

UNITÉ DE RECHERCHE SUR LE TABAC DE L'ONTARIO



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The Ontario Tobacco Survey: Raising the Standard for Evaluation

BACKGROUND

The Ontario Tobacco Research Unit has launched a new provincial survey monitoring tobacco use and opinions about tobacco control to inform the progress of the Smoke-Free Ontario Strategy. The Ontario Tobacco Survey is a major cross-sectional and panel study—one of a few truly longitudinal studies of smokers in Canada or elsewhere. The specific study objectives are to:

- 1) evaluate existing Smoke-Free Ontario Strategy projects or policies;
- 2) provide a baseline for evaluating new or likely projects or policies; and
- 3) serve as a basis for planning projects rated as likely or a high priority.

The study will focus on attitudes, behaviours, and beliefs about tobacco, the factors that influence smoking cessation, and exposure to smoking-related government policies and programs. OTRU will track changes over time in participants' thoughts, feelings, behaviours and experiences relevant to tobacco use and second-hand smoke.

METHOD

The Ontario Tobacco Survey is a regionally-stratified, random-digit-dial telephone survey of approximately 15-20 minutes in length. Every six months, 750 recent smokers (those who have smoked at least one cigarette in the past six months) and 500 non-smokers are recruited to participate. Participants are compensated for their time. Recent smokers are subsequently invited to participate in three follow-up surveys occurring in six-month intervals. The study will run for at least three years.

- The baseline questionnaire asks both recent smokers and non-smokers about their attitudes and beliefs regarding smoking, second-hand smoke, exposure to tobacco industry marketing, tobacco control mass media campaigns aired in Ontario, and demographic information.
- Recent smokers are also asked about their personal smoking characteristics (including past quit attempts and future intentions), and their exposure to smoking cessation aids and resources.
- Follow-up questionnaires, approximately 25 minutes in length and administered only to recent smokers, reflect the baseline questionnaire but also ask about any changes in participants' personal smoking behaviours over the past six months and the factors that may have initiated these changes.

RESULTS

The first wave of data was collected between July and December 2005. The corrected response and cooperation rates for Wave 1 data were 60% and 85% respectively, representing 750 recent smokers and 501 non-smokers.

Preliminary Description of Wave 1 Sample:

- Of the 1251 respondents, 57% were women and 43% were men.
- The average age of respondents was 45 years (SD = 16.4 years).
- Of the 750 recent smokers, 83% were daily smokers, 14% were occasional smokers, and 3% quit or last smoked one to six months ago.
- Of the 501 non-smokers, 59% were never smokers, and 41% were former smokers (quit or last smoked more than six months ago).
- Daily smokers reported smoking an average of 17.1 cigarettes per day (median: 15.0; range: 1-100 cigarettes/day).
- Occasional smokers reported smoking an average of 9.8 days per month (median: 6.0; range: 1-30 days/month).
- 53% of recent smokers report ever using Zyban (bupropion) or nicotine replacement therapy to help them quit or reduce their smoking; 23% of recent smokers report ever using self-help materials or other alternative therapies (e.g. hypnosis, acupuncture or laser therapy); and 7% report ever attending group or individual counselling.
- Slightly over 1% report ever calling the Ontario Smokers' Helpline and 4% report ever participating in a quit program.

DISCUSSION AND IMPLICATIONS

The longitudinal design of the Ontario Tobacco Survey provides a unique opportunity to capture smokers' motivations and attempts to quit, and to identify causes of relapse. These behaviours will be linked to regional and provincial initiatives to allow for the evaluation of current policies and programs. The results will also identify additional needs of smokers to help further reduce smoking rates. The combined cross-sectional design will facilitate further evaluation of policies and programs that directly affect both smokers and non-smokers (e.g., exposure to tobacco smoke, tobacco industry sponsorship, and mass media campaigns).

The survey will evolve as we identify likely or high priority policies and/or programs that are linked to the actual experiences of current smokers. The large sample size of smokers permits in-depth analyses of the smoking population rarely achievable with general-purpose health surveys.

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