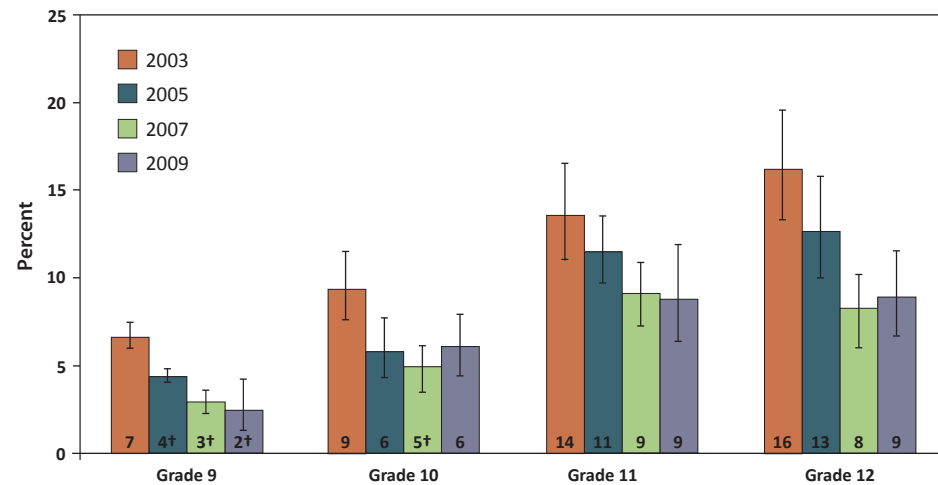


Figure 4: Current Smoking (Past 30 Days), by Grades 7-12, Ontario, 2003 to 2009



† Interpret with caution, moderate levels of error associated with estimate—Coefficient of Variation (CV) between 16.6% and 33.3%.
Note: Vertical lines represent 95% confidence intervals; numbers have been rounded.
Source: OSDUHS 2003–2009 (Biennial).

young adults ages 18 to 19, the rate of smoking dropped for the period 2003 to 2009 from 23.5% to 13%. Among young adults aged 20 to 24, the rate of smoking dropped over the period 2005 to 2009 from 26% to 20%.

Policies and programs to prevent initiation—including taxation, restrictions on youth access, smoking bans, advertising bans, youth engagement initiatives, social marketing and school-based programming—have met with some success in the general youth population. Taxation is a highly effective tool for preventing initiation, yet, among Canadian jurisdictions, Ontario has the second lowest rate of taxes on cigarettes.

Recent population survey data from 2008-2009 suggests a need for tobacco use-related curriculum in higher grades, as approximately 64% of youth in Grades 7-9 reported that they had in-class discussions about the effects of smoking, whereas only 42% of Grade 10-12 students had such discussions.

The Scientific Advisory Committee, in its report, *Evidence to Guide Action: Comprehensive Tobacco Control in Ontario*, noted that beyond providing basic information about tobacco in all schools, there is a need to focus prevention efforts on high-risk schools. Analyses conducted recently by OTRU indicate that more than 75% of youth who are current smokers in Grades 7 to 12 also use other drugs or have problem drinking.

Concluding Remarks

While many positive developments are reported, there are some examples of worrisome trends. Smoking rates among

low socioeconomic status subpopulations and in several public health units are not noticeably decreasing. There has been important progress in decreasing current smoking among older teens and young adults, but, by age 20 to 24, smoking prevalence is still over 20%. Too many Ontarians are still exposed to secondhand smoke in a variety of settings. The province's cessation efforts appear to reach only about 5% of smokers annually, and only a small proportion of these smokers succeed in quitting. Tobacco taxes remain among the lowest in the country.

There is also a need to address forces that work to counter the accomplishments of the Smoke-Free Ontario Strategy and other tobacco control efforts. Widespread availability and use of contraband cigarettes presents a significant risk to

Ontario's accomplishments and likely accounts for part of the failure to substantially decrease consumption and prevalence of cigarette use. The increasing availability, marketing and popularity of alternative tobacco forms may pose new challenges to the tobacco control community.

The Smoke-Free Ontario Strategy has made impressive inroads in implementing a comprehensive approach to achieving its vital tobacco control goals. Yet, the evaluative information presented in the *Smoke-Free Ontario Strategy Evaluation Report* makes it clear that these laudable efforts must be sustained, strengthened and enriched in order to achieve the results that Ontario needs and deserves.

The Smoke-Free Ontario Evaluation Report presents evaluative information about the activities and results of the Smoke-Free Ontario Strategy for the period 2009 and 2010. Drawing on information from population-level surveys, program evaluations, performance reports and administrative data, the report describes Strategy infrastructure and interventions (policies, programs and media), analyzes population-level changes, and explores the contributions of the various interventions.

Key authors of the report are Robert Schwartz, Shawn O'Connor, Alexey Babayan and Maritt Kirst. The interpretation and opinions expressed in this report are the responsibility of the Principal Investigators of the Ontario Tobacco Research Unit (OTRU). The full report is available on our website at www.otru.org.

EVALUATION UPDATE

October 2011

Smoke-Free Ontario Strategy Evaluation Report Executive Summary

Ontario's investment in the Smoke-Free Ontario Strategy is bearing fruit. *The Smoke-Free Ontario Act* protects most Ontarians most of the time from exposure to secondhand smoke in indoor public places. Smoking bans, social marketing, restrictions on promotion, and youth programs are changing the social climate of tobacco use, leading to declines in smoking rates among youth. The prevalence of smoking among the general population of Ontario's adults continues to decline. This is also the case for particular subpopulations—those with postsecondary education, professional workers and among respondents living in some public health regions.

Tobacco Use

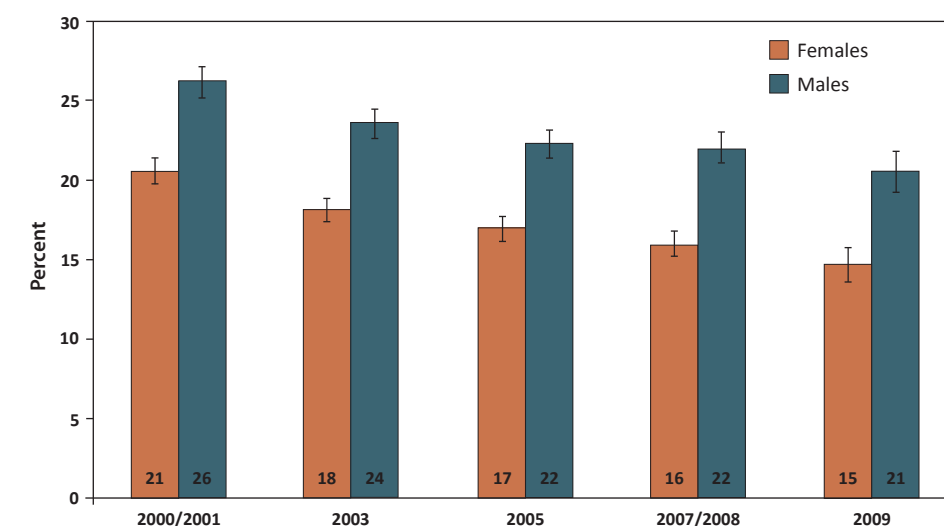
In 2009, 21% of Ontarians aged 12 years and over used some form of tobacco, unchanged from that reported in 2007-2008 (23%). Specifically, 18% smoked cigarettes, 5% smoked cigars, 1% smoked pipes, and 0.5% used either chewing tobacco or snuff in the previous 30 days (these estimates include co-use so do not sum to total tobacco use, or 21%).

The rate of current cigarette smoking (defined as smoking daily or occasionally in the past 30 days and having smoked 100 cigarettes in one's lifetime) declined significantly over

the period 2005 to 2009 (20% to 18%). Over this period, current smoking significantly decreased for females (17% to 15%) but not for males (22% vs. 21%) (Figure 1 below; or Figure 2 from the full report).

Regionally, across the province, smoking rates in 2010 ranged from a low of 16% in Ottawa and Halton regions to a high of 31% in Algoma. In ten of Ontario's 36 health regions, 1 in 4 respondents aged 12 years or older smoked daily or occasionally.

Figure 1: Current Smoking (Past 30 Days), by Sex, Ages 12+, Ontario, 2000-2001 to 2009



Note: Vertical lines represent 95% confidence intervals.
Source: Canadian Community Health Survey 2000-2001, 2003, 2005, 2007-2008, 2009.

Protection

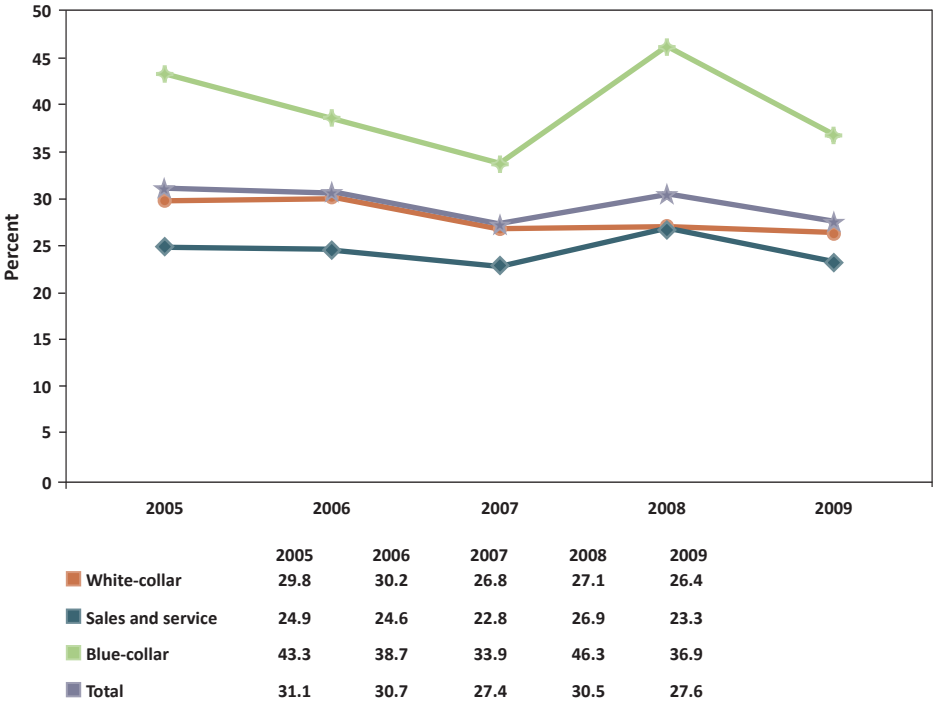
Ontario's smoke-free policies have succeeded in decreasing secondhand smoke exposure in a variety of settings. Exposure to secondhand smoke inside restaurants has decreased from 11% in 2005 to 3% in 2009; exposure inside bars has decreased from 14% to 4%. In 2010, exposure of children and youth to secondhand smoke in vehicles significantly decreased compared to that of 2007 (10.5% vs. 18.5%). Among 12 to 19 year-old nonsmokers, 12% (or 146,700) were exposed to secondhand smoke in their home in 2010—a significantly lower rate of exposure compared to levels reported in 2005 (18%).



Alongside these accomplishments, large numbers of people are still exposed to secondhand smoke in some settings.

Over the period 2005 to 2009, overall (indoor and outdoor) workplace exposure to secondhand smoke in the past 30 days among workers aged 15 years and older has not declined significantly (31% in 2005 and 28% in 2009). Among the 24% of workers exposed at work for 5 or more minutes in the past week, 29% were exposed indoors.

Figure 2: Workplace Exposure, by Occupation, Ages 15+, Ontario 2005 to 2009



Source: CTUMS 2005–2009.

Almost a third of those (31%) visiting restaurants and bars in 2009 were still exposed on patios.

Public support for more extensive protection has increased significantly over the past few years with over 80% of Ontarians supporting smoking bans on restaurant and bar patios, in homes with children, and in multi-unit dwellings. Numerous localities have responded by implementing policies restricting smoking on restaurant and bar patios, public parks, beaches and entrances to doorways.

Cessation

In 2010, 7.3% of past-year smokers had quit at some point for a period of 30 days or more over the previous year. Applying a relapse rate of 83% (derived from OTRU's Ontario Tobacco Survey), it is estimated that 1.2% of previous-year smokers remained smoke-free for the subsequent 12 months.

To meet targets set out in the Tobacco Strategy Advisory Committee report, it is necessary to at least double this rate.

Increasing the rate of successful quits is driven by increasing the proportions of smokers who intend to quit and who make quit attempts. Rates of intention to quit and quit attempts suggest an opportunity to advance cessation goals; however, these rates have not improved in recent years. The prevalence of six-month quit intentions in 2009 was 52%, and the prevalence of 30-day quit intentions was 25% (Figure 3 on the right; or Figure 24 from the full report). Four in ten adult smokers (41%) made one or more quit attempts in the past year.

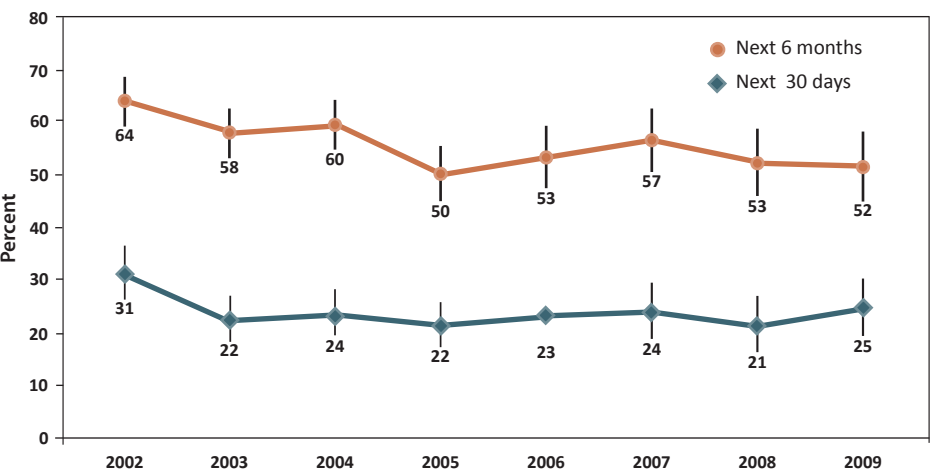
In 2009, 69% of smokers who had visited a physician and 45% of smokers who visited a dentist in the past year were advised to quit. Only a small proportion of these smokers succeeded in quitting. Considerable investments have been made in providing training to health professionals in the provision of cessation support. Evaluative information is insufficient at present to assess the effects of this training on the actual provision of cessation support.

Price is one of the most effective policy tools to promote cessation. Yet, taxes on tobacco have increased only once since 2006, and tobacco taxes in Ontario are among the lowest in Canada.

Restrictions on smoking in public and workplaces are also effective policy tools for the promotion of quitting. It is likely that since restrictions were already in place for some 90% of Ontarians prior to the implementation of the *Smoke-Free Ontario Act* in 2006, the fruits of this policy tool in regard to quitting have been reaped in large part in past years.

EVALUATION UPDATE

Figure 3: Intentions to Quit Smoking in the Next 6 Months and Next 30 Days, Ages 18+, Ontario, 2002 to 2009



Note: Vertical lines represent 95% confidence intervals.
Source: Centre for Addiction and Mental Health Monitor 2002–2009.

Ongoing, comprehensive social marketing has been found to be a vital ingredient for facilitating intentions to quit and quit attempts. Specified data on the scope and effects of social marketing campaigns were not readily available for this report; nevertheless, it is evident that recent years have not seen major ongoing campaigns, apart from the annual Driven to Quit Challenge.

The province's cessation efforts have focused largely on providing cessation support to smokers in making quit attempts. To this end, the Smoke-Free Ontario Strategy funds Smokers' Helpline, the Driven to Quit Challenge, the STOP study, Leave the Pack Behind and the Ottawa Model for Smoking Cessation. These interventions appear to reach approximately 5% of smokers annually, and only a small proportion of participants succeed in quitting. Relapse rates are very high and there is currently little support offered to prevent relapse in the post-intervention period. Notwithstanding, these initiatives have laid the foundation for the development of the next phase of a comprehensive cessation system, and recent commitments to cessation services by the government provide additional impetus to addressing this challenge (Table 1 on the right; or Table 8 from the full report).

Table 1: Program Reach, Characteristics of Smokers Enrolled in Ontario Smoking Cessation Programs in 2009-2010

Program	Reach in 2009-2010	Gender (Female)	Age (Mean)
Smokers' Helpline	5,820	59.1%	46.9
Smokers' Helpline Online	9,539	43.5%	41
Smokers' Helpline Text Messaging	218	67.7%	37
The Driven to Quit Challenge	28,835	54.0%	40
Leave the Pack Behind (smokers accessing materials and services)	22,153	57.0%	21.8
The Ottawa Smoking Cessation Model (based on 23 hospitals)	7,086	38.9%	56.0
The Stop Study (mass distribution model only)	3,189	55.1%	45.8

Prevention

In 2009, two out of every ten students in Grade 9, three out of every ten students in Grade 10, and four out of every ten students in Grade 11 and 12 had tried smoking in their lifetime.

According to the Ontario Student Drug Use and Health Survey, the prevalence of past 30-day current smoking (daily or occasionally) in 2009 was 2% for students in Grade 9 but jumped to 9% for students in Grade 12, with the rate too low to report for students in Grades 7 and 8 (Figure 4 on next page; or Figure 30 from the full report).

Indicators show that smoking initiation for students in higher grades has decreased over the past decade, yet the data presented here suggest that over the past couple of years, this decline has stalled. In Grades 11 and 12, lifetime abstinence is 63% and 58% respectively; past year initiation is 9% for both grades; past year smoking is 18% and 20%, respectively, and past 30-day current smoking is 9% across both grades.

According to the Canadian Community Health Survey, the rate of smoking was 13% for young adults aged 18 to 19 but jumped to 26% for young adults aged 25 to 29. Although these jumps in smoking prevalence are concerning, there was a general downward trend in the prevalence of smoking among young adults in Ontario from 2000 to 2009. Among