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Generating knowledge for public health

Smoke-Free Ontario Strategy Monitoring Report:

Protection



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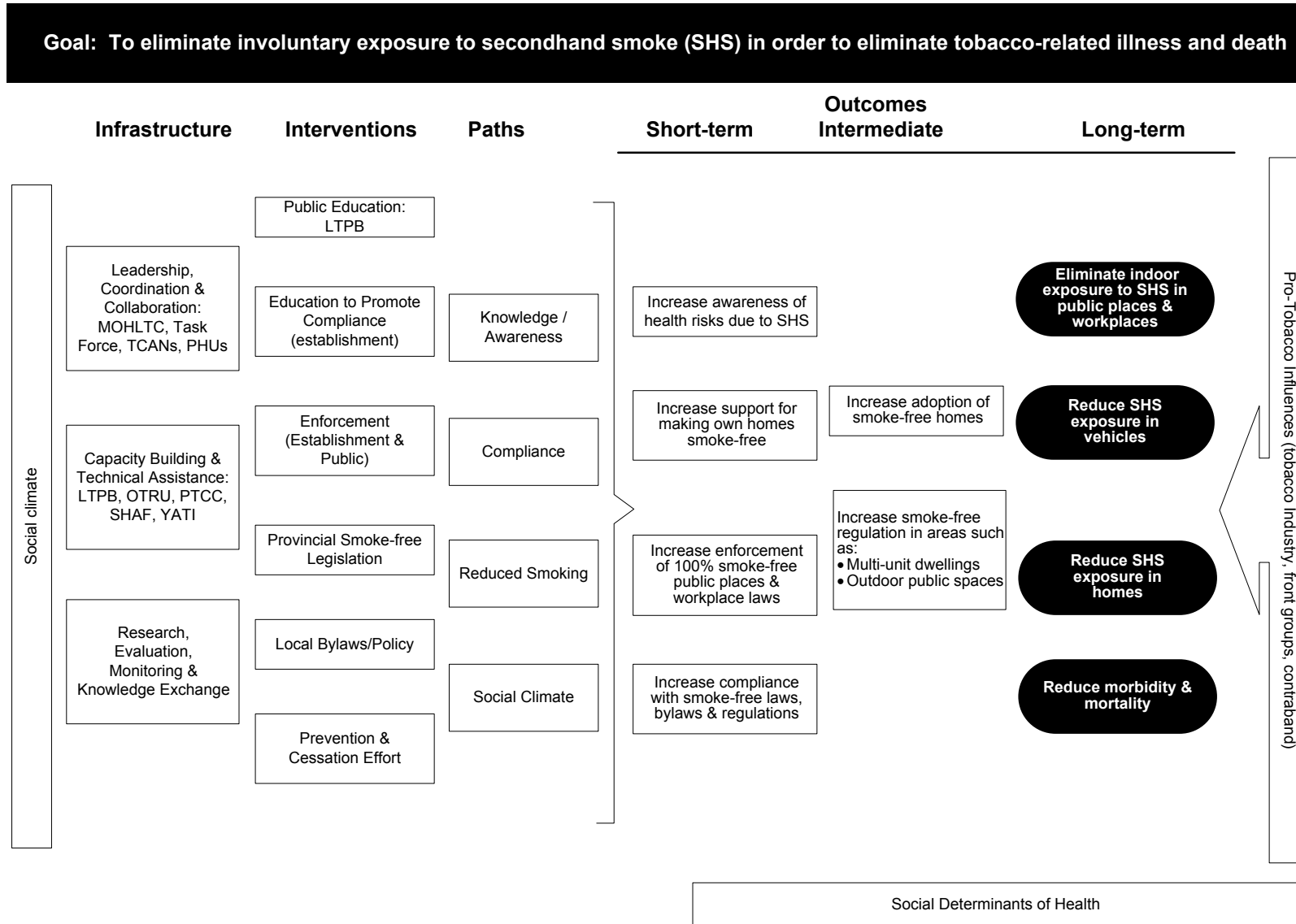
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Protection: Smoke-Free Ontario Strategy Components

An important goal of tobacco control is to protect the population from exposure to secondhand smoke. Desired outcomes include eliminating nonsmokers' exposure to secondhand smoke in public places, workplaces, vehicles in which children are present and in the home. In Ontario, the protection component of the Smoke-Free Ontario (SFO) Strategy is the main avenue by which progress toward these desired outcomes is expected to be achieved (Figure 5-1). A secondary desired outcome of the protection goal is to reduce nonsmokers' social exposure to tobacco use (visual and sensory cues associated with the use of tobacco products).¹

In this chapter, we provide a brief overview of the protection component of the Strategy including infrastructure and intervention components. We follow with an examination of key outcome indicators measuring progress toward protection objectives.

Figure 5-1: Protection Path Logic Model



Protection Infrastructure

Ontario Tobacco Research Unit

In 2015/16, the Ontario Tobacco Research Unit (OTRU) provided rapid scientific consulting to the Ministry of Health and Long-Term Care, Health Protection Policy and Programs Branch and SFO partners. OTRU also responded to 75 knowledge and evaluation support requests from SFO partners. Protection-focused knowledge and evaluation support requests included evaluations of Essex Region Conservation Area's smoke-free policy, Toronto's amended smoke-free bylaws, the Pan Am/Parapan Am Games smoke-free policy and Ontario's new outdoor smoke-free regulations.^{2,3,4,5} OTRU's online course, [Tobacco and Public Health: From Theory to Practice](#), is a further resource on protection that provides evidence-based knowledge on what is currently known about secondhand smoke, its effects on health, and the creation of smoke-free environments. The course is available to public health personnel and health professionals across the Province. In 2015/16, a total of 1089 people enrolled in the protection module of the online course. OTRU staff are also actively involved in the Protection and Enforcement Task Force, Communities of Practice and other provincial committees relevant to the SFO Strategy.

Program Training and Consultation Centre

In 2015/16, a portion of the Program Training and Consultation Centre's (PTCC) work centered on supporting protection initiatives of the Strategy. PTCC provided several training and capacity-building initiatives to support the development and implementation of protection initiatives. In regards to enforcement, the PTCC continued to offer a multi-day training course on the foundations of tobacco control enforcement. This course is offered in collaboration with the Ministry of Health and Long-Term Care (MOHLTC) as it is a required training for any public health unit employee enforcing the *Smoke-Free Ontario Act*. PTCC also offered conflict resolution training for tobacco enforcement officers. In November 2015, the PTCC collaborated with the MOHLTC to plan and implement a special two-day enforcement training event to prepare tobacco enforcement officers for the January 1, 2016 implementation of the *Electronic Cigarette Act* and the amendments to the *Smoke-Free Ontario Act*. Several Tobacco Control Area Networks were also supported in hosting regional tobacco enforcement knowledge exchange forums through PTCC's special request training process.

PTCC continued to convene a Community of Practice addressing tobacco-free policy, which encourages and supports the use of evidence in the development, implementation and enforcement of comprehensive tobacco control policies at community and organizational levels. Some examples of policy addressed by the Community of Practice include outdoor tobacco-free policy, and smoke-free policies in workplaces, multi-unit housing and post-secondary campuses. In partnership with the Propel Centre for Population Health Impact, the PTCC also completed a documentation of the indoor smoke-free space movement.⁶

PTCC Health Promotion Specialists and Media and Communications Specialist also provided consultation support to help advance local policy efforts including smoke-free multi-unit housing, 100% smoke-free grounds, and e-cigarettes.

Program Reach: In 2015/16, the PTCC delivered 43 training events on all aspects of tobacco control, which reached over 1284 clients. Training events included 21 workshops, 12 webinars and 10 special request workshops. A portion of these training events were related to protection. PTCC's training programs were attended by staff of Ontario's 36 Public Health Units, Community Health Centres, the health care sector (e.g., hospitals), non-governmental organizations and government. A total of 226 public health practitioners and researchers were actively engaged across three provincial Communities of Practice. In addition, 462 consultations were delivered by PTCC Health Promotion Specialists and Media and Communication Specialist.ⁱ

Public Health Units and Tobacco Control Area Networks

Under the Ontario Public Health Standards,⁷ public health units (PHUs) are required to do a number of activities related to the area of protection, including: educating the public, workers, workplaces and retail establishments about the dangers of secondhand smoke; working with local workplaces and municipalities to influence and support the development of smoke-free policies; increasing public awareness through communication strategies; and implementing and enforcing the *Smoke-Free Ontario Act* and the *Electronic Cigarette Act*.

ⁱ Steven Savvaids, Senior Manager, Program Training and Consultation Centre, Personal Communication, September 19, 2016.

The seven Tobacco Control Area Networks (TCANs), regional groupings of one to nine neighbouring PHUs, have a mandate to provide leadership, coordination and collaborative opportunities centered on protection (as well as other Strategy goals). PHU and TCAN staff are actively involved in the Protection and Enforcement Task Force, Communities of Practice and committees to represent the local level in the planning of protection policy and interventions. Please refer to the Interventions Section for information about local PHU initiatives.

Smoking and Health Action Foundation

In 2015/16, Smoking and Health Action Foundation (SHAF) supported developments in municipal legislation related to protection with an emphasis on policy analysis provisions to further develop tobacco control policies in the Province (e.g., multi-unit housing, waterpipe use). The online [Smoke-free Laws Database](#), which includes the identification of leading edge bylaws and bylaws that exceed the *Smoke-Free Ontario Act*, received 70,500 visits in 2015/16. SHAF also maintained a comprehensive list of no-smoking policies implemented by all types of housing providers in Ontario.⁸

SHAF contributed to building protection capacity in 2015/16. Five workshops and 82 consultations were held on issues related to protection including smoke-free multi-unit housing, smoke-free outdoor spaces and concerns about e-cigarettes and waterpipes. As the Chair of Smoke-Free Housing Ontario—a coalition of partners (PHUs, health agencies)—SHAF maintained and regularly updated the [Smoke-Free Housing Ontario](#) website, which had 64,600 visits in 2015/16. In addition, SHAF responded to 149 Ontario-specific inquiries from the general public regarding secondhand smoke in multi-unit housing, in workplaces and other public places.

Youth Advocacy Training Institute

The Ontario Lung Association's Youth Advocacy Training Institute (YATI) provides training to youth and adults—including skill-building, resources and tools—to empower these groups to positively affect change in their communities by promoting tobacco-free and healthy lifestyles. In 2015/16, YATI training sessions included information on policy development, advocacy and creating effective health promotion campaigns, all of which could be applied to smoke-free initiatives. In total, 35 general trainings and 11 partnership trainings were conducted in 2015/16 reaching 546 youth and 606 adults.⁹

Protection Interventions

Smoke-Free Ontario Act

Much of the activity in protection is centered on the *Smoke-Free Ontario Act (SFOA)*, a key piece of legislation in the Province's protection strategy that contributes to the knowledge/awareness and compliance paths of the protection logic model.

On May 31, 2006, the smoke-free provisions of the *SFOA* came into force, prohibiting smokingⁱⁱ in workplaces and enclosed public places such as restaurants, bars, casinos and common areas of multi-unit housing. The *SFOA* bans indoor designated smoking rooms and designated smoking areas with some exceptions.

Before the *SFOA* came into force, nine out of ten Ontarians were covered by local smoke-free restaurant and bar bylaws (91% and 87%, respectively).¹⁰ However, more than half of these bylaws (54%) allowed for designated smoking rooms.

The *SFOA* permits smoking exceptions for residents of residential-care, psychiatric and veterans' facilities where controlled smoking rooms are established. The *SFOA* entitles home healthcare workers to request no smoking in clients' homes while providing healthcare.

In an amendment to the *SFOA*, Ontario banned smoking in vehicles with children under the age of 16 effective January 21, 2009, with a fine of \$125 for each offence.

Additional regulations banning smoking on all restaurant and bar patios, within 20 metres of playgrounds and within 20 metres of publically-owned sports fields and surfaces (e.g., areas for basketball, baseball, soccer or beach volleyball, ice rinks, tennis courts, etc.) went into effect January 1, 2015.¹¹ The new smoking prohibitions compliment the patchwork of municipal-level patio, playground and recreation field policies across the Province. Before the new outdoor regulations came into force, two-thirds of Ontarians were covered by local smoke-free playground, sports and recreational field bylaws (67% each) and 10% of Ontarians were covered

ⁱⁱ Regulations extend to the smoking of tobacco in waterpipes.

by a complete smoke-free restaurant and bar patio local bylaw.ⁱⁱⁱ

Further regulations banning smoking on the outdoor grounds of all hospitals and psychiatric facilities and within nine metres of entranceways to Ontario Government office buildings came into effect January 1, 2016. A provision allowing an outdoor designated smoking shelter on hospital grounds until January 1, 2018 was included in the regulations. Smoking continues to be banned 9 metres from the entranceways of long-term care facilities and independent health facilities.¹²

SFOA Enforcement

The MOHLTC's Tobacco Compliance Protocol applies a continuum of progressive enforcement actions—starting with education and progressing from warnings to increasingly more serious charges to match the nature and frequency of contraventions under the *SFOA*.¹³

The Province's 36 PHUs actively enforce the smoke-free provisions of the *SFOA* through complaint-driven inspections of enclosed workplaces and public places and outdoor public places. In 2015, enforcement staff conducted 12,716 enclosed workplace and public place inspections, 6,267 restaurant and bar inspections, 1,037 playground inspections, and 708 sports field inspections across the Province. At the time of the inspection, compliance was highest for restaurant and bar patios (96%), followed by enclosed workplace and public places (78%), sports fields (70%) and playgrounds (64%).¹⁴

Electronic Cigarettes Act

In May 2015, Ontario passed the *Electronic Cigarettes Act (ECA)* that extends the current tobacco smoking prohibitions in the *Smoke-Free Ontario Act* to e-cigarette use. This legislation is not yet proclaimed. When proclaimed, the use of an e-cigarette will be prohibited in enclosed public places, vehicles with children under the age of 16 present, enclosed workplaces and work vehicles, and on restaurant and bar patios, children's playground, sporting surfaces and outdoor hospital grounds.^{15,16}

ⁱⁱⁱ Municipalities with playground, sports and recreational field and restaurant/bar patio bylaws were identified through the Non-Smoker's Rights Association Smoke-Free Laws Database. Population estimates for the identified municipalities were obtained from Statistics Canada 2011 Census Profiles. The proportion of the Ontario population covered by a pre-existing local bylaw was calculated by dividing the total municipal population estimates by the 2011 Ontario population.

Local Policy Initiatives

Local jurisdictions have the ability to extend protection beyond provincial legislation to other settings and the use of other forms of tobacco, including:

- Beaches
- Transit shelters
- Outdoor events
- Buffer zones around doorways and windows
- Trails
- Multi-unit housing
- Waterpipes
- E-cigarettes

As of November 2016, 61 jurisdictions had strengthened smoke-free municipal bylaws beyond settings and tobacco products covered by the *SFOA* or *ECA* ([Appendix, Table 5A-1 lists jurisdictions](#)).

Regarding waterpipes, establishments are in contravention of the *SFOA* if tobacco is used in the waterpipe, otherwise use is permitted (for instance, with flavoured herbal shisha). Determining the tobacco content of the shisha being smoked in waterpipes onsite can be difficult. Through amendments to the *SFOA*, PHU enforcement staff have the power to remove a sample of the shisha from an establishment to send for laboratory testing to assess tobacco content. In a recent study conducted in Toronto, air quality levels hazardous to human health were observed in indoor waterpipe venues regardless of whether tobacco or other non-tobacco shisha was being smoked.¹⁷

Nineteen jurisdictions have stepped up implementation and enforcement of regulations related to indoor and outdoor waterpipe use. Settings where waterpipe use is prohibited varies by jurisdiction, including:

- Enclosed workplaces and public places (Barrie, Bradford West Gwillimbury, Chatham-Kent, Orillia, Ottawa, Peel, Peterborough)

- Nine metres from doorways to public buildings (Chatham-Kent, Englehart, Kingsville, Niagara Region, Orillia, Renfrew County, Tecumseh, Town of Lasalle)
- Municipally-owned property (Casselman, Chatham-Kent, East Zorra-Tavistock, Mississauga, Ottawa, Peterborough, Renfrew County, Town of Essex)
- Outdoor recreation fields (Chatham-Kent, East Zorra-Tavistock, Hamilton, Niagara Region, Orillia, Ottawa, Peel, Tecumseh, Town of Lasalle)
- Parks (Casselman, Chatham-Kent, East Zorra-Tavistock, Hamilton, Kingsville, Niagara Region, Ottawa, Peterborough, Tecumseh, Town of Lasalle)
- Playgrounds (Casselman, Chatham-Kent, East Zorra-Tavistock, Hamilton, Niagara Region, Peel, Orillia, Ottawa);
- Licensed premises (Toronto)
- Licensed outdoor patios (Ottawa, Peel, Peterborough, Toronto)
- Outdoor markets (Ottawa)
- Beaches (Ottawa)
- Transit stops (Chatham-Kent, Niagara Region, Tecumseh)

All of the listed jurisdictions ban the use of waterpipes containing tobacco. However, the majority of the municipalities have further extended the waterpipe ban to include waterpipes containing any non-tobacco/nicotine substance (Barrie, Bradford West Gwillimbury, Casselman, Chatham-Kent, East Zorra-Tavistock, Kingsville, Orillia, Ottawa, Peel, Peterborough, Tecumseh, Toronto, Town of Essex, and Town of Lasalle).¹⁸

Other Local Interventions

Multi-Unit Housing

Some health units have focused attention on the issue of smoke-free multi-unit housing. As of November 2016, 239 multi-unit dwellings or non-profit housing corporations across 96 municipalities in Ontario had adopted or were in the process of adopting a 100% smoke-free policy.¹⁹

Beginning in 2015, the East TCAN began planning and implementing a young adult multi-unit housing social marketing campaign. The campaign aims to raise awareness and increase the demand for smoke-free housing amongst the young adult population in Eastern Ontario.

The [campaign's website](#) presents facts about secondhand smoke exposure in multi-unit housing, includes a petition to show support for increased smoke-free housing options, and a link to the smoke-free housing Ontario website with more information about how to take action if secondhand smoke is entering your apartment.^{iv}

2015 PanAm/Parapan Am Games

In the summer of 2015, Toronto hosted over 8,000 athletes for the international sporting event Pan Am/Parapan Am Games. Toronto Public Health worked closely with the organizing committee on the successful implementation of a smoke-free policy that banned the use of cigarettes, e-cigarettes, hookahs, snuff and chewing tobacco.^v

Post-Secondary Campus Policies

In 2015/16, Leave The Pack Behind (LTPB) worked with campuses to improve policy strength and enforcement centred on protection goals. The aim of this initiative, based on empirical evidence and past experience, is to achieve more obvious and consistent enforcement of smoking restrictions and bans through actions such as:

- Educating all students on tobacco policies
- Encouraging self- and peer-to-peer regulation
- Disseminating enforcement cards to smokers who fail to observe smoking restrictions²⁰
- Establishing concrete, actionable approaches for policy enforcement by appropriate campus personnel²¹

All campuses were engaged in some aspect of these actions, with advocacy work on five campuses directed toward stronger smoking restrictions.

LTPB's 2015/16 annual environmental scan of Ontario's 44 public universities and colleges revealed that all institutions banned smoking indoors (including residences) and about three-

^{iv} Andrea Kruz, Manager, Chronic Disease and Injury Prevention, Kingston, Frontenac and Lennox & Addington Public Health, Personal Communication, January 30, 2017.

^v Suzanne Thibault, Manager, Toronto Tobacco Control Area Network, Toronto Public Health, Personal Communication, November 17, 2016.

quarters (n=32/44) restrict smoking to specific outdoor designated areas positioned at least nine metres away from a building entrance.²² However, it appears that very few institutions formally address policy enforcement practices.

In 2015/16, LTPB continued to work with interested colleges and universities to develop, adopt and enforce progressive tobacco control policies. Humber College, Centennial College, University of Toronto (Mississauga and Scarborough) and Western University began work to enforce or enact designated smoking areas on campus. Sheridan College continued to work towards being 100% tobacco-free at all locations. Sheridan College also amended the current policy to restrict the use of e-cigarettes indoors and in undesignated areas. Niagara College also continues to explore the possibility of going tobacco-free. Currently there are no post-secondary schools in Ontario that completely ban smoking indoors and outdoors on campus.

Prevention and Cessation Interventions Contributing to Protection

Progress toward Strategy prevention and cessation goals is expected to result in fewer smokers in the Province.^{23,24,25,26} Reduced smoking can result in less exposure to secondhand smoke for nonsmokers and less social exposure to smoking. The Prevention and Cessation chapters of this report detail interventions and outcomes related to these Strategy goals.

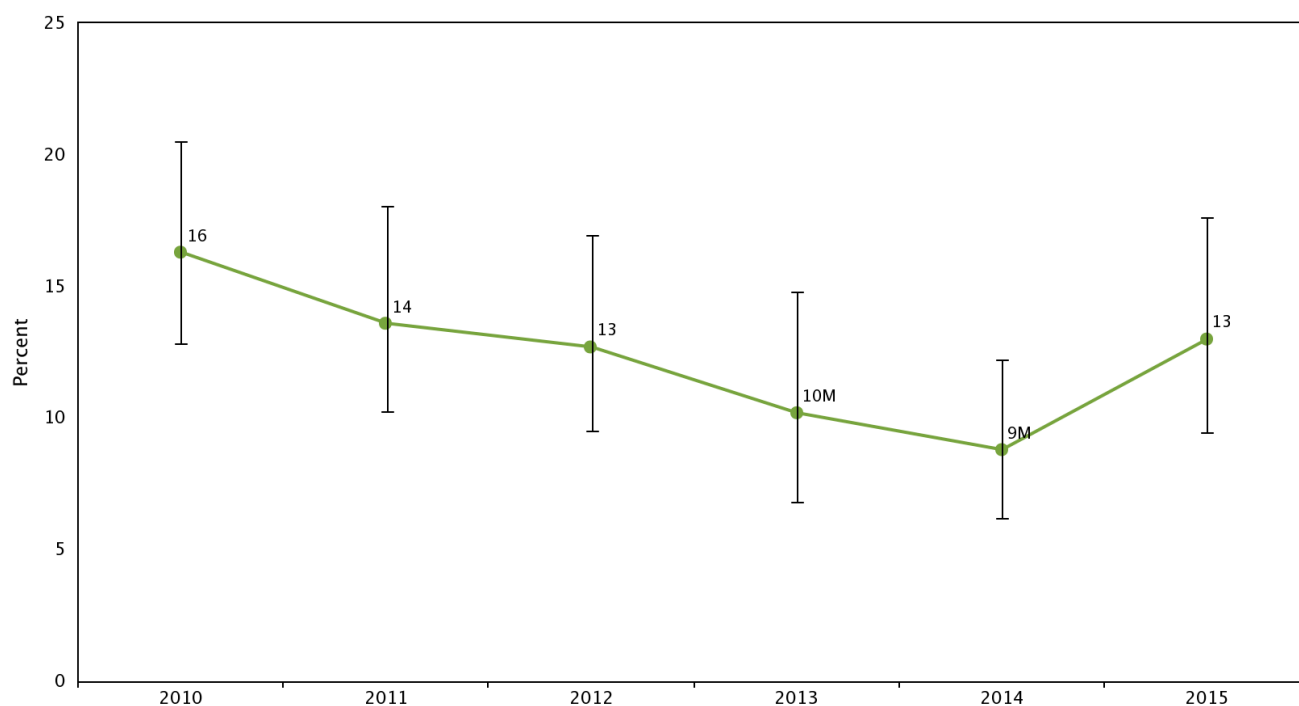
Protection Outcomes: Population Level

Workplace Exposure

The Strategy aims to eliminate indoor exposure to secondhand smoke. Smoking in enclosed workplaces has been banned since May 1, 2006.

- In 2015, 13% (or 843,200) of adult workers (aged 18 years or older) were exposed to secondhand smoke indoors at work or inside a work vehicle for five or more minutes in the past week (CAMH Monitor data), which is unchanged from 2014 (9%) and recent years (Figure 5-2).

Figure 5-2: Workplace Exposure (Past Week) Indoors or Inside a Work Vehicle, Ages 18+, Ontario, 2010 to 2015



Note: M = Interpret with caution: subject to moderate sampling variability. Vertical lines represent 95% confidence intervals. [Full data table for this graph provided in the Appendix \(Table 5A-2\)](#)

Source: Centre for Addiction and Mental Health Monitor (Full Year) 2010 –2015.

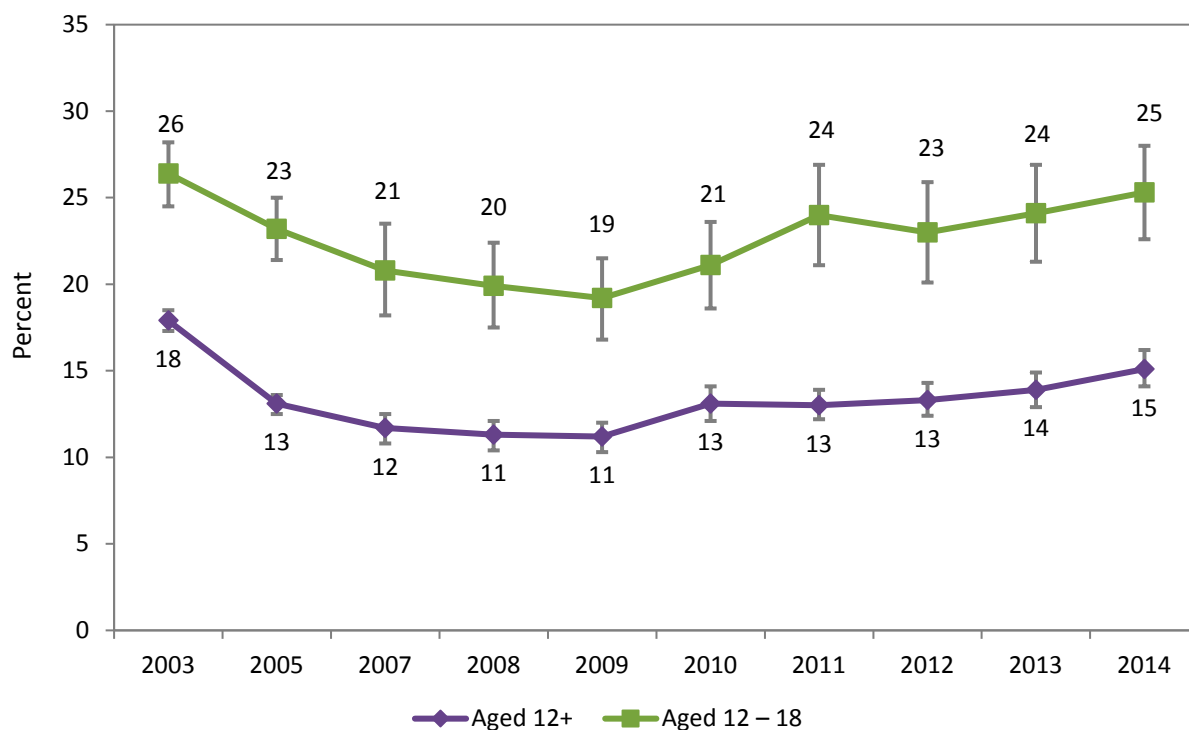
Exposure in Public Places

The Strategy aims to eliminate secondhand smoke exposure in enclosed public places and increase smoke-free regulation in outdoor public places. Smoking in enclosed public places has been banned since May 1, 2006. New *SFOA* outdoor regulations banning smoking on restaurant and bar patios, within 20 metres of publically-owned outdoor playgrounds, sports fields and surfaces came into effect January 1, 2015.

- In 2014,^{vi} 15% (or 1,442,000) of Ontarians aged 12 years and over were exposed to secondhand smoke every day or almost every day in public places (e.g., restaurants, bars, shopping malls and arenas) over the past month, which is similar to the level of exposure reported in 2013 (14%). The 2014 estimate represents a slight increase compared to the level of exposure reported in 2010 (13%; Figure 5-3; CCHS data).
- Among young nonsmokers aged 12 to 18, 25% (or 237,800) were exposed to secondhand smoke in public places in 2014, similar to what was reported both in 2013 (24%) and in 2010 (21%; Figure 5-3).
- Exposure among 12 to 18 year olds was significantly higher in 2014 compared to all Ontarians aged 12 years and older (25% vs. 15%).
- In 2013/14, exposure to secondhand smoke in public places among nonsmoking Ontarians aged 12 years and over ranged across the Province from a low of 8% in Chatham-Kent Health Unit to a high of 19% in Peel Regional Health Unit ([Appendix, Table 5A-4](#)).

^{vi} The 2015 Canadian Community Health Survey was unexpectedly delayed and was not available when this report was released.

Figure 5-3: Nonsmokers' Exposure to Secondhand Smoke in Public Places^a (Every Day or Almost Every Day), by Age, Ontario, 2003 to 2014



^a Exposure to secondhand smoke in public places, such as restaurants, bars, shopping malls, arenas, bingo halls and bowling alleys.

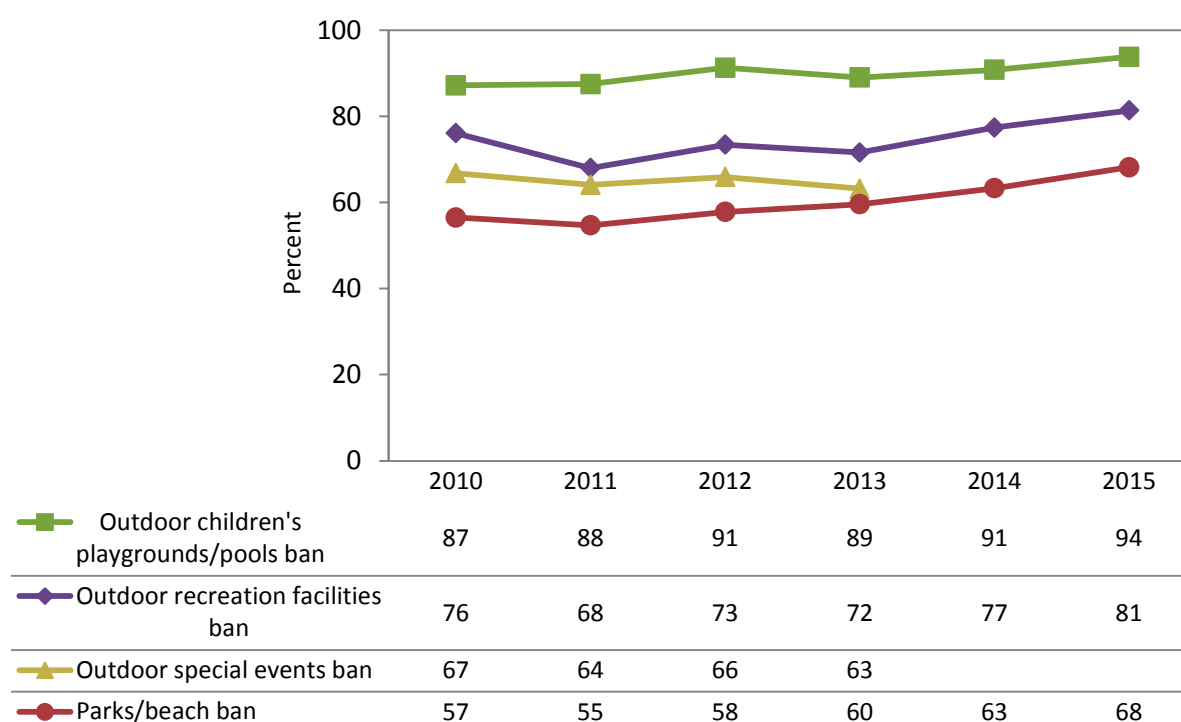
Note: Vertical lines represent 95% confidence intervals. X-axis scale (Year) not uniform—interpret with caution. [Full data table for this graph provided in the Appendix \(Table 5A-3\)](#)

Source: Canadian Community Health Survey 2003, 2005, 2007-2014.

Public Opinion about Smoking in Outdoor Public Places

- Among the general population, support for smoking bans in public parks and on beaches, at outdoor recreational facilities and outdoor playgrounds was unchanged from 2014 estimates; however support was significantly higher in 2015 compared to five years before in (2011)(Figure 5-4; CAMH Monitor data).
- Similar to 2014, fewer current smokers agreed in 2015 that smoking should be banned in public parks and on beaches (37%) or near outdoor recreation facilities (such as sports fields, stadiums and entrances to arenas, 60%) compared to former smokers (64% and 82%, respectively) and never-smokers (77% and 86%, respectively; Figure 5-5).
- Support for banning smoking at outdoor children's playgrounds and wading pools was high at 94% among all respondents (Figure 5-4). Similar levels of support were reported among never smokers (95%), former smokers (95%) and current smokers in 2015 (84%; Figure 5-5).

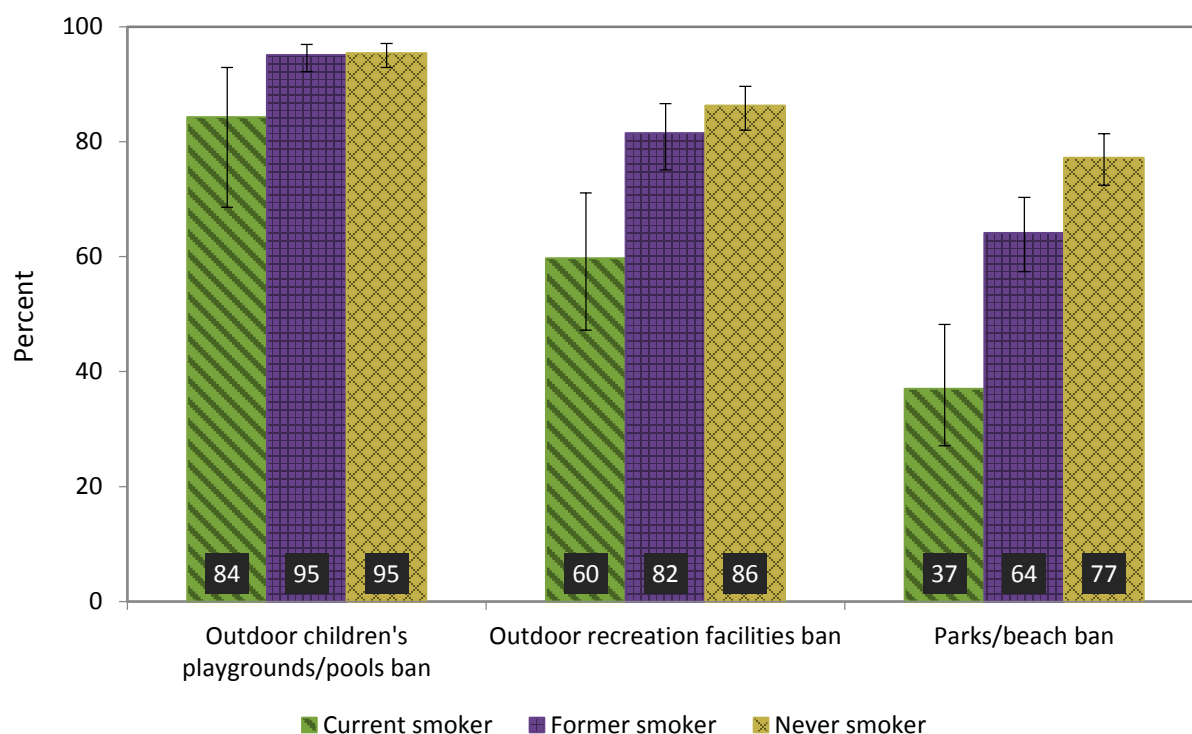
Figure 5-4: Agreement that Smoking Should be Banned in Playgrounds, Recreation Facilities, Outdoor Special Events and Parks, Ages 18+, Ontario, 2010 to 2015



Note: Public opinions related to smoking bans at outdoor special events were not collected in 2014 and 2015. [Full data table for this graph provided in the Appendix \(Table 5A-5\)](#)

Source: Centre for Addiction and Mental Health Monitor (Full Year) 2010-2015.

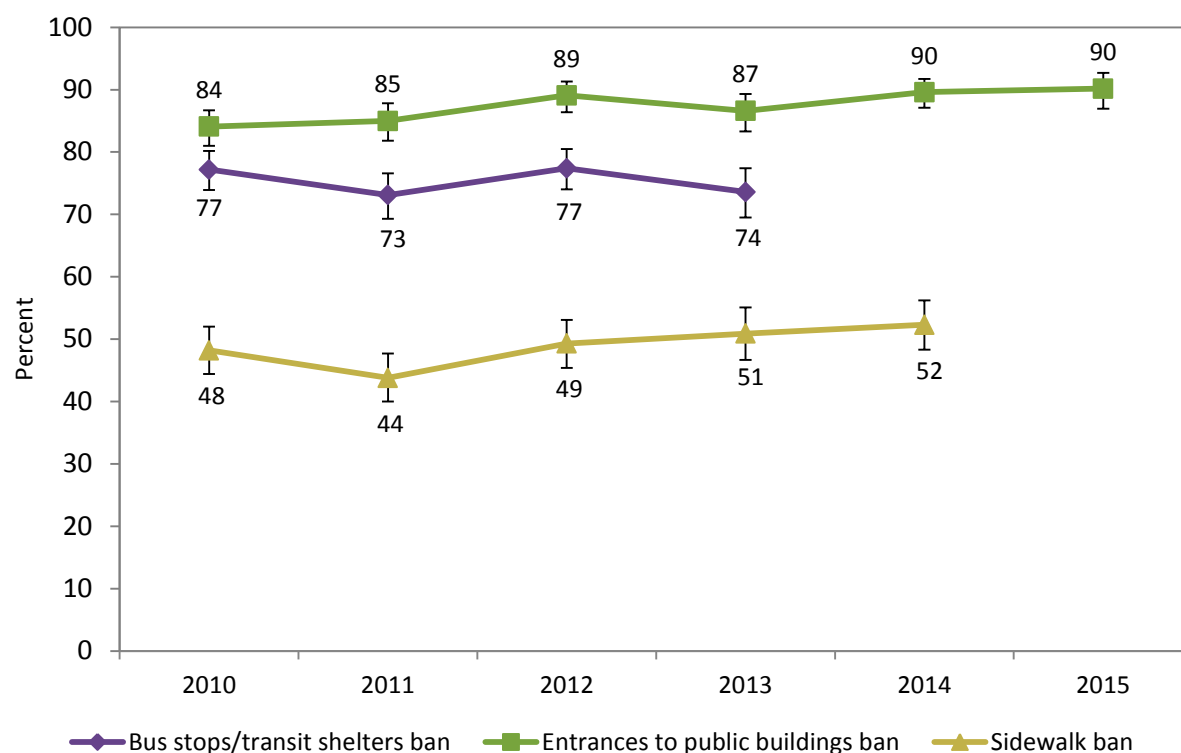
Figure 5-5: Agreement that Smoking Should be Banned in Playgrounds, Recreation Facilities and Parks, by Smoking Status, Ages 18+, Ontario, 2015



Note: Vertical lines represent 95% confidence intervals. [Full data table for this graph provided in the Appendix \(Table 5A-6\)](#)
 Source: Centre for Addiction and Mental Health Monitor (Full Year) 2015.

- In 2015, public support for smoking bans at entrances to public buildings was similar to 2014 estimates, yet the 2015 estimates were significantly higher compared to 2011 (90% in 2015 vs. 85% in 2011). In contrast, public support for smoking bans on public sidewalks and bus stops/transit shelters has remained unchanged since 2011 (sidewalks: 52% in 2015 vs. 44% in 2011; bus shelters 74% in 2013 vs. 73% in 2011; Figure 5-6; CAMH Monitor data).
- In 2015, fewer current smokers agreed that smoking should be banned at entrances to public buildings (74%) compared to former smokers (91%) or never-smokers (94%; data not shown).

Figure 5-6: Agreement that Smoking should be Banned on Sidewalks, Entrances and Bus Stops, Ages 18+, Ontario, 2010 to 2015



Note: Vertical lines represent 95% confidence intervals; Public opinions related to smoking bans at bus stops and transit shelters were not collected in 2014 and 2015; Public opinions related to smoking bans on sidewalks were not collected in 2015. [Full data table for this graph provided in the Appendix \(Table 5A-7\)](#)

Source: Centre for Addiction and Mental Health Monitor (Full Year) 2010-2015.

Public Opinion about Smoking on Restaurant and Bar Patios

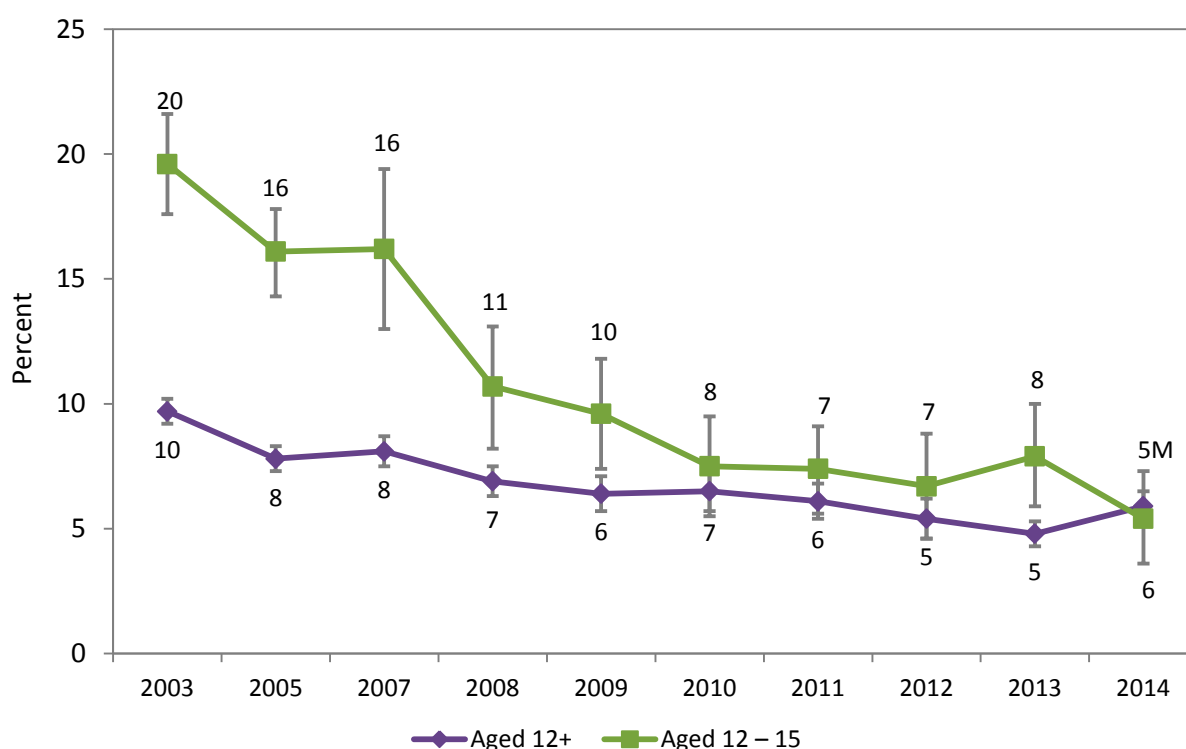
- In 2015, 72% of Ontario adults (including 81% of never-smokers) agreed that smoking should be banned on outdoor patios of restaurants and bars. This is unchanged from 2014 levels (67%), but significantly higher than in 2011 (57%; CAMH Monitor data, data not shown). Ontario's regulation banning smoking on patios came into effect in 2015.

Exposure in Vehicles

The Strategy aims to reduce secondhand smoke exposure in vehicles, with particular emphasis on protecting children and youth. Since January 2009, smoking in vehicles with children under the age of 16 has been banned.

- Among nonsmoking Ontarians aged 12 years and over, exposure to secondhand smoke every day or almost every day in vehicles over the past month was significantly higher in 2014 (6% or 561,700 Ontarians) than in 2013 (5%; Figure 5-7; CCHS data).
- In 2014, exposure to secondhand smoke in vehicles among young nonsmokers aged 12 to 15 was 5% (or 32,600 Ontarians), unchanged from 2013 (8%) and five years earlier in 2010 (8%; Figure 5-7).
- Exposure among youth 12 to 15 years old was similar to all Ontarians aged 12 years and older in 2014 (5% vs. 6%).
- In 2013/14, exposure to secondhand smoke in private vehicles among nonsmoking Ontarians aged 12 years and over ranged across the Province from a low of 4% in Elgin-St. Thomas Health Unit to a high of 14% in Huron County Health Unit ([Appendix, Table 5A-9](#))

Figure 5-7: Nonsmokers' Exposure to Secondhand Smoke in Vehicles (Every Day or Almost Every Day), by Age, Ontario, 2003 to 2014



Note: M = Interpret with caution: subject to moderate sampling variability. Vertical lines represent 95% confidence intervals. X-axis scale (Year) not uniform—interpret with caution. [Full data table for this graph provided in the Appendix \(Table 5A-8\)](#)

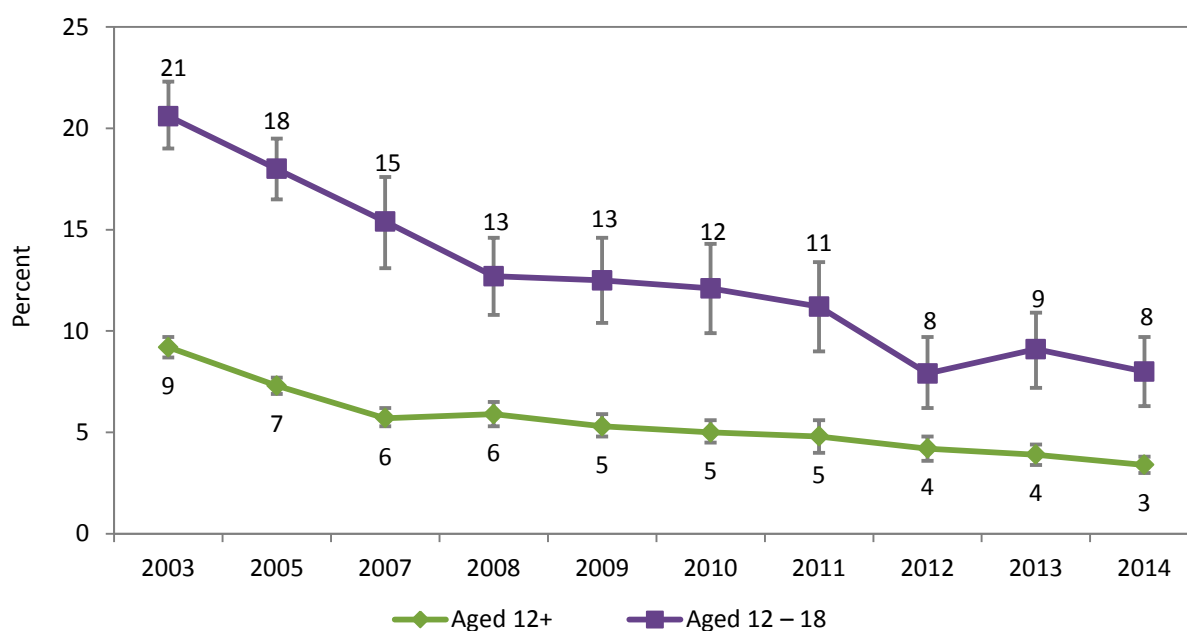
Source: Canadian Community Health Survey 2003, 2005, 2007-2014.

Household Exposure

One general objective of tobacco control is to increase the adoption of voluntary policies to make homes smoke-free.

- In 2014, 3% (or 322,500) of nonsmoking Ontarians aged 12 years and older were exposed to secondhand smoke in their home every day or almost every day, which is unchanged from 2013 (4%). However this represents a significant decrease in level of exposure compared to 2010 (5%; Figure 5-8; CCHS data).
- Among 12 to 18 year old nonsmokers, 8% (or 86,900 Ontarians) were exposed to secondhand smoke in their home in 2014, which is more than double the exposure reported by all respondents aged 12 and over (3%). Respondents aged 12 to 18 had a similar level of exposure in 2013 (9%), but the 2014 level of exposure was significantly lower compared to levels reported in 2010 (12%).
- In 2013/14, exposure to secondhand smoke in the home among nonsmoking Ontarians aged 12 years and over ranged from a low of 2% in Halton Regional Health Department to a high of 9% in Huron County Health Unit ([Appendix, Table 5A-11](#)).

Figure 5-8: Nonsmokers' Exposure to Secondhand Smoke at Home (Every Day or Almost Every Day), by Age, Ontario, 2003 to 2014



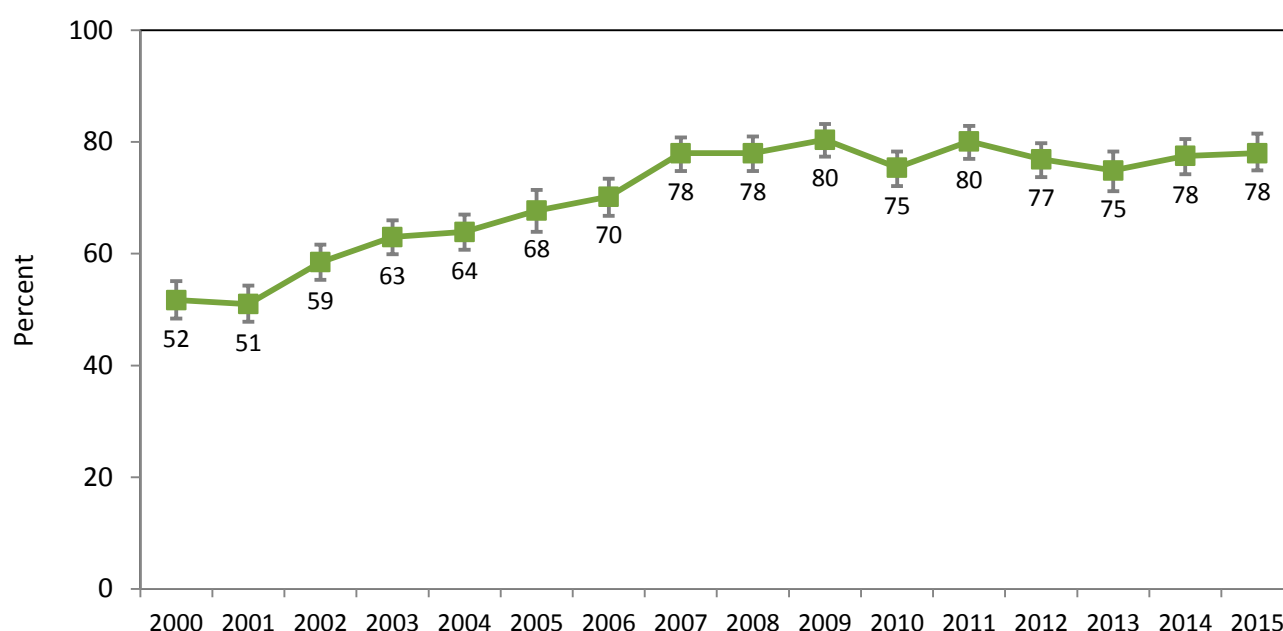
Note: Vertical lines represent 95% confidence intervals. X-axis scale (Year) not uniform—interpret with caution. [Full data table for this graph provided in the Appendix \(Table 5A-10\)](#)

Source: Canadian Community Health Survey 2003, 2005, 2007-2014.

Public Opinion about Smoking in Homes with Children

- In 2015, three-quarters of respondents (78%) agreed that there should be a law that parents cannot smoke inside their home if children are living there. This rate has held steady since 2007 and is significantly higher than the level of agreement reported in 2006 (70%) and earlier (Figure 5-9; CAMH Monitor data).

Figure 5-9: Agreement That There Should Be a Law that Parents Cannot Smoke Inside their Home if Children are Living There, Ages 18+, Ontario, 2000 to 2015



Note: Vertical lines represent 95% confidence intervals. [Full data table for this graph provided in the Appendix \(Table 5A-12\)](#)

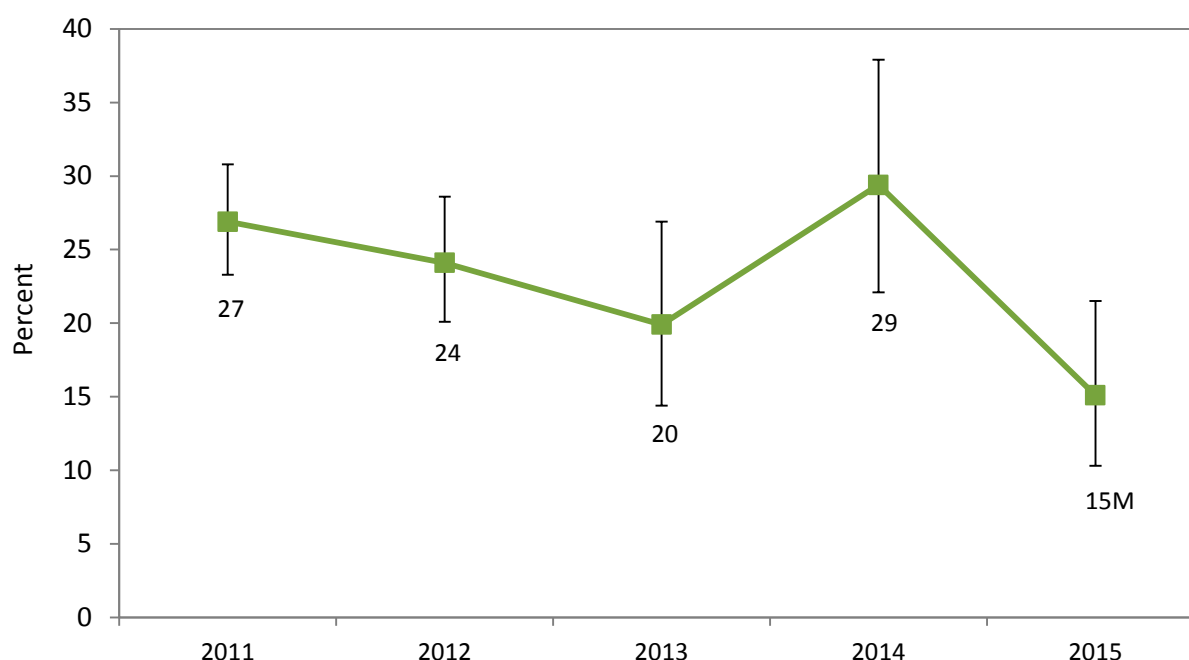
Source: Centre for Addiction and Mental Health Monitor 2000–2009 (half year sample); 2010–2015 (full year sample)

Exposure in Multi-Unit Housing

One general objective of tobacco control is to increase smoke-free regulation in multi-unit housing.

- In 2015, 15% of Ontario adults living in multi-unit dwellings (or 287,100) were exposed to secondhand smoke drifting between units at least once in the past month. In 2014, 29% of adults living in multi-unit dwellings (or 689,500) were exposed to secondhand smoke drifting between units at least once a month, similar to the proportion three years before (27% in 2011). The 2015 estimate is much lower (15%), but of questionable validity due to moderate sampling variability (Figure 5-10; CAMH Monitor data).

Figure 5-10: Exposure to Secondhand Smoke in Multi-Unit Dwellings (Past Month), 18+, Ontario, 2011 to 2015



Note: M = Interpret with caution: subject to moderate sampling variability. Vertical lines represent 95% confidence intervals. [Full data table for this graph provided in the Appendix \(Table 5A-13\)](#)

Source: Centre for Addiction and Mental Health Monitor (Full Year) 2011-2015

Public Opinion about Smoking in Multi-Unit Housing

- Four out of five adults in Ontario (83%) believed that smoking should not be allowed inside multi-unit dwellings including apartment buildings, rooming houses and retirement homes in 2015. The level of support has increased significantly since 2006 (83% vs. 73%, respectively; CAMH Monitor data, data not shown).

Risk Perception about Secondhand and Thirdhand Smoke

In 2015, 88% of adults in Ontario believed that exposure to secondhand smoke posed a moderate or great risk of physical or other harm, which is unchanged from 2014 (88%). Two-thirds of adults in Ontario (64%) believed thirdhand smoke posed a moderate or great risk of physical or other harm, representing a significant increase from 2014 (55%; CAMH Monitor data, data not shown).

MPOWER Comparison with Ontario: Protection

Three MPOWER indicators²⁷ relate to Protection: Monitoring, Smoke-Free Policies and Smoke-Free Policy Enforcement (Table 5-1).

Table 5-1: Assessing Protection: MPOWER Indicators Applied to Ontario

MPOWER Indicator	Highest MPOWER Requirement	Situation in Ontario
Monitoring	Recent, representative and periodic data for both adults and youth	Meets the requirement for the highest score
Smoke-free policies	All indoor public places completely smoke-free	Meets the requirement for the highest score
Smoke-free policy compliance	Complete compliance by experts' assessments	Meets the requirement for the highest score

Scientific Advisory Committee: Overview of Protection Goals and Recommendations

The Scientific Advisory Committee (SAC)^{vii} goal for Protection is: “To protect Ontarians from all physical and social exposure to tobacco products.” The 2010 SAC report includes several recommendations to achieve this protection goal including action on smoke-free policies, media and social marketing, social action, smoke-free compliance and enforcement, learning system and professional development (summary below). Progress has been made in many of these areas, but work remains to address several shortcomings (e.g., multi-unit housing) and to increase intensity of interventions (e.g., media and social marketing interventions and professional development activities that facilitate the protection of nonsmokers, especially children and pregnant women).

^{vii} Upon request of the Ontario Ministry of Health Promotion and Sport, a committee of lead tobacco control researchers in Ontario was convened to provide scientific and technical advice and recommendations to the Government of Ontario to inform the comprehensive tobacco control strategy renewal for 2010-2015.

2010 Scientific Advisory Committee Recommendations

Smoke-free Policies

SAC Recommendation 6.1: Amend the *Smoke-Free Ontario Act* and Regulation to eliminate smoking of tobacco products and combustible water-pipe preparations in priority settings including: [a] Unenclosed restaurant and bar patios (including nine metres from the perimeter of the patio). [b] Not-for-profit MUDs. [c] Selected outdoor public places such as doorways to public and commercial buildings (within nine metres), transit shelters, provincially regulated parks and playgrounds, outdoor sports facilities, beaches, sidewalks and public events such as parades and outdoor entertainment venues. [d] Hotels, motels, inns and bed and breakfasts. [e] Vehicles that carry nonsmokers at any time.

Current Status: Comprehensive provincial legislation on protection exists; including new regulations that prohibit smoking on bar and restaurant patios, playgrounds, public sports fields and surfaces and outdoor grounds of hospitals. New provincial legislation will also prohibit the use of e-cigarettes in certain places where the smoking of tobacco is prohibited.

Other recommended priority settings not addressed at provincial level, including 9 metres perimeter from patios. Various smoke-free policies implemented at the local and regional level.

No action on protection from combustible waterpipe preparations.

Media and Social Marketing

SAC Recommendation 6.2: As part of a comprehensive tobacco control program, implement media and social marketing strategies that increase public awareness and knowledge of the health effects of exposure to secondhand smoke and social exposure to tobacco use and that influence social norms supportive of tobacco-free living.

Current Status: No provincial action.

Social Action

SAC Recommendation 6.3: Develop a province-wide program to enable implementation of grassroots local action initiatives (e.g., partnerships, community mobilization and innovative interventions) that address social norm change and protection from exposure to tobacco smoke.

Current Status: No province-wide program specific to protection. Various programs at the local and regional level.

Smoke-free Compliance and Enforcement

SAC Recommendation 6.4: Continue to promote, enforce and monitor compliance with the *Smoke-Free Ontario Act*. Consider enforcement approaches to maximize compliance and enforcement activities by setting (e.g., schools, bars, etc.) and additional policy promotion.

Current Status: Comprehensive legislation on protection promoted and enforced.

In 2015, enforcement was improved to address indoor use of tobacco in waterpipe bars and restaurants, to expand the seizure authority of *SFOA* inspectors and to update rights of entry for inspectors.

Learning System

SAC Recommendation 6.5: Continue to support research, surveillance, evaluation and monitoring of provincial and local initiatives, program and policy experiments related to protection from exposure to tobacco products and social norm change. Enhance the capacity to use findings to foster learning and innovation at the provincial, regional and local levels.

Current Status: Provincial monitoring conducted by OTRU.

Regional projects run by TCANs and PHUs, with OTRU providing knowledge and evaluation support.

Professional Development

SAC Recommendation 6.6: Develop, evaluate and implement guidelines, training programs and incentives to promote brief interventions by health professionals with their patients that aim to protect nonsmokers, especially children and pregnant women, from secondhand smoke.

Current Status: TEACH includes a training module on interventions to help women, including pregnant and post-partum, to quit smoking. This content includes information on protecting pregnant women and children from secondhand smoke. Otherwise, there has been no action to promote brief interventions designed to protect nonsmokers from secondhand smoke.

Chapter Summary

Ontario meets all of the requirements for the highest level of protection included in MPOWER, in that smoking tobacco is prohibited in all indoor public places and compliance is high. Yet, Ontarians continue to be exposed to secondhand smoke in a variety of settings. Fifteen percent of the population continues to be exposed in public places; 13% of workers are exposed to secondhand smoke indoors at work or inside a workplace vehicle; 8% of nonsmokers aged 12 to 18 are exposed in their home and 5% of nonsmokers aged 12 to 15 are exposed in vehicles.^{viii}

The US Surgeon General's review of scientific evidence concluded that there is no risk-free level of exposure to secondhand smoke. In addition to the adverse health effects of secondhand smoke, exposure to other people smoking results in social exposure to tobacco use with ensuing normalization of tobacco use, triggering of initiation in youth and young adults through processes of social influence and modeling and encouragement of the continued use of tobacco among smokers and relapse among quitters.^{28,29}

The 2010 Scientific Advisory Committee recommended possible next steps to offer further protection for Ontarians including eliminating smoking and the use of combustible waterpipe in priority settings, specifically unenclosed bar and restaurant patios, not-for-profit multi-unit housing and selected outdoor public settings (e.g., beaches, playgrounds, outdoor sports facilities, parks, transit shelters, doorways, etc.). Recent regulatory changes implemented by the Government of Ontario have closed many of the gaps in regulating outdoor smoking, while a growing number of municipalities have closed other gaps in outdoor smoking and waterpipe use in regulated areas. Further policy implementation is needed at the provincial level to protect all Ontarians from the remaining exposures to secondhand smoke.

^{viii} The SFOA prohibits smoking or having lighted tobacco in a motor vehicle if children under the age of 16 are inside the vehicle.

Visual Summary of Key Protection Indicators

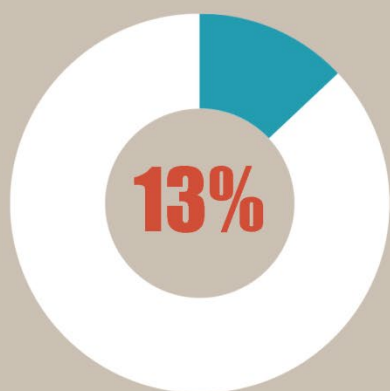


Number of multi-unit dwellings or housing corporations across Ontario that have a 100% smoke-free policy



15%

of adults living in multi-unit dwellings were exposed to secondhand smoke drifting between units at least once in the past month



of adult workers were exposed to secondhand smoke at work (indoors or inside a work vehicle)



of youth were still exposed to secondhand smoke inside cars

9 in 10



adults believed that secondhand smoke exposure posed a risk to health

6 in 10



adults believed that thirdhand smoke exposure posed a risk to health

Appendix: Data Tables

Table 5A-1: NSRA's Smoke-Free Laws Database: Leading Edge Bylaws, Ontario (November 2016)

Name of Jurisdiction	Legislation and Bylaw Name	Date Passed (dd/mm/yyyy)	Date Last Amended
Arnprior	Bylaw No. 6076-12, Regulation of Smoking on Municipally-Owned Property & Public Places in the Town of Arnprior	09/04/2012	
Barrie	By-law 2013-143, A By-law of The Corporation of the City of Barrie to prohibit the use of waterpipes in enclosed public places and in enclosed workplaces.	26/08/2013	
Barrie	Bylaw No. 2009-086, A Bylaw to Prohibit Smoking Outdoors on City Owned Property Bylaw No. 2011-106, An amendment to Bylaw No. 2009-086, A Bylaw to Prohibit Smoking Outdoors on City Owned Property	11/05/2009	15/08/2011
Bradford West Gwillimbury	By-law 2013-87 - A By-law to Prohibit the Use of Waterpipes in Enclosed Public Places and in Enclosed Workplaces	03/09/2013	
Brighton	By-Law No. 007-2014, Being a By-Law to regulate and prohibit all tobacco use on municipally owned parkland property in the Municipality of Brighton	03/03/2014	
Brockville	By-law Number 093-2003, Being a By-law to Regulate Smoking in Public Places	22/07/2003	28/04/2015
Casselman	Smoking By-law within Municipal Properties 2016-030	10/05/2016	
Chatham-Kent	Bylaw 137-2014, being a by-law to regulate smoking of tobacco or tobacco-like products on lands within the Municipality of Chatham-Kent ("Smoke-Free Chatham-Kent By-law")	11/08/2014	
Cobalt	Bylaw No. 2012-003, Being a Bylaw to Regulate Smoking in the Town of Cobalt: Smoking on Municipal Property; and Smoking in Workplace Entrances and Exits; and the Sale of Tobacco Products through Licensing Requirements Also known as Bylaw No. 2012-003, Smoke-free and Tobacco Control Bylaw	10/01/2012	
Cobourg	By-law No.019-2015, a By-law to Prohibit Smoking and the Use of Tobacco Products in Public Places in the Town of Cobourg	23/02/2015	16/04/2015
Cochrane	Bylaw No. 989-2013, Being a bylaw to regulate smoking on Tim Horton's Event Centre property within the Town of Cochrane	10/12/2013	
Cramahe	By-law No. 2014-06, Being a By-law to prohibit smoking and the use of all tobacco products within Municipal Playgrounds or nine (9) meters of any entrance ways surrounding Municipal Buildings.	04/03/2014	
East Gwillimbury	By-Law 2012-029, Being a by-law to prohibit smoking and holding of lit tobacco products at all town playgrounds, sports fields, splash pads and other designated spaces	19/03/2012	
East Zorra-Tavistock, Township of	By-Law #2015-36, Being a By-Law to prohibit smoking at any township facility and to repeal By-law #2012-15	16/09/2015	
Elliot Lake	Bylaw No. 03-4, A Bylaw to Regulate Smoking in Public Places and Workplaces	11/05/2009	

Name of Jurisdiction	Legislation and Bylaw Name	Date Passed (dd/mm/yyyy)	Date Last Amended
Englehart	Bylaw No. 2012-06, Smoke-Free and Tobacco Control By-Law	23/04/2012	
Essa, Township of	Bylaw No. 2011-62, A Bylaw of the Corporation of the Town of Essa to prohibit smoking outdoors on Township owned property	19/10/2011	
Essex, Town of	By-Law Number 1228, being a by-law to prohibit smoking on any property owned or leased by the Town of Essex	06/10/2014	
Georgina	Bylaw No. 2012-0061 (Reg-1), Being a By-law to prohibit smoking and use of tobacco products at all designated Town of Georgina outdoor areas	25/06/2012	
Gravenhurst	Smoke Free Outdoor Spaces By-law 2012-149, Being a By-Law to prohibit smoking outdoors on property owned by the Town of Gravenhurst	18/12/2012	
Hamilton	By-law No. 11-080, To Prohibit Smoking within City Parks and Recreation Properties	09/03/2011	
Huron County	Bylaw No. 21, 2003, A Bylaw of the Corporation of the County of Huron to Regulate Smoking in Public Places and Workplaces in Huron County and to Repeal Bylaw No. 9, 2003.	04/09/2003	
Huron Shores	Bylaw No. 04-06, Being a Bylaw to Regulate Smoking in Public Places and Workplaces	11/02/2004	
Innisfil	By-Law 111-13, A By-Law of The Corporation of the Town of Innisfil to Prohibit Smoking and Use of Tobacco Products at all designated Town of Innisfil Outdoor Sports and Recreational Spaces.	16/10/2013	
Kingston	Bylaw No. 2002-231, A Bylaw to Regulate Smoking in Public Places and Workplaces in the City of Kingston - as amended by Bylaw No. 2004-336 (Consolidated) By-Law No. 2012-150, A By-Law to Amend By-Law No. 2002-231, "A By-Law to Regulate Smoking in Public Places and Workplaces in the City of Kingston as Amended"	22/10/2002	06/11/2012
Kingsville, Town of	Bylaw 96-2016, Being a Bylaw to Prohibit Smoking in Public Places Within the Town of Kingsville	11/10/2016	
Kirkland Lake	Bylaw 13-072, Being a Bylaw to Prohibit Smoking in Children's Playgrounds and on Joe Mavrinac Community Complex Property Within Town of Kirkland Lake	13/08/2013	
Lasalle, Town of	By-Law Number 7775, Being a By-Law to Prohibit Smoking within Town of Lasalle Owned Parks, Facilities, Playgrounds and Sports Fields	14/07/2015	
Mattawa	Bylaw No. 08-25, Smoke-free Hospital Bylaw Bylaw No. 09-20, Being a Bylaw to amend Bylaw No. 08-25 By-Law No. 13-22, Being a By-Law to Regulate Smoking in Public Places and Workplaces Smoke Free Hospital By-Law	10/11/2008	09/12/2013
Mississauga	The Corporation of The City of Mississauga Smoking By-Law 94-14 A bylaw to prohibit smoking tobacco-based products (including waterpipe) anywhere on Mississauga Celebration Square. Amended by By-Law 180-15.	23/04/2014	24/07/2015
Napanee, Greater	By-Law No. 03-05, Being a By-law to Regulate Smoking in Public Places and Workplaces in the Town of Greater Napanee	24/02/2003	
Newmarket	Bylaw 2011-73, A Bylaw to prohibit smoking of tobacco products at all town playgrounds, sports and playing fields and other outdoor youth	28/11/2011	

Name of Jurisdiction	Legislation and Bylaw Name	Date Passed (dd/mm/yyyy)	Date Last Amended
	related spaces.		
Newmarket	By-Law Number 2009-24, A bylaw to prohibit smoking in Sunnyhill Park	30/03/2009	
Niagara Falls	A Consolidated Bylaw Being By-law No. 2011 - 51 as amended by: By-law No. 2011 - 152 (The Anti-Smoking Bylaw)	18/04/2011	
Niagara Region	By-law No. 112-2013, A regional by-law to protect children and vulnerable persons from exposure to outdoor second-hand smoke	13/10/2013	
North Bay	Bylaw No. 2012-97, A By-Law to Regulate Smoking in Public Places and Workplaces in the Corporation of the City of North Bay (and to Repeal By-Law No. 2003-05) Bylaw 2012-232, A By-Law to Amend By-Law No. 2102-97 (Schedules "A" and "D").	19/03/2012	02/07/2014
Orangeville	Bylaw No. 36-2012, A by-law to regulate and prohibit smoking at all municipally owned/operated public places (Smoke-Free Municipal Public Spaces Bylaw)	07/05/2012	
Orillia	Chapter 953, Smoking Regulation, Public Places and Workplaces	17/12/2001	10/06/2013
	Latest amending bylaw was Bylaw 2013-85.		
Ottawa	Bylaw No. 2004-276, A by-law of the City of Ottawa to regulate and to promote responsible enjoyment and use of parks and facilities (Parks and Facilities Bylaw) Bylaw No. 2006-6, A Bylaw of the City of Ottawa to amend Bylaw No. 2004-276 respecting smoking in the vicinity of a City facility Bylaw No. 2012-86, A bylaw of the City of Ottawa to amend Bylaw No. 2004-276 to prohibit smoking in city parks and facilities	23/06/2004	27/06/2012
Ottawa	Bylaw No. 2012-47, A bylaw of the City of Ottawa to amend Bylaw No. 2008-449 to create smoke-free market stands in the ByWard Market	01/03/2012	
Ottawa	Waterpipes in Public Places and Workplaces Bylaw, a Bylaw to Amend Bylaw No. 2012-46, A bylaw of the City of Ottawa to amend Bylaw No. 2008-448 to create smoke-free market stands in the Parkdale Market	01/03/2012	31/08/2016
Ottawa	Water Pipes in Public Places and Workplaces Bylaw, A Bylaw to Amend Bylaw No. 2012-85, A bylaw of the City of Ottawa to amend Bylaw No. 2003-446 to prohibit smoking on outdoor patio encroachments and at café seating. Bylaw No. 2003-446, A by-law of the City of Ottawa to regulate encroachments on City highways.	02/04/2012	31/08/2016
Ottawa	The Water Pipes in Public Places and Workplaces Bylaw	31/08/2016	
Ottawa	Bylaw 2007-268, A bylaw of the City of Ottawa respecting public transit (Transit Bylaw)	13/06/2013	
Parry Sound	Bylaw No. 2009-5389, Being a bylaw to regulate smoking at the West Parry Sound Health Centre	01/10/2009	
Parry Sound	Bylaw No. 2012-6087, A By-law to prohibit smoking within nine (9) metres from any entrance or exit of a building owned or leased by the Town of Parry Sound and in or within 9 metres of any municipal outdoor public place. To repeal Bylaw 2011-5578.	20/03/2012	
Peel Region	Bylaw Number 30-2016 – A bylaw to regulate waterpipe smoking in the Regional Municipality of Peel	28/04/2016	

Name of Jurisdiction	Legislation and Bylaw Name	Date Passed (dd/mm/yyyy)	Date Last Amended
Petawawa	By-law 835/13 - Being a by-law to regulate and prohibit smoking on municipally owned property in the Town of Petawawa.	06/05/2013	
Peterborough	By-law Number 12-169, Being a by-law to prohibit the use of water pipes in enclosed public places and in certain other places in the City of Peterborough Also known as the "Water Pipe By-law".	10/12/2012	
Peterborough	By-Law Number 16-021, Being a By-Law to repeal By-Law 11-074 (as amended by 13-002) and By-Law 13-002 of the City of Peterborough and enact City of Peterborough Smoking By-Law Number 16-021	22/02/2016	
Peterborough, County of	Bylaw 2009-50, A By-law Respecting Smoking in Certain Public Places under the Jurisdiction of The County of Peterborough	03/06/2009	
Prince Edward County	Bylaw 2818-2011, Being a bylaw to prohibit smoking and tobacco use within 25 m surrounding playground structures, sport playing fields, park facilities, tennis courts, outdoor rinks, youth park, skate parks, and within 9 m of recreation facilities owned by the Corporation of the County of Prince Edward	08/03/2011	
Renfrew County	Bylaw No. 84-09, A Bylaw to Prohibit Smoking on the Property of Bonnechere Manor & Miramichi Lodge by Residents, Staff and the General Public.	24/06/2009	
Renfrew County	Bylaw 57-16, A Bylaw to Amend Bylaw 59-02 Corporate Policies and Procedures for the County of Renfrew to Approve a Smoking Policy on Designated County Properties (2016)	28/04/2016	
Sault Ste. Marie	Bylaw 2003-7, A by-law to regulate smoking in public places and city buildings in the City of Sault Ste. Marie (Consolidated as of February 21, 2012)	13/01/2003	21/02/2012
Scugog, Township of	The Corporation of the Township of Scugog By-Law Number 31-14 being a By-Law to regulate smoking in outdoor public places	02/06/2014	
Severn, Township of	By-law No. 2013-68 Being a By-law to prohibit smoking of tobacco in areas within the Township of Severn	05/09/2013	
Sioux Lookout	Bylaw No. 11-03, Smoke-Free Workplaces Bylaw	19/03/2003	
Smiths Falls	By-law No. 8482-12, A by-law to regulate smoking in public places	16/04/2012	
St. Thomas	Bylaw No. 111-2008, a Bylaw for the use, protection and regulation of Public Parks and Recreation Areas in the City of St. Thomas (Parks and Recreation Area Bylaw) Amended by Bylaw No. 163-2009, being a bylaw to provide for the use, protection and regulation of Public Parks and Recreation Areas in the City of St. Thomas	21/07/2008	02/11/2009
Stratford	Bylaw No. 174-2003, Being a By-law to regulate smoking in public places and work places in the City of Stratford and to repeal By-law 62-93 as amended Bylaw No. 105-2013, Being a By-law to amend Smoking in Public Places By-law 174-2003 as amended, to prohibit smoking outdoors in playground and recreation amenities, in municipal parks, at entrances and exits to municipal buildings, bus shelters and on hospital property.	22/09/2003	23/09/2013
Sudbury	By-law 2013-54 to Regulate Parks under the Jurisdiction of the City of Greater Sudbury	12/02/2013	

Name of Jurisdiction	Legislation and Bylaw Name	Date Passed (dd/mm/yyyy)	Date Last Amended
Tecumseh	By-law Number 2014-60, Being a bylaw to prohibit Smoking and the Use of Smokeless Tobacco in all public parks, sports fields and outdoor recreation facilities, and within nine (9) metres of a transit stop or any entrance of any building or structure under the control, supervision, ownership and/or operation of The Corporation of the Town of Tecumseh (aka The Smoke-free Outdoor Spaces By-law)	08/07/2014	
Thunder Bay	Bylaw No. 052-2010, A By-law to repeal the City's prior Smoking Prohibition By-law (Number 34-2004) and to enact a replacement by-law that contains only those prohibitions that are more restrictive than the ones set out in the Smoke Free Ontario Act, 1994 (S.O. 1994, c. 10, as amended). By-Law Number 110-2013, A by-law to Appoint Municipal Law Enforcement Officers for the purposes of enforcing the Smoking Prohibition By-law No. 052-2010 at the Thunder Bay Regional Health Sciences Centre	10/05/2010	21/10/2013
Tillsonburg	Bylaw Number 3596, To Prohibit Smoking In Certain Public Places Within The Town Of Tillsonburg	14/03/2012	
Timmins	Bylaw No. 2011-7123, Being a bylaw to repeal Bylaw 2003-5815 and amendments thereto and regulate smoking in Public Places and Workplaces Bylaw No. 2012-7250, Being a bylaw to amend Bylaw No. 2011-7123 to Prohibit Smoking at Timmins and District Hospital	14/11/2011	27/08/2012
Toronto	Bylaw No. 87-2009, To Amend City of Toronto Municipal Code Chapter 608, Parks, to prohibit smoking in playgrounds and other areas of City parks.	28/01/2009	
Toronto	Bill 1725, To amend City of Toronto Municipal Code Chapter 709, Smoking, to regulate and prohibit smoking at entrances and exits to public buildings and to repeal certain Articles. Bill 1726, To amend City of Toronto Municipal Code Chapter 608, Parks, to prohibit smoking in and around certain facilities within City parks.	13/11/2013	
Toronto	Toronto Transit Commission Bylaw No. 1	21/01/2009	
Toronto	Toronto Municipal Code Chapter 545, Licensing (Pertaining to Waterpipe)	03/11/2015	
Trent Hills	By-law 2012-75, to prohibit smoking and holding lighted tobacco products within defined Municipal-owned outdoor public spaces	17/07/2012	
Uxbridge	Bylaw No. 2015-055, Being a by-law to prohibit smoking within fifteen (15) metres of entrance ways of municipal buildings	27/04/2015	
White River	Bylaw 2012-03, Being a by-law to amend By-Law No. 2004-07, A Bylaw to regulate smoking in public places and workplaces in the Corporation of the Township of White River	11/03/2012	
Woodstock	Bylaw No. 8461-08, Smoke Free Workplaces and Public Places (consolidated with all amendments) Also known as Chapter 835 (of the Municipal Code), Smoke-free Workplaces and Public Places Bylaw No. 8978-15, A by-law to amend the City of Woodstock Municipal Code Chapter 835 Smoke Free Workplaces and Public Places.	05/06/2008	18/06/2015

Table 5A-2: Workplace Exposure (Past Week) Indoors or Inside a Work Vehicle, Ontario 2010 to 2015

Year	Population Estimate	%	Lower 95% Confidence Limit	Upper 95% Confidence Limit
2010		16.3	12.8	20.5
2011		13.6	10.2	18.0
2012	824,700	12.7	9.5	16.9
2013	626,300	10.2 ^M	6.8	14.8
2014	544,000	8.8 ^M	6.2	12.2
2015	843,200	13.0	9.4	17.6

Note: M = Interpret with caution: subject to moderate sampling variability. [Data table is for Figure 5-2](#)

Source: Centre for Addiction and Mental Health Monitor (Full Year) 2010 –2015

Table 5A-3: Nonsmokers' Exposure to Secondhand Smoke in Public Places^a (Every Day or Almost Every Day), by Age, Ontario, 2003 to 2014

Year	Aged 12+				Aged 12 – 18			
	Population Estimate	%	Lower 95% Confidence Limit	Lower 95% Confidence Limit	Population Estimate	%	Lower 95% Confidence Limit	Upper 95% Confidence Limit
2003	1,405,000	17.9	17.3	18.5	268,300	26.4	24.5	28.2
2005	1,077,600	13.1	12.5	13.6	247,300	23.2	21.4	25.0
2007	994,500	11.7	10.8	12.5	229,100	20.8	18.2	23.5
2008	983,000	11.3	10.4	12.1	219,700	19.9	17.5	22.4
2009	1,006,700	11.2	10.3	12.0	213,300	19.2	16.8	21.5
2010	1,176,300	13.1	12.1	14.1	228,600	21.1	18.6	23.6
2011	1,177,200	13.0	12.2	13.9	258,300	24.0	21.1	26.9
2012	1,227,200	13.3	12.4	14.3	254,400	23.0	20.1	25.9
2013	1,308,800	13.9	12.9	14.9	254,600	24.1	21.3	26.9
2014	1,442,000	15.1	14.1	16.2	273,800	25.3	22.6	28.0

^a = Exposure to secondhand smoke in public places, such as restaurants, bars, shopping malls, arenas, bingo halls and bowling alleys

Note: [Data table is for Figure 5-3](#)

Source: Canadian Community Health Survey 2003, 2005, 2007-2014

Table 5A-4: Nonsmokers' Exposure to Secondhand Smoke in Public Places^a (Every Day or Almost Every Day), by Public Health Unit, Ages 12+, Ontario, 2007/08, 2009/10, 2011/12, 2013/14

Public Health Unit	Exposure to Secondhand Smoke in Public Places			
	2007/08	2009/10	2011/12	2013/2014 ^b
Chatham-Kent	11.6	4.6 ^{M,Y}	5.7 ^M	8.0 ^M
Huron County	5.2 ^M	9.1 ^{M,+Y}	8.7 ^M	8.4 ^M
Peterborough County-City	9.7	15.4 ^{+Y}	7.0 ^{M,Y}	9.4 ^M
Perth District	12.2	10.8 ^M	10.3	9.5
Haliburton, Kawartha, Pine Ridge District	7.8	9.3 ^M	9.6	10.1
Elgin-St. Thomas	16.3	13.5 ^M	11.5 ^M	10.3 ^M
Kingston, Frontenac and Lennox and Addington	6.7	10.9 ^{+Y}	11.4 ^M	10.4
Timiskaming	F	8.4 ^M	9.2 ^M	10.4 ^M
Wellington-Dufferin-Guelph	13.2	11.1	12.6	11.0
Thunder Bay District	8.1	7.6	12.4 ^{+Y}	11.5
Middlesex-London	9.5	12.3	11.8	11.9
Grey Bruce	8.7	9.9 ^M	8.6	12.1
Windsor-Essex County	7.8	6.8	11.0 ^{+Y}	12.1
Northwestern	10.3 ^M	8.4 ^M	9.1 ^M	12.2 ^M
North Bay Parry Sound District	9.9 ^M	10.6 ^M	9.4 ^M	12.5
Leeds, Grenville and Lanark District	9.0	8.2 ^M	11.0	12.6
Niagara Regional Area	12.1	10.5	10.8	12.8
District of Algoma	17.3	13.8	11.5 ^M	12.9
City of Hamilton	12.5	12.1	12.1	13.0
Sudbury and District	11.7	11.9	15.0	13.0
Oxford County	3.7 ^M	6.7 ^M	10.4	13.3 ^M
Simcoe Muskoka District	13.2	12.2	14.9	13.5
Brant County	8.9 ^M	9.5 ^M	10.7	13.8
Lambton	5.2 ^M	9.0 ^{+Y}	12.7	13.9
York Regional	12.4	10.6	13.3	14.4
Eastern Ontario	8.6	9.4 ^M	14.3 ^{+Y}	14.5
Halton Regional	12.3	11.2	12.8	14.6
City of Toronto	14.9	15.3	13.7	14.7
Waterloo	6.4	8.9	11.5	15.0
Porcupine	11.9 ^M	10.5 ^M	11.3 ^M	15.2
Durham Regional	13.5	16.4	18.0	15.3
Haldimand-Norfolk	10.2	9.1 ^M	14.7 ^{+Y}	16.0
Renfrew County and District	9.2 ^M	10.5 ^M	12.2 ^M	16.1 ^M
Hastings and Prince Edward Counties	6.9 ^M	7.4	9.7	16.7 ^{+Y}
City of Ottawa	8.7	13.2 ^{+Y}	18.5 ^{+Y}	18.1 ^M
Peel Regional	11.0	12.7	13.2	18.6 ^{+Y}
Ontario	11.5	12.1	13.2^{+Y}	14.5^{+Y}

^a = Exposure to secondhand smoke in public places, such as restaurants, bars, shopping malls, arenas, bingo halls, and bowling alleys

^b = Ordered by 2013/14 exposure (lowest to highest)

^M = Marginal. Interpret with caution: subject to moderate sampling variability

^F = not reportable due to a small sample size

^Y = Significantly lower than the previous year

^{+Y} = Significantly higher than the previous year

Source: Canadian Community Health Survey 2007/08, 2009/10, 2011/12 and 2013/14 (from the [Canadian Socio-economic Information Management System \[CANSIM\]](#)) Table 105-0502. Health indicator profile, two year period estimates, by age group and sex, Canada, provinces, territories, health regions (2012 boundaries) and peer groups.

Table 5A-5: Agreement that Smoking Should be Banned in Playgrounds, Recreation Facilities, Outdoor Special Events and Parks, Ages 18+, Ontario, 2010 to 2015

	Year	Population Estimate	%	Lower 95% Confidence Limit	Upper 95% Confidence Limit
Outdoor children's playgrounds/pools ban	2010		87.2	84.5	89.4
	2011		87.5	84.3	90.0
	2012	9,258,800	91.3	88.8	93.2
	2013	8,350,800	89.0	86.0	91.4
	2014	9,326,400	90.8	88.4	92.8
	2015	9,629,000	93.8	91.2	95.7
Outdoor recreation facilities ban	2010		76.1	72.8	79.1
	2011		68.0	64.1	71.7
	2012	7,443,300	73.4	69.8	76.7
	2013	6,714,900	71.6	67.5	75.4
	2014	7,929,200	77.4	73.9	80.5
	2015	8,350,300	81.4	77.7	84.5
Outdoor special events ban	2010		66.8	63.2	70.3
	2011		64.1	60.2	67.8
	2012	6,683,700	65.9	62.1	69.5
	2013	5,923,800	63.2	58.9	67.2
Parks/beach ban	2010		56.5	52.7	60.2
	2011		54.7	50.7	58.6
	2012	5,861,200	57.8	54.0	61.5
	2013	5,594,000	59.6	55.4	63.7
	2014	6,498,100	63.3	59.4	67.0
	2015	6,996,200	68.2	64.3	71.8

Note: Public opinions related to smoking bans at outdoor special events were not collected in 2014 and 2015. [Data table is for Figure 5-4](#)

Source: Centre for Addiction and Mental Health Monitor (Full Year) 2010-2015.

Table 5A-6: Agreement that Smoking Should be Banned in Playgrounds, Recreation Facilities and Parks, by smoking status, Ages 18+, Ontario, 2015

	Smoking Status	Population Estimate	%	Lower 95% Confidence Limit	Upper 95% Confidence Limit
Outdoor children's playgrounds/pools ban	Current	1,176,300	84.3	68.6	92.9
	Former	2,668,900	95.1	92.2	96.9
	Never	5,783,800	95.4	92.9	97.1
Outdoor recreation facilities ban	Current	833,700	59.7	47.2	71.1
	Former	2,289,200	81.5	75.1	86.6
	Never	5,227,400	86.3	82.0	89.6
Parks/beach ban	Current	516,500	37.0	27.2	48.2
	Former	1,800,200	64.1	57.4	70.3
	Never	4,679,500	77.2	72.4	81.4

Note: [Data table is for Figure 5-5](#)

Source: Centre for Addiction and Mental Health Monitor (Full Year) 2015.

Table 5A-7: Agreement that Smoking should be Banned on Sidewalks, Entrances and Bus Stops, Ages 18+, Ontario, 2010 to 2015

	Year	Population Estimate	%	Lower 95% Confidence Limit	Upper 95% Confidence Limit
Bus stops/transit shelters ban	2010		77.2	73.9	80.2
	2011		73.1	69.3	76.6
	2012	7,854,200	77.4	74.0	80.5
	2013	6,900,400	73.6	69.5	77.4
	2014				
Entrances to public buildings ban	2010		84.1	81.0	86.7
	2011		85.0	81.8	87.8
	2012	9,036,400	89.1	86.4	91.3
	2013	8,118,700	86.6	83.3	89.3
	2014	9,204,700	89.6	87.1	91.7
	2015	9,255,800	90.2	86.9	92.7
Sidewalk ban	2010		48.2	44.4	52.0
	2011		43.8	40.0	47.7
	2012	4,996,600	49.3	45.4	53.1
	2013	4,773,900	50.9	46.7	55.1
	2014	5,365,100	52.3	48.3	56.2

Note: Public opinions related to smoking bans at bus stops and transit shelters were not collected in 2014 and 2015; Public opinions related to smoking bans on sidewalks were not collected in 2015. [Data table is for Figure 5-6.](#)

Source: Centre for Addiction and Mental Health Monitor (Full Year) 2010-2015.

Table 5A-8: Nonsmokers' Exposure to Secondhand Smoke in Vehicles (Every Day or Almost Every Day), by Age, Ontario, 2003 to 2014

Year	Aged 12+				Aged 12 – 15			
	Population Estimate	%	Lower 95% Confidence Limit	Lower 95% Confidence Limit	Population Estimate	%	Lower 95% Confidence Limit	Upper 95% Confidence Limit
2003	761,500	9.7	9.2	10.2	125,000	19.6	17.6	21.6
2005	648,400	7.8	7.4	8.3	101,900	16.1	14.3	17.8
2007	688,900	8.1	7.5	8.7	105,700	16.2	13	19.4
2008	599,400	6.9	6.2	7.5	71,300	10.7	8.2	13.1
2009	574,200	6.4	5.7	7.1	62,400	9.6	7.4	11.8
2010	588,000	6.5	5.8	7.3	45,600	7.5	5.5	9.5
2011	549,600	6.1	5.4	6.8	44,600	7.4	5.6	9.1
2012	501,000	5.4	4.7	6.2	43,400	6.7	4.6	8.8
2013	450,800	4.8	4.2	5.3	44,700	7.9	5.9	10
2014	561,700	5.9	5.2	6.5	32,600	5.4 ^M	3.6	7.3

Note: M = Interpret with caution: subject to moderate sampling variability. [Data table is for Figure 5-7](#)

Source: Canadian Community Health Survey 2003, 2005, 2007-2014

Table 5A-9: Nonsmokers' Exposure to Secondhand Smoke in Private Vehicles (Every Day or Almost Every Day), by Public Health Unit, Ages 12+, Ontario, 2007/08, 2009/10, 2011/12, 2013/14

Public Health Unit	Exposure to Secondhand Smoke in Private Vehicles			
	2007/08	2009/10	2011/12	2013/2014 ^a
Elgin-St. Thomas	15.9	10.1 ^{M,Y}	8.7 ^M	3.7 ^{M,Y}
Leeds, Grenville and Lanark District	8.1	6.4 ^M	4.6 ^M	3.8 ^M
Oxford County	7.6 ^M	6.8 ^M	7.1 ^M	3.8 ^{M,Y}
City of Toronto	6.7	5.1	4.4 ^M	3.9
Halton Regional	6.9 ^M	5.6 ^M	5.1 ^M	4.0 ^M
York Regional	5.6	5.9 ^M	5.2 ^M	4.0
Haliburton, Kawartha, Pine Ridge District	6.7 ^M	6.3 ^M	8.6 ^M	4.4 ^M
Niagara Regional Area	7.6	6.2 ^M	5.7 ^M	4.7 ^M
Peel Regional	7.2	7.3	4.0 ^Y	4.9
Middlesex-London	6.9	8.1	5.6 ^M	5.0 ^M
City of Ottawa	3.4 ^M	4.3 ^M	5.9 ^M	5.1 ^M
Kingston, Frontenac and Lennox and Addington	6.7	7.2 ^M	6.5 ^M	5.3 ^M
Windsor-Essex County	7.2	8.7 ^M	8.8 ^M	5.4 ^M
City of Hamilton	9.0	4.8 ^{M,Y}	6.2	5.5 ^M
Perth District	7.5 ^M	9.3 ^M	5.7 ^M	5.7
Wellington-Dufferin-Guelph	8.0	8.0 ^M	5.1 ^M	5.8 ^M
Simcoe Muskoka District	8.7	8.1	7.0	5.9
Thunder Bay District	8.0	7.2	9.8 ^M	5.9 ^{M,Y}
Chatham-Kent	9.9	6.6 ^M	4.4 ^M	6.0 ^M
Peterborough County-City	7.9 ^M	10.2 ^M	4.8 ^{M,Y}	6.0 ^M
Waterloo	6.4	6.0	5.1 ^M	6.2 ^M
Hastings and Prince Edward Counties	12.2 ^M	8.7	8.5	6.3 ^M
Lambton	7.3 ^M	7.7	5.4 ^M	6.6 ^M
Renfrew County and District	6.7 ^M	7.3 ^M	7.7 ^M	6.6 ^M
Timiskaming	7.1 ^M	F	F	6.7 ^M
North Bay Parry Sound District	10.7	6.2 ^{M,Y}	7.2	6.8 ^M
District of Algoma	13.8	5.8 ^{M,Y}	4.1 ^M	7.1 ^M
Brant County	10.4	12.0 ^M	7.2 ^M	7.9 ^M
Northwestern	8.8 ^M	10.8	5.7 ^{M,Y}	8.2 ^M
Durham Regional	11.2	8.3	7.7 ^M	8.5
Eastern Ontario	10.2	7.4 ^M	12.9 ^{M,+Y}	9.1 ^M
Sudbury and District	11.9	6.0 ^{M,Y}	9.8 ^M	9.3
Haldimand-Norfolk	9.2 ^M	7.8 ^M	7.2 ^M	9.8 ^M
Grey Bruce	7.4 ^M	6.2 ^M	5.2 ^M	9.9 ^{M,+Y}
Porcupine	12.2	8.8 ^M	11.0 ^M	11.1 ^M
Huron County	8.3 ^M	8.8 ^M	6.1 ^M	14.4 ^{M,+Y}
Ontario	7.5	6.5^Y	5.8	5.3

^a = Ordered by 2013/14 exposure (lowest to highest).^M = Marginal. Interpret with caution: subject to moderate sampling variability.^F = not reportable due to a small sample size.^Y = Significantly lower than the previous year.^{+Y} = Significantly higher than the previous year.

Source: Canadian Community Health Survey 2007/08, 2009/10, 2011/12 and 2013/14 (from the [Canadian Socio-economic Information Management System \[CANSIM\]](#) Table 105-0502). Health indicator profile, two year period estimates, by age group and sex, Canada, provinces, territories, health regions (2012 boundaries) and peer groups.

Table 5A-10: Nonsmokers' Exposure to Secondhand Smoke at Home (Every Day or Almost Every Day), by Age, Ontario, 2003 to 2014

Year	Aged 12+				Aged 12 – 18			
	Population Estimate	%	Lower 95% Confidence Limit	Lower 95% Confidence Limit	Population Estimate	%	Lower 95% Confidence Limit	Upper 95% Confidence Limit
2003	724,700	9.2	8.7	9.7	210,200	20.6	19.0	22.3
2005	606,400	7.3	6.9	7.7	192,300	18.0	16.5	19.5
2007	487,600	5.7	5.3	6.2	169,000	15.4	13.1	17.6
2008	518,000	5.9	5.3	6.5	140,000	12.7	10.8	14.6
2009	481,100	5.3	4.8	5.9	139,400	12.5	10.4	14.6
2010	453,600	5.0	4.5	5.6	131,300	12.1	9.9	14.3
2011	434,500	4.8	4.0	5.6	120,500	11.2	9.0	13.4
2012	385,700	4.2	3.6	4.8	87,900	7.9	6.2	9.7
2013	364,800	3.9	3.4	4.4	95,800	9.1	7.2	10.9
2014	322,500	3.4	3.0	3.8	86,900	8.0	6.3	9.7

Note: [Data table is for Figure 5-8](#)

Source: Canadian Community Health Survey 2003, 2005, 2007-2014.

Table 5A-11: Nonsmokers' Exposure to Secondhand Smoke in Homes (Every Day or Almost Every Day), by Public Health Unit, Ages 12+, Ontario, 2007/08, 2009/10, 2011/12, 2013/14

Public Health Unit	Exposure to Secondhand Smoke in Homes			
	2007/08	2009/10	2011/12	2013/14 ^a
Halton Regional	5.4	3.4 ^M	2.8 ^M	2.2 ^M
Oxford County	8.8	6.6 ^M	6.4 ^M	2.2 ^{M,Y}
Middlesex-London	4.8	5.9 ^M	4.0 ^M	2.4 ^M
Waterloo	6.2	5.5	2.9 ^{M,Y}	2.5 ^M
Peel Regional	3.7 ^M	4.9	3.0 ^Y	2.6
York Regional	2.9 ^M	3.5 ^M	3.2 ^M	2.7 ^M
District of Algoma	8.6	8.0 ^M	4.7 ^M	2.8 ^M
Elgin-St. Thomas	7.6 ^M	5.9 ^M	3.5 ^M	2.9 ^M
Durham Regional	8.2	4.3 ^{M,Y}	6.3 ^M	3.1 ^M
City of Ottawa	4.1	3.6 ^M	3.2 ^M	3.3 ^M
Windsor-Essex County	6.9	5.2 ^M	4.8	3.5 ^M
City of Toronto	4.5	4.8	4.8 ^M	3.5
Niagara Regional Area	7.6	5.5 ^M	5.2 ^M	3.6 ^M
Renfrew County and District	6.3 ^M	7.4 ^M	5.3 ^M	3.8 ^M
Perth District	6.2 ^M	6.2 ^M	3.2 ^M	3.9 ^M
Leeds, Grenville and Lanark District	9.2	9.6	6.7 ^M	4.1 ^M
Peterborough County-City	5.9 ^M	6.9 ^M	2.1 ^{M,Y}	4.1 ^{M,+Y}
Thunder Bay District	7.6	7.6	4.7 ^M	4.5 ^M
Chatham-Kent	7.8 ^M	7.0 ^M	3.9 ^M	4.6 ^M
Sudbury and District	10.3	7.1 ^M	7.4 ^M	4.6 ^M
Wellington-Dufferin-Guelph	6.0 ^M	5.6 ^M	5.0 ^M	4.8 ^M
Eastern Ontario	12.7	7.4 ^{M,Y}	8.4	5.0 ^M
Grey Bruce	7.5	3.8 ^{M,Y}	5.2 ^M	5.2 ^M
Simcoe Muskoka District	7.5	4.5 ^{M,Y}	5.0	5.3
Haldimand-Norfolk	9.6	8.7 ^M	5.6 ^M	5.4 ^M
Porcupine	9.4 ^M	7.4 ^M	7.2 ^M	5.4 ^M
Brant County	8.3 ^M	7.8 ^M	4.2 ^M	5.5 ^M
Lambton	6.3 ^M	7.9 ^M	6.0 ^M	5.5 ^M
Kingston, Frontenac and Lennox and Addington	6.9 ^M	5.9 ^M	4.7 ^M	5.7 ^M
City of Hamilton	7.7	6.1 ^M	5.5 ^M	6.0 ^M
Northwestern	8.1 ^M	6.8 ^M	5.6 ^M	6.3 ^M
Hastings and Prince Edward Counties	12.0	9.2 ^M	8.1 ^M	7.3 ^M
Huron County	7.2 ^M	5.3 ^M	4.8 ^M	9.4 ^M
Haliburton, Kawartha, Pine Ridge District	8.6	6.8 ^M	6.6 ^M	F
North Bay Parry Sound District	8.3 ^M	5.4 ^M	5.4 ^M	F
Timiskaming	10.7 ^M	8.5 ^M	9.4 ^M	F
Ontario	5.8^Y	5.2^Y	4.5^Y	3.6^Y

^a = Ordered by 2013/14 exposure (lowest to highest).

M = Marginal. Interpret with caution: subject to moderate sampling variability.

F = not reportable due to a small sample size.

^Y = Significantly lower than the previous year.

^{+Y} = Significantly higher than the previous year.

Source: Canadian Community Health Survey 2007/08, 2009/10, 2011/12 and 2013/2014 (from the Canadian Socio-economic Information Management System [CANSIM]) Table 105-0502). Health indicator profile, two year period estimates, by age group and sex, Canada, provinces, territories, health regions (2012 boundaries) and peer groups.

Table 5A-12: Agreement That There Should Be a Law that Parents Cannot Smoke Inside their Home if Children are Living There, Ages 18+, Ontario, 2000 to 2015

Year	Population Estimate	%	Lower 95% Confidence Limit	Upper 95% Confidence Limit
2000		51.7	48.4	55.1
2001		51.0	47.8	54.3
2002		58.5	55.3	61.6
2003		63.0	59.9	66.0
2004		63.9	60.7	67.0
2005		67.7	63.9	71.4
2006		70.2	66.8	73.4
2007		78.0	74.8	80.8
2008		78.0	74.8	81.0
2009		80.4	77.4	83.2
2010		75.4	72.1	78.3
2011		80.1	77.0	82.9
2012	7,780,300	76.9	73.7	79.8
2013	7,013,400	74.9	71.2	78.3
2014	7,955,100	77.5	74.2	80.5
2015	8,025,300	78.4	74.9	81.5

Note: [Data table is for Figure 5-9](#)

Source: Centre for Addiction and Mental Health Monitor 2000-2009 (half year sample); 2010-2015(full year sample).

Table 5A-13: Exposure to Secondhand Smoke in Multi-Unit Dwellings (Past Month), 18+, Ontario, 2011 to 2015

Year	Population Estimate	%	Lower 95% Confidence Limit	Upper 95% Confidence Limit
2011		26.9	23.3	30.8
2012	590,600	24.1	20.1	28.6
2013	441,800	19.9	14.4	26.9
2014	689,500	29.4	22.1	37.9
2015	287,100	15.1 ^M	10.3	21.5

Note: M = Interpret with caution: subject to moderate sampling variability. [Data table is for Figure 5-10](#)

Source: Centre for Addiction and Mental Health Monitor (Full Year) 2011-2015

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