26	40	2
<b>EDUCATIONAL LEVEL</b>					
Low	69	29	27	42	2
Average	72	43	39	33	?

c) Overall analysis

Opinions on the importance of one or other of these two screening tests go hand in hand in most cases. The same applies to regular application. This conclusion may be drawn from the table below: few women consider one of the two tests is very important but not the other, or claim to carry out only one of them.

	Number of rules considered very important %	Number of rules applied %
None	24	55
1	10	14
2	66	31
	<hr/>	<hr/>
TOTAL	100	100
Average	1.42	0.75

The phenomenon is repeated in every country although the relationship seems a little less clear in the Netherlands.

From this emerges a clear distinction between the category of women who are well aware of the importance of a particular test in limiting the risks of developing cancer of the breast or the uterus, and those who are unaware of this early screening process. Earlier studies showed that in many cases and especially in Portugal, women simply do not know about the necessary test. Considerable information efforts must therefore be undertaken among the female population, especially in the southern European countries. It is likely that such efforts will have a good chance of succeeding since generally speaking in these countries the population is very concerned about cancer prevention.

TWO SPECIFIC RULES FOR WOMEN

Number of rules considered "very important"

	None	1	2	Total	Average
Overall(women)	24	10	66	100	1.42
BELGIUM	30	8	62	100	1.32
DENMARK	23	9	68	100	1.46
GERMANY	36	12	52	100	1.15
GREECE	30	6	64	100	1.34
SPAIN	34	5	61	100	1.27
FRANCE	20	9	71	100	1.51
IRELAND	21	5	74	100	1.53
ITALY	17	8	75	100	1.57
LUXEMBOURG	17	9	74	100	1.56
NETHERLANDS	20	22	58	100	1.38
PORTUGAL	46	6	48	100	1.02
UNITED KINGDOM	9	10	81	100	1.72

NUMBER OF RULES APPLIED

	None	1	2	Total	Average
Overall(women)	55	14	31	100	0.75
BELGIUM	10	11	29	100	0.69
DENMARK	54	20	26	100	0.72
GERMANY	55	10	35	100	0.80
GREECE	79	11	10	100	0.31
SPAIN	82	7	11	100	0.29
FRANCE	39	13	48	100	1.09
IRELAND	67	16	17	100	0.50
ITALY	66	11	23	100	0.57
LUXEMBOURG	40	5	55	100	1.15
NETHERLANDS	52	29	19	100	0.67
PORTUGAL	81	8	11	100	0.30
UNITED KINGDOM	36	23	41	100	1.05

CHAPTER 3

COMMUNITY ACTION

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3.1 IS IT BETTER TO ACT AT COMMUNITY LEVEL OR AT THE LEVEL OF EACH COUNTRY?

In June 1985, the Heads of State or of Government of the European Community met in Milan and adopted the principle of a European campaign against cancer so that the Community should take better account of its citizens' concerns with regard to health. The two previous chapters review the impact of communication efforts made since then to inform citizens of the precautions to be taken to reduce the risk of cancer.

To what extent do Europeans support this Community action?

Question: Do you consider that the Community is right to concern itself with cancer prevention in the Member States, or do you believe it is rather more a question to be dealt with by each country?

The Community is right to take action	74 %
It is a matter for each Member State	18
Other reply	2
No reply	6
	—
TOTAL	100

Public opinion is massively in favour of Community action. The approval rate is 80% or more in seven countries and about 75% in the United Kingdom and Ireland. Three countries were well below that rate: Belgium (64%), Denmark (59%) and Germany (50%).

The replies are closely linked to the overall attitude regarding their country's membership of the Community. Nevertheless, support for Community action in regard to cancer predominates, even among persons who express a negative opinion regarding their country's membership of the Community.

In addition, persons aware of the risk of cancer, in other words those who have thought that they might have the disease, are slightly more in favour of Community action than the others.

Finally, the fact of having heard about the Community campaign against cancer is positively linked to support for Community action (see table below).

CANCER PREVENTION SHOULD BE DEALT WITH

	BY THE COMMUNITY	BY EACH COUNTRY	OTHER OR DON'T KNOW	TOTAL
OVERALL	74 %	18 %	8%	100 %
Those who believe that their country's membership of the Community:				
is a good thing	82 %	13 %	5%	100 %
is neither good nor bad	62	27	11	100
is bad	58	30	12	100
don't know	55	18	27	100
Among those who:				
have thought they might have cancer	77	17	6	100
have not thought so	69	21	10	100
no reply	51	17	32	100
Among those who:				
have heard about the campaign against cancer	80	15	5	100
have not heard about it	71	19	10	100
don't know	56	14	30	100
Among those who:				
have seen or heard about the Code against cancer	81	15	4	100
have not heard about it	73	19	8	100
don't know	45	20	35	100

### 3.2 OPINION ON THE VALUE OF THE CODE AS A MEANS OF INFLUENCING ATTITUDES

In a previous survey carried out in Spring 1987 many Europeans seemed to be unaware of the beneficial effect of the rules of the Code in reducing the risk of cancer, the only exception being "do not smoke".

In this survey, respondents were asked directly if the Code contributed to their knowledge.

Question: (After having been shown the Code)  
Has the Code taught you something or did you know it already?

Those who learned something	29%
Those who knew it already	62%
Other reply	3%
No reply	6%

TOTAL 100

The "knew it already" reply is very widespread in Europe, particularly in Luxembourg 81%, in the Netherlands 79%, the United Kingdom 75%, in Denmark and France 74%, in Ireland 66% and in Germany 61%.

But there are exceptions to this: in Greece and especially in Portugal the feeling that the Code teaches something new prevails (Portugal 67%, Greece 52%); in Spain, Italy and Belgium large minorities respond in the same way (see table on page 63).

We will now see to what extent these opinions are associated with the application of the preventive measures in the Code. The analysis is based on the number of rules applied by respondents (overall results set out on page 44 above) of the five listed in the Code.

#### CONTENT OF THE CODE AGAINST CANCER

Sample size	Learnt something new	Knew it before	Other No reply	Total
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OVERALL (Men and Women)

Those who say they apply:

not one or only one rule	12	31	52	17	100
two or three	30	30	60	10	100
four or five	58	28	65	7	100



Among the women, for whom the Code includes two extra rules, the effect of the variable is a little more marked, excluding the first group, that is women who apply the rules the least: this group, it is true, is very small (6% of European women).

CONTENT OF THE CODE AGAINST CANCER

	Sample size %	Learnt something new	Knew it before	Other No reply	Total
(Women only)					
Those who say they apply:					
not one or one rule	6	25	54	12	100
two or three	19	33	56	11	100
four or five	49	30	61	9	100
six or seven	26	20	75	5	100

The social/demographic characteristics of the respondents do not have much effect on the reply. Women more often than men say they are familiar with the content of the Code. Slightly more young people say they learn something from the Code; the highest rate is among persons with a low educational level.

CONTENT OF THE CODE AGAINST CANCER

	Learnt something new	Knew it before	Other No Reply	Total
OVERALL	29	62	9	100
SEX				
Men	30	60	10	100
Women	29	64	8	100
AGE				
15-24 years	33	58	9	100
25-39 years	27	65	8	100
40-54 years	28	62	10	100
55 years and over	28	63	9	100
EDUCATIONAL LEVEL				
Low	35	55	10	100
Average	26	65	9	100
High	21	71	8	100

3.3 EXPECTED EFFECTIVENESS OF THE DISSEMINATION OF THE CODE AGAINST CANCER

To what extent do Europeans think that the dissemination of the Code will be effective in preventing the disease?

Very few believe it will have no effect. Most of the replies are divided between those who expect it to be very effective (one in four) and those who expect it to be moderately effective (one in two).

Question: Do you think that dissemination of the Code to the general public will be very effective, moderately effective, or not be at all effective in helping people to avoid cancer?

	%
Very effective	28)
Moderately effective	51)79
Ineffective	16
No Reply	5
	<hr style="width: 10%; margin: 0 auto;"/> 100

Countries in which it is believed that dissemination of the Code will be very effective are also those in which a high proportion of the public say that the Code has taught them something, namely Greece, Spain, Portugal, Italy and Belgium. On the other hand, there are countries where a large minority (about one quarter) do not believe the dissemination will be effective. They are the United Kingdom, Denmark, Germany and Luxembourg (see table on page 63).

In addition, there is a correlation between belief in the effectiveness of the dissemination of the Code and the extent to which its rules are applied.

	Sample size	Very effect- ive	Moderately effective	Ineffect- ive	No reply	Total
	%					
Number of those who say they apply:						
not one or one rule	12	19	48	23	9	100
two or three rules	30	25	51	18	6	100
four or five rules	58	32	51	13	4	100

Since some 58% of the public apply most of the five main rules in the Code (at least four rules applied) and one third believes the dissemination is very effective, it is safe to say that there is a sufficiently convinced core of people who will promote the success of the dissemination. However, as we have seen, attitudes vary considerably from one country to another. (See reminder of results by country presented in the table on the following page). Three countries stand out from the others on account of the high proportion of people who believe the Code teaches them something and believe its dissemination is very effective: Greece, Portugal and Spain. They are followed by Italy and Belgium. On the other hand, opinion in the United Kingdom, Denmark and Luxembourg is not very positive at the present time.

SUMMARY OF ATTITUDES TO THE PROGRAMME IN THE COMMUNITY  
BY COUNTRY

	The Community's right to deal with cancer prevention	Something can be learned from the Code against cancer	Its dissemination will be very effective
Belgium	64%	34%	38%
Denmark	59	17	16
Germany	50	26	20
Greece	82	52	66
Spain	84	41	51
France	82	24	18
Ireland	74	28	29
Italy	87	37	39
Luxembourg	82	17	17
The Netherlands	82	14	30
Portugal	84	67	37
United Kingdom	74	15	14
EC 12	74	29	28

INFLUENCE OF THE LEVEL OF AWARENESS ABOUT THE PROGRAMME  
AND THE CODE DEPENDING ON ATTITUDES TO ITS DISSEMINATION

	Persons whose level of awareness is*				Total
	High ++	+	Nil -		
Size of samples	10%	23%	21%	46%	100%
The Code teaches something	37	27	30	27	29
Knew it already	58	70	58	60	62
Other or No reply	5	3	12	13	9
	<u>100</u>	<u>100</u>	<u>100</u>	<u>100</u>	<u>100</u>
Dissemination of the Code will be:					
very effective	47	33	28	22	28
moderately effective	45	53	54	50	51
ineffective	7	13	13	21	16
No reply	1	1	5	7	5
	<u>100</u>	<u>100</u>	<u>100</u>	<u>100</u>	<u>100</u>

\* The Code teaches:

See definition of levels of awareness on page 18.

ANNEXES

- A. Results of main questions, by country
- B. Definition of criteria used in the analysis
- C. Institutes and characteristics of the survey
- D. Questionnaire

PERSONAL INVOLVEMENT WITH RESPECT TO CANCER

Question: Have you thought that you might have cancer or be likely to have it one day?

	YES	NO	No Reply	TOTAL
OVERALL EC .....	68 %	29 %	3 %	100
<b>COUNTRIES</b>				
BELGIUM .....	71	26	3	100
DENMARK .....	73	20	2	100
GERMANY .....	66	29	5	100
GREECE .....	53	44	3	100
SPAIN .....	71	28	1	100
FRANCE .....	74	25	1	100
IRELAND .....	71	26	3	100
ITALY .....	71	24	5	100
LUXEMBOURG .....	69	30	1	100
THE NETHERLANDS .....	65	31	4	100
PORTUGAL .....	78	20	2	100
UNITED KINGDOM .....	58	38	4	100
<b>S E X</b>				
MEN .....	64	33	3	100
WOMEN .....	71	26	3	100
<b>A G E</b>				
15-24 years .....	59	38	3	100
25-39 years .....	72	25	3	100
40-54 years .....	73	24	3	100
55 years and over .....	65	31	4	100
<b>EDUCATIONAL LEVEL</b>				
Low .....	65	31	4	100
Average .....	67	30	3	100
High .....	74	24	2	100
<b>HOUSEHOLD INCOME</b>				
Low .....	61	34	5	100
.....	68	29	3	100
.....	72	26	2	100
High .....	73	25	2	100

IMPORTANCE OF RECOMMENDATIONS IN  
REDUCING THE RISK OF CANCER BY COUNTRY

"DO NOT SMOKE"

	Very Important	Fairly Important	Not Important	No Reply	TOTAL
OVERALL EC ....	75 %	19 %	5 %	1 %	100 %
BELGIUM .....	73	21	5	1	100
DENMARK .....	69	25	4	2	100
GERMANY .....	58	23	7	2	100
GREECE .....	80	16	3	1	100
SPAIN .....	77	19	3	1	100
FRANCE .....	77	18	5	-	100
IRELAND .....	81	13	5	1	100
ITALIA .....	81	16	3	-	100
LUXEMBOURG .....	75	16	8	1	100
THE NETHERLANDS .....	65	23	6	6	100
PORTUGAL .....	83	15	1	1	100
UNITED KINGDOM .....	78	17	4	1	100

"MODERATE YOUR CONSUMPTION OF ALCOHOLIC DRINKS"

	Very Important	Fairly Important	Not Important	No Reply	TOTAL
OVERALL EC ...	57 %	33 %	8 %	2 %	100 %
BELGIUM .....	59	31	8	2	100
DENMARK .....	30	49	16	5	100
GERMANY .....	48	38	12	2	100
GREECE .....	70	23	5	2	100
SPAIN .....	70	24	4	2	100
FRANCE .....	71	24	5	-	100
IRELAND .....	49	36	13	2	100
ITALY .....	63	31	4	2	100
LUXEMBOURG .....	62	28	9	1	100
NETHERLANDS .....	50	37	8	5	100
PORTUGAL .....	77	19	2	2	100
UNITED KINGDOM .....	38	43	16	3	100

IMPORTANCE OF RECOMMENDATIONS IN  
REDUCING THE RISK OF CANCER BY COUNTRY

"AVOID EXCESSIVE EXPOSURE TO THE SUN"

	Very Important	Fairly Important	Not Important	No Reply	TOTAL
OVERALL EC ..	44 %	39 %	13 %	4 %	100 %
BELGIUM .....	47	35	15	3	100
DENMARK .....	39	50	7	4	100
GERMANY .....	40	45	13	2	100
GREECE .....	60	27	9	4	100
SPAIN .....	47	33	13	7	100
FRANCE .....	49	36	13	2	100
IRELAND .....	58	28	11	3	100
ITALY .....	33	43	15	9	100
LUXEMBOURG .....	41	43	16	-	100
NETHERLANDS .....	37	41	17	5	100
PORTUGAL .....	71	22	3	4	100
UNITED KINGDOM	45	40	13	2	100

"EAT FREQUENTLY FRESH FRUITS AND VEGETABLES"

	Very Important	Fairly Important	Not Important	No Reply	TOTAL
OVERALL EC	56 %	31 %	10 %	3 %	100 %
BELGIUM .....	63	26	9	2	100
DENMARK .....	59	31	7	3	100
GERMANY .....	56	34	9	1	100
GREECE .....	69	22	6	3	100
SPAIN .....	61	25	10	4	100
FRANCE .....	52	31	14	3	100
IRELAND .....	59	28	11	2	100
ITALY .....	52	31	11	6	100
LUXEMBOURG .....	60	28	11	1	100
NETHERLANDS .....	61	27	8	4	100
PORTUGAL	73	21	2	4	100
UNITED KINGDOM	52	34	11	3	100



IMPORTANCE OF RECOMMENDATIONS IN  
REDUCING THE RISK OF CANCER BY COUNTRY

"AVOID BECOMING OVERWEIGHT"

		Very Important	Fairly Important	Not Important	No Reply	TOTAL
OVERALL	EC	47 %	35 %	14 %	4 %	100 %
BELGIUM	.....	51	35	11	3	100
DENMARK	.....	45	35	13	7	100
GERMANY	.....	45	40	13	2	100
GREECE	.....	66	23	7	4	100
SPAIN	.....	55	28	11	6	100
FRANCE	.....	39	36	21	4	100
IRELAND	.....	51	32	14	3	100
ITALY	.....	43	37	13	7	100
LUXEMBOURG	.....	45	37	17	1	100
NETHERLANDS	.....	54	29	12	5	100
PORTUGAL	.....	67	25	3	5	100
UNITED KINGDOM		45	36	16	3	100

IMPLEMENTATION OF THE RECOMMENDATIONS  
OF THE EUROPEAN CODE, BY COUNTRY

"DO NOT SMOKE"

		Applied	Intends to apply it	Does not intend to apply it	No Reply	TOTAL
OVERALL	EC ..	63 %	17 %	19 %	1 %	100 %
BELGIUM	.....	59	18	21	2	100
DENMARK	.....	53	12	30	5	100
GERMANY	....	62	14	23	1	100
GREECE	.....	59	23	17	1	100
SPAIN	.....	59	20	21	-	100
FRANCE	.....	67	17	15	1	100
IRELAND	.....	61	19	17	3	100
ITALY	.....	68	19	12	1	100
LUXEMBOURG	....	68	18	14	-	100
NETHERLANDS	....	52	17	27	4	100
PORTUGAL	.....	73	15	11	1	100
UNITED KINGDOM		62	14	22	2	100

"MODERATE YOUR CONSUMPTION OF ALCOHOLIC DRINKS"

		Applied	Intends to apply it	Does not intend to apply it	No Reply	TOTAL
OVERALL	EC ...	77 %	13 %	9 %	1 %	100 %
BELGIUM	.....	71	13	13	3	100
DENMARK	.....	70	17	10	3	100
GERMANY	.....	60	27	12	1	100
GREECE	.....	77	13	8	2	100
SPAIN	.....	79	10	9	2	100
FRANCE	.....	87	6	6	1	100
IRELAND	.....	70	15	11	4	100
ITALY	.....	89	7	3	1	100
LUXEMBOURG	....	87	8	5	-	100
NETHERLANDS	....	78	9	9	4	100
PORTUGAL	.....	85	7	7	1	100
UNITED KINGDOM		73	11	15	1	100

IMPLEMENTATION OF THE RECOMMENDATIONS  
OF THE EUROPEAN CODE, BY COUNTRY

"AVOID EXCESSIVE EXPOSURE TO THE SUN"

		Applied	Intends to apply it	Do not intend to apply it	No Reply	TOTAL
OVERALL	EC ...	64 %	14 %	19 %	3 %	100 %
BELGIUM	.....	60	13	22	5	100
DENMARK	.....	65	17	13	5	100
GERMANY	.....	47	31	21	1	100
GREECE	.....	66	15	17	2	100
SPAIN	.....	67	10	19	4	100
FRANCE	.....	76	6	17	1	100
IRELAND	.....	69	13	13	5	100
ITALY	.....	66	13	17	4	100
LUXEMBOURG	.....	66	14	19	1	100
NETHERLANDS	.....	53	9	31	7	100
PORTUGAL	.....	83	7	7	3	100
UNITED KINGDOM		66	10	22	2	100

"EAT FRESH FRUITS AND VEGETABLES FREQUENTLY"

		Applied	Intends to apply it	Do not intend to apply it	No Reply	TOTAL
OVERALL	EC....	76 %	15 %	7 %	2 %	100 %
BELGIUM	.....	71	18	8	3	100
DENMARK	.....	74	19	4	3	100
GERMANY	.....	63	30	6	1	100
GREECE	.....	80	15	4	1	100
SPAIN	.....	82	10	7	1	100
FRANCE	.....	82	9	8	1	100
IRELAND	.....	77	16	6	1	100
ITALY	.....	78	14	6	2	100
LUXEMBOURG	.....	83	12	4	1	100
NETHERLANDS	.....	80	9	8	3	100
PORTUGAL	.....	83	10	3	4	100
UNITED KINGDOM		80	10	8	2	100

IMPLEMENTATION OF THE RECOMMENDATIONS  
OF THE EUROPEAN CODE, BY COUNTRY

"AVOID BECOMING OVERWEIGHT"

	Applied :	Intends to apply it	Do not intend to apply it	No Reply	TOTAL
OVERALL EC ...	67 %	21 %	9 %	3 %	100 %
BELGIUM .....	50	21	13	6	100
DENMARK .....	66	26	4	4	100
GERMANY .....	54	37	8	1	100
GREECE .....	77	15	6	2	100
SPAIN .....	67	19	12	2	100
FRANCE .....	74	13	11	2	100
IRELAND .....	71	21	5	3	100
ITALY .....	71	19	7	3	100
LUXEMBOURG .....	73	17	10	-	100
NETHERLANDS.....	69	15	11	5	100
PORTUGAL .....	72	12	12	4	100
UNITED KINGDOM	70	19	9	2	100

IMPORTANCE OF SPECIFIC RECOMMENDATIONS FOR  
WOMEN IN REDUCING THE RISK OF CANCER BY COUNTRY

"HAVE A CERVICAL SMEAR REGULARLY"

	Very Important	Fairly Important	Not Important	No Reply	TOTAL
OVERALL EC ..	71 %	19 %	3 %	7 %	100 %
BELGIUM .....	64	24	6	6	100
DENMARK .....	73	18	4	5	100
GERMANY .....	55	32	6	7	100
GREECE .....	66	20	2	12	100
SPAIN .....	63	16	3	18	100
FRANCE .....	74	19	3	4	100
IRELAND .....	76	17	2	5	100
ITALY .....	78	17	1	4	100
LUXEMBOURG .....	77	17	4	2	100
NETHERLANDS .....	70	19	5	6	100
PORTUGAL .....	49	26	2	23	100
UNITED KINGDOM	90	8	1	1	100

"CHECK YOUR BREASTS REGULARLY"

	Very Important	Fairly Important	Not Important	No Reply	TOTAL
OVERALL EC ....	71 %	20 %	3 %	6 %	100 %
BELGIUM .....	68	20	7	5	100
DENMARK .....	72	21	3	4	100
GERMANY .....	60	28	5	7	100
GREECE .....	67	20	3	10	100
SPAIN .....	64	18	2	16	100
FRANCE .....	76	18	3	3	100
IRELAND .....	77	18	2	3	100
ITALY .....	80	17	1	2	100
LUXEMBOURG .....	80	16	1	3	100
NETHERLANDS .....	68	22	4	6	100
PORTUGAL .....	53	30	1	16	100
UNITED KINGDOM	83	14	2	1	100

PERCEPTION OF THE IMPORTANCE OF THE  
RECOMMENDATION AND ITS APPLICATION  
BY COUNTRY AND BY SEX

"DO NOT SMOKE"

		Very Important (1)	Applied (2)	Very Important and applied (3)	Very Important but not applied (4)	Applied but not very important (5)
B	Men	69	51	42	27	9
	Women	78	68	58	20	10
DK	Men	69	53	43	26	10
	Women	69	52	40	29	12
FRG	Men	66	56	48	18	8
	Women	69	67	55	14	12
GR	Men	76	40	32	44	8
	Women	85	76	67	18	9
S	Men	72	49	39	33	10
	Women	81	67	59	22	8
F	Men	73	59	50	23	9
	Women	80	74	63	17	11
IRL	Men	82	60	55	27	5
	Women	81	63	57	24	6
I	Men	81	63	58	23	5
	Women	82	72	63	19	9
L	Men	77	66	55	22	11
	Women	72	70	56	16	14
NL	Men	64	47	40	24	7
	Women	66	57	44	22	13
P	Men	80	59	51	29	8
	Women	85	85	74	11	11
UK	Men	77	58	51	26	7
	Women	78	65	58	20	7
EC12	Men	74	56	48	26	8
	Women	77	69	59	18	10

The total of columns 3 and 4 = column 1.  
The total of columns 3 and 5 = column 2.

PERCEPTION OF THE IMPORTANCE OF THE  
RECOMMENDATION AND ITS APPLICATION

BY COUNTRY AND BY SEX

"MODERATE YOUR CONSUMPTION OF ALCOHOLIC DRINKS"

		Very important (1)	Applied (2)	Very important and applied (3)	Very important but not applied (4)	Applied but not very important (5)
B	Men	50	62	38	12	24
	Women	68	80	59	9	21
DK	Men	27	65	22	5	43
	Women	34	76	27	7	49
FRG	Men	40	48	27	13	21
	Women	55	71	45	10	26
GR	Men	63	62	45	18	17
	Women	77	92	74	3	18
S	Men	65	70	49	16	21
	Women	74	87	67	7	20
F	Men	65	82	53	7	24
	Women	77	92	72	5	20
IRL	Men	46	66	35	11	31
	Women	51	74	40	11	34
I	Men	59	84	52	7	32
	Women	66	94	64	2	30
L	Men	61	81	53	8	28
	Women	64	93	62	2	31
NL	Men	46	72	37	9	35
	Women	55	83	50	5	39
P	Men	72	73	56	16	17
	Women	82	95	79	3	16
UK	Men	34	66	26	8	40
	Women	42	80	37	5	43
EC12	Men	51	69	41	10	28
	Women	62	84	56	6	28

The total of columns 3 and 4 = column 1

The total of columns 3 and 5 = column 2

PERCEPTION OF THE IMPORTANCE OF THE  
RECOMMENDATION AND ITS APPLICATION

BY COUNTRY AND BY SEX

"AVOID EXCESSIVE EXPOSURE TO THE SUN"

		Very Important (1)	Applied (2)	Very important and applied (3)	Very important but not applied (4)	Applied but not very important (5)
B	Men	41	55	30	11	25
	Women	52	65	42	10	23
DK	Men	34	66	26	8	40
	Women	44	65	34	10	31
FRG	Men	35	40	22	13	18
	Women	44	53	31	13	22
GR	Men	53	61	39	14	22
	Women	66	72	53	13	19
S	Men	43	61	32	11	29
	Women	49	71	39	10	32
F	Men	40	71	35	5	36
	Women	58	80	51	7	29
IRL	Men	51	68	41	10	27
	Women	64	68	51	13	17
I	Men	30	63	26	5	38
	Women	36	68	29	7	39
L	Men	42	62	35	7	27
	Women	41	72	37	4	35
NL	Men	30	48	22	8	26
	Women	43	59	33	10	16
P	Men	66	77	57	9	20
	Women	76	87	68	8	19
UK	Men	38	60	30	8	30
	Women	51	71	41	10	30
EC12	Men	38	59	29	9	30
	Women	49	68	39	10	29

The total of columns 3 and 4 = column 1

The total of columns 3 and 5 = column 2



PERCEPTION OF THE IMPORTANCE OF THE  
RECOMMENDATION AND ITS APPLICATION

BY COUNTRY AND BY SEX

"FREQUENTLY EAT FRESH FRUITS AND VEGETABLES"

		Very Important (1)	Applied (2)	Very Important and applied (3)	Very Important but not applied(4)	Applied but not very important (5)
B	Men	55	63	42	13	21
	Women	72	80	61	11	19
DK	Men	56	68	44	12	14
	Women	62	80	53	9	27
FRG	Men	52	55	39	13	16
	Women	61	70	50	11	20
GR	Men	65	74	51	14	23
	Women	74	86	66	8	20
S	Men	55	77	46	9	31
	Women	67	88	60	7	28
F	Men	46	81	43	3	38
	Women	58	84	52	6	32
IRL	Men	55	73	46	9	27
	Women	63	79	56	7	13
I	Men	49	74	48	7	32
	Women	55	82	50	5	32
L	Men	56	77	49	7	28
	Women	67	89	63	4	26
NL	Men	60	76	52	8	24
	Women	62	84	56	6	28
P	Men	70	77	57	13	20
	Women	76	87	68	8	19
UK	Men	47	77	41	6	36
	Women	56	83	50	6	33
EC12	Men	51	72	43	8	29
	Women	60	81	53	7	28

The total of columns 3 and 4 = column 1  
The total of columns 3 and 5 = column 2

PERCEPTION OF THE IMPORTANCE OF THE  
RECOMMENDATION AND ITS APPLICATION

BY COUNTRY AND BY SEX

"AVOID BECOMING OVERWEIGHT"

		Very Important (1)	Applied (2)	Very Important and applied (3)	Very important but not applied (4)	Applied but not very important (5)
B	Men	44	54	31	13	23
	Women	57	66	45	12	21
DK	Men	43	66	32	11	34
	Women	48	67	37	11	30
FRG	Men	40	51	28	12	23
	Women	49	56	35	14	21
GR	Men	53	75	51	12	24
	Women	69	80	57	12	23
S	Men	48	64	36	12	48
	Women	60	69	44	16	25
F	Men	37	72	32	5	40
	Women	42	76	37	5	39
IRL	Men	48	69	39	9	30
	Women	53	72	41	12	31
I	Men	42	69	31	11	38
	Women	45	73	36	9	37
L	Men	44	69	39	5	30
	Women	47	78	41	6	37
NL	Men	50	64	38	12	26
	Women	57	74	48	9	26
P	Men	63	68	49	14	19
	Women	71	75	58	13	17
UK	Men	45	69	37	8	32
	Women	45	70	33	12	37
EC12	Men	44	65	33	11	32
	Women	50	69	39	11	30

The total of columns 3 and 4 = column 1  
The total of columns 3 and 5 = column 2

EDUCATIONAL LEVEL

Bearing in mind the great diversity of the education and university systems in the twelve Community countries, and the fact that the education systems for older persons were different from presentday education systems, information about the respondents' educational level in the course of the survey was collected in the following way.

Question: At what age did you finish your full-time education?

The surveys are classified into three educational levels (according to the length of studies):

Low:	finished at 15 years or before	42
Average:	finished at 16, 17, 18 or 19 years	38
High:	finished at 20 years or more	20
		—
		100%

INCOME LEVEL

Question: We wish to analyse the results of this survey according to the income level of the respondent. Here is a scale of income: we would like to know in which category your household falls, taking account of wages, pensions, income or other resources of persons living in the household?

Each country uses a scale of 8 to 12 categories reflecting national standards (in particular monthly or annual income).

During the analysis, we studied the distribution of replies in each country (it is a log-normal distribution) and established four quartiles. At European level, the upper quartiles in each country are considered together, the lower quartiles, etc. Lastly the respondents are classified in four groups plus the group of persons who did not wish to reply.

Lower quartile R—  
R—  
R+  
Upper quartile R++

**INDEX OF COGNITIVE MOBILIZATION OR LEADERSHIP**

In analysing the results of surveys of representative samples of the public as a whole, it is useful among this group to identify individuals who have certain characteristics that constitute what is generally regarded as leadership qualities: interest in certain problems, degree of activity in the life of the group etc.

The simplest method is to identify these individuals during the survey by means of questions to this effect.

An analysis of the results collected during Eurobarometer surveys shows that it has been statistically significant to construct an index according to the replies given by everyone interviewed to two questions: one relating to the propensity to discuss politics among friends and two, the propensity to convince others of a view of which one is firmly convinced oneself. To avoid any confusion with the notion of institutional leader often used in other research, we will say that this is a cognitive mobilization index.

The index was so constructed that it contains four degrees, the highest degree corresponding to those henceforth called opinion leaders, about 10% of the European population while the lowest degree corresponds to non-leaders (about 22%). The two intermediate degrees correspond to individuals who are slightly more or slightly less inclined to be leaders than the average public.

The following table shows how the cognitive mobilization index was constructed.

	Often	From time to time	Rarely	Never	No reply
Discuss politics					
- often	++	+-	+	+	+
- from time to time	+	+	-	-	-
- never	-	-	-	-	-
- no reply	-	-	-	-	-

In the European population (twelve countries) questioned during the survey the groups had the following percentages:

Leaders	++ 11%
	+ 33
	- 35
Non-leaders	- 21
	100

INSTITUTS CHARGES DU SONDRAGE ET SPECIALISTES RESPONSABLES

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Toutes Les données relatives aux Euro-Baromètres sont déposées aux "Belgian Archives for the Social Sciences", (1, place Montequieu, B-1348 Louvain-la-Neuve). Elles sont tenues à la disposition des organismes membres du European Consortium for Political Research (Essex), du Inter-University Consortium for Political and Social Research (Michigan) et des chercheurs justifiant d'un intérêt de recherche.

All Euro-Barometer data are stored at the Belgian Archives for the Social Sciences (1, Place Montesquieu, B-1348 Louvain-La-Neuve). They are at the disposal of all institutes members of the European Consortium for Political Research (Essex), of the Inter-University Consortium for Political and Social Research (Michigan) and all those interested in social science research.

Pour tous renseignements sur les études d'opinion publique faites à l'initiative de la Commission des Communautés européennes, écrire à Karlheinz REIF, "Sondages, recherches, analyses, 200, rue de la Loi, B-1049 Bruxelles.

For all information regarding opinion surveys carried out for the Commission of the European Communities, please write to Karlheinz REIF, "Surveys, Researches, Analyses", 200 rue de la Loi, B-1049 Brussels.

(\*) Les douze instituts chargés de ces sondages sont représentés par la société THE EUROPEAN OMNIBUS SURVEYS s.c., dont le comité de direction comprend : Jan Stapel (NIPO, Amsterdam), Norman Webb (GALLUP INTERNATIONAL, Londres), Hélène Riffault et Jean-François Ichernia (FAITS & OPINIONS, Paris) et Nicole Jamar (THE EUROPEAN OMNIBUS SURVEYS, Bruxelles).

The twelve institutes which carried out these surveys are represented by THE EUROPEAN OMNIBUS SURVEYS s.c., of which the board members are : Jan Stapel (NIPO, Amsterdam), Norman Webb (GALLUP INTERNATIONAL, London), Hélène Riffault and Jean-François Ichernia (FAITS ET OPINIONS, Paris) and Nicole Jamar (THE EUROPEAN OMNIBUS SURVEYS, Brussels).

(\*\*) Le sondage en Northern Ireland est fait en collaboration par Irish Marketing Surveys et Social Surveys (Gallup Poll).

The Northern Ireland survey is conducted jointly by Irish Marketing Surveys and Social Surveys (Gallup Poll).

#### ECHANTILLONNAGE/SAMPLING

L'objectif de la méthode d'échantillonnage est de couvrir de façon représentative la totalité de la population âgée de 15 ans et plus, des douze pays de la Communauté élargie. L'échantillonnage de chaque pays est constitué à deux niveaux :

The sample has been designed to be representative of the total population aged 15 years and over of the twelve countries of the enlarged Community. In each country a two stage sampling method is used :

##### 1°) Régions et localités d'enquête

L'enquête a lieu sur l'ensemble du territoire des douze pays, soit 138 régions. (Voir liste ci-jointe)

##### 1°) Geographical distribution

The survey covers the whole territory of the twelve countries i.e. 138 regions. (See attached list)

Chaque pays a constitué aléatoirement un échantillon-maître de localités d'enquête, de telle sorte que toutes les catégories d'habitat soient représentées proportionnellement à leurs populations respectives.

In each country a random selection of sampling points is made in such a way that all types of area (urban, rural, etc..) are represented in proportion to their populations.

Au total, les interviews ont lieu dans environ 1.350 points d'enquête.

The interviews are distributed in more or less 1.350 sampling points.

2°) Choix des personnes interrogées

Les personnes interrogées sont toujours différentes d'une enquête à l'autre. L'échantillon-maître aléatoire évoqué ci-dessus indique le nombre de personnes à interroger à chaque point d'enquête. Au stade suivant, les personnes à interroger sont désignées :

- soit par un tirage au sort sur liste dans les pays où on peut avoir accès à des listes exhaustives d'individus ou de foyers : Danemark, Luxembourg, Pays-Bas. ;
- soit par échantillonnage stratifié sur la base des statistiques de recensement, l'échantillon étant construit à partir des critères de sexe, âge et profession : Belgique, France, Italie, Royaume-Uni, Irlande ;
- soit par une méthode combinant les deux précédentes (cheminement systématique) : Allemagne, Grèce, Espagne, Portugal.

2°) Choice of respondents

For each survey different individuals are interviewed in the master sample of sampling point described above. Within these sampling points the individuals to be interviewed are chosen :

- either at random from the population or electoral lists in those countries where access to suitable lists of individuals or households is possible : Denmark, Luxembourg, Netherlands ;
- or by quota sampling. In these cases the quotas are established by sex, age and occupation on the basis of census data : this system is used in Belgium, France, Italy, United-Kingdom, Ireland ;
- or by a method combining the two precedent ones ("random route") : Germany, Greece, Spain, Portugal.

	Population (1)			Echantillons/ Samples (2)	Dates (Euro-Baromètre n° 30)
	Milliers /Thou- sands	% CE/EC 10	% CE/EC 12		
B	7.924	3.54	3.12	1.024	13/10 au 06/11/1988
DK	4.133	1.90	1.62	1.006	31/10 au 19/11/1988
D	51.466	23.62	20.26	1.051	17/10 au 09/11/1988
GR	7.715	3.54	3.04	1.000	17/10 au 07/11/1988
F	42.851	19.57	16.37	1.001	22/10 au 10/11/1988
IRL	2.455	1.13	.97	1.012	13/10 au 10/11/1988
I	44.433	20.39	17.49	1.058	26/10 au 10/11/1988
L	300	.14	.12	300	20/10 au 21/11/1988
NL	11.400	5.23	4.49	1.006	22/10 au 06/11/1988
UK	45.207	20.75	17.79	1.324	20/10 au 15/11/1988
CE/EC 10	217.869	100.00	85.77	9.782	17/10 au 31/11/1988
E	28.854	-	11.36	1.013	17/10 au 24/11/1988
P	7.314	-	2.88	1.000	19/10 au 14/11/1988
CE/EC 12	254.057	-	100.00	11.795	17/10 au 31/11/1988

Il est rappelé que les résultats obtenus par sondage sont des estimations dont le degré de certitude et de précision dépend, toutes choses égales d'ailleurs, du nombre des individus constituant l'échantillon. Avec des échantillons de l'ordre de 1.000, on admet généralement qu'une différence inférieure à cinq pour cent entre deux pourcentages est au-dessous du niveau acceptable de confiance.

Readers are reminded that sample survey results are estimations, the degree of certainty and precision of which, everything being kept equal rests upon the number of cases. With samples of about 1.000, it is generally admitted that a percentage difference of less than five per cent is below the acceptable level of confidence.

(1) 15 ans et plus. / 15 years and over.

(2) Nombre d'interviews. / Number of interviews.

QUESTIONNAIRE

131. Avez-vous récemment lu ou entendu quelque chose au sujet d'un programme européen de lutte contre le cancer ?

- 1. Oui
- 2. Non
- 0. ?

TREND EURO 29 - Q. 171

132. Quoi qu'il en soit, estimez-vous que la Communauté européenne a raison de s'occuper de la prévention du cancer dans les pays membres, ou estimez-vous que c'est plutôt l'affaire de chaque pays membre de s'en occuper ?

- 1. La Communauté a raison de s'en occuper
- 2. C'est l'affaire de chaque pays membre
- 3. Autre réponse (Spontané)
- 0. ?

133. Avez-vous déjà pensé que vous aviez peut-être un cancer ou que vous risquiez d'avoir un jour un cancer ?

- 1. Oui
- 2. Non
- 0. ?

134. Avez-vous entendu parler d'un "Code européen contre le cancer" ?

- 1. Oui
- 2. Non
- 0. ?

135. Voici le "Code européen contre le cancer", c'est-à-dire dix règles élémentaires sur la prévention possible du cancer, qui ont été élaborées par le Comité européen des experts cancérologues. Ce Comité d'experts comprend des cancérologues de tous les pays membres de la Communauté, y compris (notre pays). (MONTRER LE CODE).

Vous souvenez-vous maintenant avoir lu ou entendu quelque chose au sujet de ce Code européen contre le cancer ?

- 1. Oui
- 2. Non
- 3. Hésite à répondre
- 0. ?

136/ Et ce document, (MONTRER LE CODE) l'avez-vous vu par

138. exemple ...

	136 Oui	137 Non	138 ?
. à la télévision .....	1	1	1
. chez un pharmacien .....	2	2	2
. chez un médecin .....	3	3	3
. dans un journal ou un magazine ...	4	4	4
. ailleurs .....	5	5	5
. ? .....	0	0	0

131. Have you recently read or heard anything about a European programme for the fight against cancer ?

- 1. Yes
- 2. No
- 0. ?

TREND EURO 29 - Q. 171

132. Whether you have or not, do you think that the European Community is right to concern itself with the prevention of cancer in member countries or do you think that it is rather more the business of each member country to deal with ?

- 1. The European Community is right to concern itself with it
- 2. It is the business of each country
- 3. Other replies (Spontaneous)
- 0. ?

133. Have you ever thought that you might be suffering from cancer or that you might be at risk in the future to get cancer ?

- 1. Yes
- 2. No
- 0. ?

134. Have you heard anything about a "European Code Against Cancer" ?

- 1. Yes
- 2. No
- 0. ?

135. Here is the "European Code Against Cancer" (SHOW CARD WITH CODE), consisting of ten elementary rules for the possible prevention of cancer, which have been developed by a European Committee of cancer experts. This expert committee includes cancer specialists from all member countries of the Community, including (your country).

Now, do you remember having read or heard anything about this European Code Against Cancer ?

- 1. Yes
- 2. No
- 3. Hesitates in replying
- 0. ?

136/ This document, (SHOW THE CARD WITH CODE) have you seen

138. it for example ...

	136 Yes	137 No	138 ?
. on television .....	1	1	1
. in the chemists .....	2	2	2
. in a doctor's surgery .....	3	3	3
. in a newspaper or magazine .....	4	4	4
. elsewhere .....	5	5	5
. ? .....	0	0	0



139. Estimez-vous que le Code vous apprend vraiment quelque chose ou que tout cela, vous le saviez déjà ?

- 1. Apprend quelque chose
- 2. Savait déjà
- 3. Autre réponse (Spontané)
- 0. ?

140. Pensez-vous que la diffusion de ce Code dans le grand public sera très efficace, moyennement efficace ou ne servira à rien pour aider les gens à essayer d'éviter le cancer ?

- 1. Très efficace
- 2. Moyennement efficace
- 3. Ne servira à rien
- 0. ?

141/ Pouvez-vous me dire, pour chacune des recommandations que je  
145. vais vous citer, si elle vous paraît très importante, assez importante ou pas importante pour diminuer les risques de cancer ?

	Très importante	Assez importante	Pas importante	?
141. Ne fumez pas .....	1	2	3	0
142. Modérez votre consommation de boissons alcoolisées .....	1	2	3	0
143. Evitez les expositions excessives au soleil .....	1	2	3	0
144. Consommez fréquemment des fruits et des légumes frais ..	1	2	3	0
145. Evitez l'excès de poids .....	1	2	3	0

146/ Et vous personnellement, pour chacune de ces recommandations  
150. diriez-vous que vous l'appliquez déjà, que vous avez l'intention d'essayer de l'appliquer ou que vous n'avez pas l'intention d'essayer de l'appliquer ?

	Applique déjà	A l'intention d'appliquer	N'a pas l'intention d'appliquer	?
146. Ne fumez pas .....	1	2	3	0
147. Modérez votre consommation de boissons alcoolisées .....	1	2	3	0
148. Evitez les expositions excessives au soleil ..	1	2	3	0
149. Consommez fréquemment des fruits et des légumes frais .....	1	2	3	0
150. Evitez l'excès de poids ..	1	2	3	0

QUESTIONS 151/152 ET 153/154 POUR LES FEMMES SEULEMENT

151/ Voici maintenant deux recommandations pour les femmes. Pour  
152. chacune d'elles, dites-moi si elle vous paraît très importante, assez importante ou pas importante pour diminuer les risques de cancer ?

	Très importante	Assez importante	Pas importante	?
151. Faites pratiquer régulièrement un frottis vaginal .....	1	2	3	0
152. Surveillez vos seins régulièrement .....	1	2	3	0

153/ Et vous personnellement, pour chacune de ces recommandations  
154. le faites-vous régulièrement, de temps en temps ou pas ?

	Régulièrement	De temps en temps	Ne fait pas	?
153. Faites pratiquer régulièrement un frottis vaginal .....	1	2	3	0
154. Surveillez vos seins régulièrement .....	1	2	3	0

139. Do you think that the Code is really telling you something new or do you think that you knew all this already ?

- 1. It tells me something
- 2. I knew it already
- 3. Other reply (Spontaneous)
- 0. ?

140. Do you think that if this code were made available to everybody, it would be very effective, somewhat effective, or no use in helping people to try to prevent cancer ?

- 1. Very effective
- 2. Fairly effective
- 3. Not very useful
- 0. ?

141/ Could you tell me for each of the recommendation, I am  
145. going to mention if it is very important, fairly important, or not important in reducing the risks of cancer ?

	Very important	Fairly important	Not important	?
141. Do not smoke .....	1	2	3	0
142. Moderate your consumption of alcoholic drinks .....	1	2	3	0
143. Avoid excessive exposure to the sun .....	1	2	3	0
144. Eat frequently fresh fruits and vegetables .....	1	2	3	0
145. Avoid being overweight ..	1	2	3	0

146/ As far as you personally are concerned, for each of these  
150. recommendations would you say that you are following it already, you have the intention to try to follow it, or you don't intend to try ?

	Following them	Intend to follow	Do not intend	?
146. Do not smoke .....	1	2	3	0
147. Moderate your consumption of alcoholic drinks .....	1	2	3	0
148. Avoid excessive exposure to the sun .....	1	2	3	0
149. Eat frequently fresh fruits and vegetables .....	1	2	3	0
150. Avoid becoming overweight ..	1	2	3	0

QUESTIONS 151/152 AND 153/154 ONLY FOR WOMEN

151/ Here are two pieces of advice for women. For each of them  
152. please tell me if it is very important, fairly important, or not important at all in lessening the risks of cancer ?

	Very important	Fairly important	Not important	?
151. Have a cervical smear regularly .....	1	2	3	0
152. Check your breasts regularly .....	1	2	3	0

153/ And for you personally for each of these do you do it  
154. regularly, from time to time or not at all ?

	Regularly	From time to time	Not at all	?
153. Have a cervical smear regularly .....	1	2	3	0
154. Check your breasts regularly .....	1	2	3	0

**A TOUS**

155. Parmi les situations suivantes, quelle est celle qui correspond à votre cas ? (REponses MULTIPLES POSSIBLES ENTRE 1 ET 2).

1. Vous fumez des cigarettes (y compris cigarettes roulées à la main)
2. Vous fumez le cigare, la pipe
3. Vous avez arrêté de fumer
4. Vous n'avez jamais fumé
0. ?

PASSER A LA QUESTION 157/158

TREND EURO 29 - Q. 163

**AUX FUMEURS SEULEMENT**

156. Actuellement, avez-vous envie de vous arrêter de fumer, de diminuer votre consommation de tabac ou de ne rien changer à vos habitudes ?

1. Envie de vous arrêter de fumer
2. Envie de diminuer votre consommation de tabac
3. Envie de ne rien changer à vos habitudes
0. ?

TREND EURO 29 - Q. 168

**A TOUS**

157/ Appartenez-vous vous-même ou avez-vous appartenu à une profession de santé (médecin, pharmacien, dentiste, services hospitaliers, recherche médicale ou pharmaceutique, etc.) ?

Et parmi vos proches (conjoint, père, mère, enfants) y a-t-il quelqu'un qui appartient à une de ces professions de santé ?

	157	158
	Vous-même	Vos proches

- |           |   |   |
|-----------|---|---|
| Oui ..... | 1 | 1 |
| Non ..... | 2 | 2 |

159/ Appartenez-vous ou avez-vous appartenu à une profession de 160. l'enseignement (instituteur, professeur, personnel administratif de l'enseignement, etc.) ?

Et parmi vos proches (conjoint, père, mère, enfants) y a-t-il quelqu'un qui appartient à ces professions de l'enseignement ?

	159	160
	Vous-même	Vos proches

- |           |   |   |
|-----------|---|---|
| Oui ..... | 1 | 1 |
| Non ..... | 2 | 2 |

**TO EVERYBODY**

155. Which of the following things applies to yourself ? (MULTIPLE ANSWERS POSSIBLE 1 AND 2)

1. You smoke cigarettes (including Roll-your-own)
2. You smoke cigars or a pipe
3. You used to smoke but you have stopped
4. You have never smoked
0. ?

GO TO QUESTION 157/158

TREND EURO 29 - Q. 163

**TO SMOKERS ONLY**

156. At the present time do you wish to stop smoking, cut down your consumption of tobacco or not to change your smoking habits ?

1. Wish to stop smoking
2. Wish to cut down tobacco consumption
3. Do not wish to change
0. ?

TREND EURO 29 - Q. 168

**TO ALL**

157/ Do you yourself (or did you) belong to one of the health 158. professions (doctors, pharmacist, dentist, nurse, hospital services, medical or pharmaceutical research, etc.) ? And do any of your immediate family (spouse, parents, child) belong to these health professions ?

	157	158
	Self	Immediate family

- |           |   |   |
|-----------|---|---|
| Yes ..... | 1 | 1 |
| No .....  | 2 | 2 |

159/ Do you yourself (or did you) work in education (school, 160. college or university teacher or educational administration) ? And do any of your immediate family (spouse, parents, child) belong to these professions ?

	159	160
	Self	Immediate family

- |           |   |   |
|-----------|---|---|
| Yes ..... | 1 | 1 |
| No .....  | 2 | 2 |