THE ONTARIO TOBACCO RESEARCH UNIT
UNITÉ DE RECHERCHE SUR LE TABAC DE L'ONTARIO

Generating knowledge for public health

Smoke-Free Ontario Strategy Monitoring Report:

Introduction

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Introduction

The Smoke-Free Ontario Strategy (the Strategy) is a comprehensive tobacco-control program involving a broad coalition of partners including provincial and local governments, boards of health, voluntary-health organizations, hospitals and universities. Primary funding for the Strategy comes from the Ontario Ministry of Health and Long-Term Care, with direct and in-kind funding from other Strategy partners. Since 1994, the Ontario Tobacco Research Unit has provided an independent report on the annual progress of the Strategy. The report endeavours to bring evidence to bear on the continued development of comprehensive tobacco control in Ontario.

Report Structure

This report is organized around the four pillars of tobacco control—prevention, smoking cessation, protection, and pro-tobacco influences. These pillars are based on the strategic direction set by the 2003 Steering Committee of the Ontario Tobacco Strategy,[1] are consistent with earlier formulations of the Strategy[2] and more recent formulations as set out by the 2016 Smoke-Free Ontario Scientific Advisory Committee (SAC) report, *Evidence to Guide Action: Comprehensive Tobacco Control in Ontario (2016)*[3] and the Executive Steering Committee report, *Smoke-Free Ontario Modernization*.[4] The ultimate objective of the Strategy is to eliminate tobacco-related illness and death in Ontario.

The prevention, smoking cessation and protection chapters are organized around intervention path logic models. These models provide a simplified visual illustration of how infrastructure and interventions work through paths—identified from the literature—to affect short, medium and long-term outcomes. These outcomes have been monitored by OTRU since 1994 and are consistent with the indicators documented in the Ontario Tobacco Strategy Steering Committee's 2005 report,[1] the then Ministry of Health Promotion's 2010 Comprehensive Tobacco Control Guidance Document for boards of health,[5] with the core outcomes identified by the National Advisory Group on Monitoring Tobacco Control[6] and with the Centers for Disease Control and Prevention's Key Outcome Indicators for Evaluating Comprehensive Tobacco Control Programs.[7] Measurement challenges and space constraints in this report do not allow for full analysis of the

relationships among all of these components. For a more detailed analysis of these relationships for the cessation goal area, see *Evidence to Inform Smoking Cessation Policymaking in Ontario*.[8]

This report is organized as follows:

- Chapter 1: Introduction
- Chapter 2: Use of Tobacco and Alternative Products
- Chapter 3: Infrastructure
- Chapter 4: Youth Prevention
- Chapter 5: Smoking Cessation
- Chapter 6: Protection
- Chapter 7: Pro-tobacco Influences
- Chapter 8: Concluding Note
- Appendix

Methodological Approach

New this year, we have separated out SFO infrastructure into its own stand-alone chapter, which includes a description of infrastructure furnished by SFO partners. For the chapters on prevention, cessation, and protection, we describe interventions (policies, programs and social marketing campaigns), explore the reach and evaluative information about interventions and analyze population-level changes. The chapter on pro-tobacco influences touches on price and taxation, illicit tobacco, agriculture and production, distribution and consumption, availability, product and package innovation, and advertising and promotion.

This report presents information about Strategy activities and tobacco-control advances using 2016/17 Strategy partner reports (ending March 2017), select policy and program updates to December 2017, and the latest population survey data available including the 2016 CAMH Monitor, 2017 OSDUHS and 2015 CCHS (note: although Statistics Canada has released select indicators form the 2016 Canadian Community Health Survey, the raw data file has not yet been released).

This report addresses Strategy interventions funded directly, but not exclusively by the Ministry of Health and Long-Term Care. It draws on information from program evaluations, performance reports and administrative data. Evaluative information about policy and program interventions is drawn from evaluation work conducted directly by the Ontario Tobacco Research Unit and by others on behalf of organizations that receive Smoke-Free Ontario Strategy funding. Further information has been gleaned from administrative documents and discussions with service providers and managers. OTRU's Tobacco Informatics Monitoring System (TIMS) provides much of the population-level data analysis.

In the assessment of Strategy progress, reference is made to the 2016 Smoke-Free Ontario Scientific Advisory Committee (SAC) report, *Evidence to Guide Action: Comprehensive Tobacco Control in Ontario (2016)*[3] and the report of the Executive Steering Committee (*Smoke-Free Ontario Modernization)*,[4] who were appointed by the Minister of Health and Long-Term Care in 2017 to propose a modernized tobacco control strategy. We have included summary tables at the end of each chapter that compare the current status of SFO-funded initiatives to the relevant

assessments and recommendations from Scientific Advisory Committee and Executive Steering Committee reports.

This report does not draw direct relationships between tobacco control activities and outcomes. The relationship between Strategy interventions and changes in prevention, cessation and protection outcomes is complex. There is substantial evidence that tobacco control interventions affect these outcomes, and there is an expectation of synergistic effects from a comprehensive approach. However, several forces confound these relationships:

- Variations in implementation including reach and dose of interventions
- Unknown time lags between implementation and population-level changes
- Economic and social perturbations and immigration
- Environmental variation—including pro-tobacco influences and contraband activity

Existing data for indicators for measuring long-term population-level outcomes—such as current smoking or successful quitting—do not always offer sufficient precision to identify small year-over-year changes, which is why we include multi-year data, as well as short- and intermediate-level outcomes. Statements of "significance" between two estimates (such as between years or between groups)—including any directional statement (e.g., increase, decrease, higher, lower, etc.)—are based on non-overlapping 95% confidence intervals or, in some cases, when confidence levels overlap, a formal significance test of two proportions. A comparison of two estimates that appear to differ in absolute magnitude from each other but are not reported as significant should be interpreted with caution. In general, to protect against misclassification of significance due to examining too many comparisons, we only compare the current year with: a) the previous year, b) a 5-year benchmark of 2012 if using 2016 data and 2013 if using 2017 data, and c) a pre-SFO benchmark year of 2005.

References

[1] Ontario Tobacco Strategy. Steering Committee. *Designing Ontario's Tobacco Strategy: Goals, Objectives, Logic Models, and Indicators*. Toronto, ON: OTS Steering Committee, February 2005.

[2] O'Connor SC, Cohen JE. *The Ontario Tobacco Strategy: Past, Present, and Future*. OTRU Special Report: Toronto, ON: Ontario Tobacco Research Unit, January 2002.

[3] Smoke-Free Ontario. Scientific Advisory Committee, Ontario Agency for Health Protection and Promotion (Public Health Ontario). *Evidence to Guide Action: Comprehensive Tobacco Control in Ontario (2016).* Toronto, ON: Queen's Printer for Ontario, 2017. Accessed on December 18, 2017.

[4] Ontario Ministry of Health and Long-Term Care. *Smoke-Free Ontario Modernization: Report of the Executive Steering Committee.* Toronto, ON: Queen's Printer for Ontario, 2017. Accessed on November 30, 2017.

[5] Ontario. Ministry of Health Promotion. *Comprehensive Tobacco Control Guidance Document*. Toronto, ON: Queen's Printer for Ontario, 2010.

[6] Copley TT, Lovato C, O'Connor S. *Indicators for Monitoring Tobacco Control: A Resource for Decision-Makers, Evaluators and Researchers*. On behalf of the National Advisory Group on Monitoring and Evaluation. Toronto, ON: Canadian Tobacco Control Research Initiative, 2006.

[7] Starr G, Rogers T, Schooley M, Porter S, Wiesen E, Jamison N. *Key Outcome Indicators for Evaluating Comprehensive Tobacco Control Programs*. Atlanta, GA: Centers for Disease Control and Prevention, 2005.

[8] Schwartz R, O'Connor S, Minian N, Borland T, Babayan A, Ferrence R, Cohen J, Dubray J. *Evidence to Inform Smoking Cessation Policymaking in Ontario: A Special Report by the Ontario Tobacco Research Unit*. Toronto, ON: Ontario Tobacco Research Unit, July 2010.