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SUR LE TABAC
DE L'ONTARIO

Generating knowledge for public health

Smoke-Free Ontario Strategy Monitoring Report:

Use of Tobacco and Alternative Products



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Introduction

The long-term goal of the Smoke-Free Ontario (SFO) Strategy is to reduce the morbidity and mortality caused by tobacco use. The burden of tobacco use is large. Each year, cigarette smoking claims 15,970 lives in Ontario.¹ Based on 2012 estimates, total direct costs to health care due to smoking were \$2.26 billion including 1.29 billion in hospital care costs, 565.5 million in prescription drug costs, and 401.3 million in physician care costs.¹

Reducing the overall use of tobacco is one of the main objectives of the SFO Strategy. In recent years, Ontario has set a specific goal of having the lowest rate of smoking in Canada.² In addition to smoking cigarettes, Ontarians use a variety of other tobacco products—including cigars, pipes, snuff and chewing tobacco—as well as e-cigarettes and waterpipe shisha, both of which may contain nicotine. Federally, under the proposed *Cannabis Act*,³ the legalization of cannabis is set for 2018. Given this context, the prevalence of cannabis use is of growing interest. It is also of relevance to this report on tobacco use given that 32% used cannabis mixed with tobacco at the same time, among past-year cannabis users (CAMH Monitor, data not shown). This chapter reports on all of these substances.

In this chapter, we present data about tobacco and other products from a variety of sources including administrative data (e.g., Health Canada) and survey data (e.g., 2017 Ontario Student Drug Use and Health Survey, 2016 Centre for Addiction and Mental Health Monitor and the 2015 Canadian Community Health Survey). At the time of writing, data from the Canadian Community Health Survey were only available for 2015 even though Statistics Canada has released select 2016 results.

Overall Tobacco Use

- According to the 2015 Canadian Community Health Survey (CCHS),ⁱ 20% of Ontario respondents aged 12 years or over reported current use of tobacco in the previous 30 days (the measure of tobacco includes cigarettes, cigars, pipes, snuff or chewing tobacco, and waterpipe; it excludes vaping products). This represents 2,268,300 tobacco users (CCHS 2015). Adding past 30-day use of a vaping product to all tobacco use results in a prevalence of 21%, representing 2,449,400 users.
- Among Ontarians 19 years of age or older, 21% (or 2,270,800) used some form of tobacco in the previous 30 days (CCHS 2015, data not shown), 22% when vaping products are included.
- In 2015, 17% of Ontarians aged 12 years or over smoked cigarettes,ⁱⁱ 2.1% smoked cigarillos, 1.3% smoked another form of cigar, 0.6% smoked pipes (marginal estimate, interpret with caution), 0.4% used smokeless tobacco (marginal estimate, interpret with caution), 1.2% used a tobacco waterpipe, and 3% used a vaping product (CCHS 2015; Note: these estimates include co-use and so do not sum to total tobacco use; to facilitate comparison, use is restricted to past 30 days only, which is different from the way that current smoking is reported in other sections of this report).ⁱⁱ

Cigarette Use

Reducing the prevalence of cigarette smoking is central to the Smoke-Free Ontario Strategy. One indicator that underscores progress toward this goal is current smoking, which we define as having smoked in the past 30 days and having smoked 100 cigarettes in one's lifetime.

Canadian Community Health Survey

- In 2015, 16.4% of Ontarians aged 12 years or older were current smokers, representing 1,930,800 users (Figure 2-1). Males reported a significantly higher smoking rate compared to females (19% vs. 14%, respectively). The male smoking rate represented

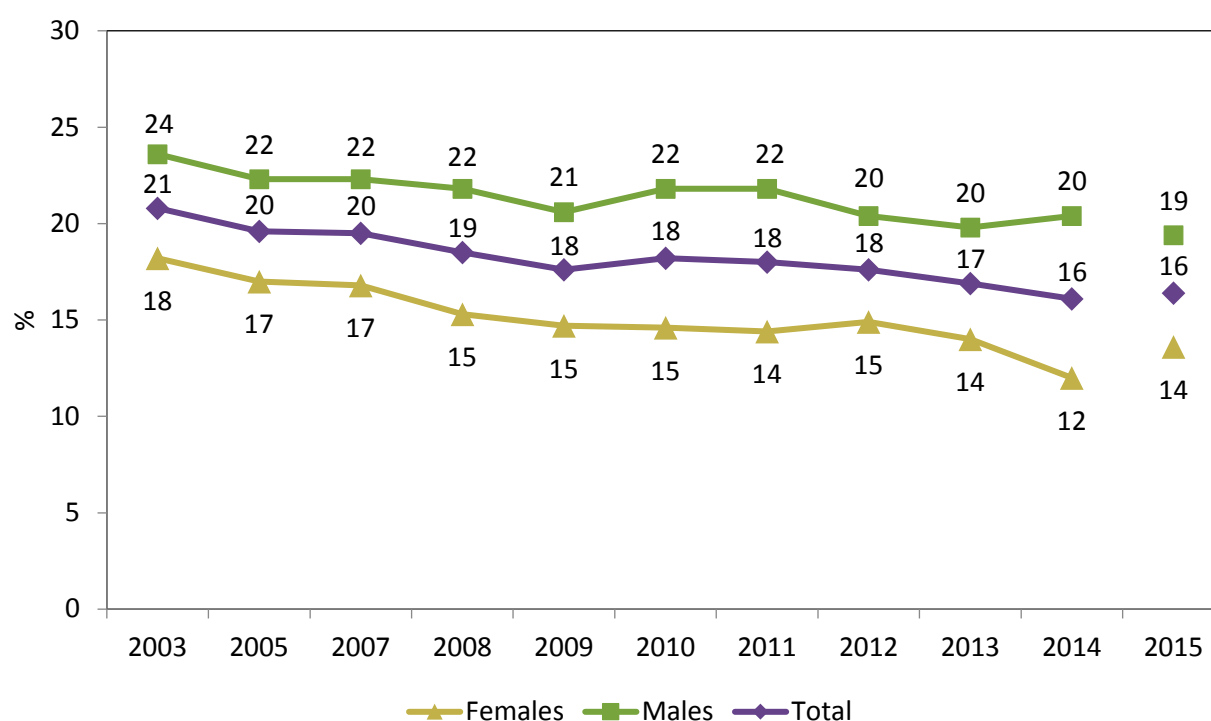
ⁱ The 2016 and 2017 Canadian Community Health Survey data files were not available when this report was prepared.

ⁱⁱ In the Overall Tobacco Use section, "cigarette use" includes having smoked in the past 30 days but does not include having smoked 100 cigarettes in one's lifetime because lifetime quantity is not measured for the other forms of tobacco listed. In other sections of this report, we report current smoking as 16.4% (from CCHS 2015), which reflects past 30-day use and having smoked 100 cigarettes in one's lifetime.

1,112,600 male smokers, whereas the female rate represented 818,200 female smokers.

- In 2015, the Canadian Community Health Survey was redesigned. As a result, comparison of 2015 data to previous year's data needs to be made with caution. There does not appear to be any significant change over the last several years.
- In 2015, 17.6% of Ontarians (1,886,800 users) 19 years of age (the legal age to be sold cigarettes) or older were current smokers, among those 19 years of age or older, 21.0% of males (or 1,079,200) and 14.7% of females (or 807,600) smoked regularly (data not shown).

Figure 2-1: Current Smoking (Past 30 Days), by Sex, Ages 12+, Ontario, 2003 to 2015



Note: Year interval is not always uniform. The Canadian Community Health Survey was redesigned in 2015. Interpret trend with caution. [Full data table for this graph provided in the Appendix \(Table 2A-1\).](#)

Source: Canadian Community Health Survey 2003-2015.

Wholesale Sales Data

- In 2016, 10,307,189,350 cigarettes were sold in Ontario (wholesale sales data) compared to 10,380,708,260 in the previous year (a decline of less than 1%); 11,143,878,995 cigarettes were sold in the 2012 five-year benchmark year, a relative

decline of 7.5%. (Note: Annual sales data may be influenced by wholesale shipment dates. Fine-cut tobacco sales excluded).

- In 2016, menthol cigarettes comprised 6.68% of all cigarette wholesale sales, up from 4.2% in 2015. (Note: Menthol tobacco products were banned as of January 1, 2017, which may explain, in part, the increased sales in 2016).

Cigar Use

On May 28, 2015, Bill 45 (*The Making Healthier Choices Act*) received Royal Assent. This Bill prohibits the sale of flavoured tobacco at retail stores in the province, with exceptions. Specifically, regulations consolidated on November 13, 2015 (and in effect as of January 2016) mandated that the Act does not apply to flavouring agents in cigars that impart a flavour or aroma of wine, port, whiskey or rum; nor does it apply to the flavour or aroma of menthol, a regulation that was revoked January 1, 2017 thus prohibiting menthol as a flavouring agent.⁵

Canadian Community Health Survey

- In 2015, 3% of Ontarians aged 12 years and over (or 349,200 people) had smoked cigars in the past 30 days, making cigars the second-most prevalent form of tobacco use after cigarettes (and tied with vaping) (CCHS 2015).
- Past 30-day cigar use was significantly higher among adults aged 19 to 29 (4.8%) compared to those aged 30 and older (2.6%; CCHS 2015, data not shown).
- In 2015, past 30-day cigar use was significantly higher among males compared to females (CCHS): 5.4% (or 308,800) of males aged 12 years and over had smoked cigars in the past 30 days compared to 0.7% (or 40,400) of females (marginal estimate, interpret with caution).

Wholesale Sales Data

- In 2016, Ontario wholesale sales of the total cigar category (little cigars/cigarillos and cigars) was 130,495,924 units.ⁱⁱⁱ This represents a 6.8% relative fall from 2015 sales (140,090,699 units) and a 14.8% relative decline from 2012 sales (153,137,662 units) reported 5 years earlier. (Note: Annual sales data may be influenced by wholesale

ⁱⁱⁱ Health Canada, Personal Communication, February 8, 2018.

shipment dates).

- In 2016, 51.4% of the Ontario cigar market was estimated to be flavoured, down from 82.6% in 2015, an apparent result of the partial flavour ban put in place on January 1, 2016 (menthol and alcohol flavoured cigars excepted). Menthol sales in 2016 comprised 8.1% of all cigar sales^{iv} compared to the previous year's estimate of 4.15%, an increase that may have been a result of retailers purchasing product before the menthol ban came into force January 1, 2017.

Smokeless Tobacco Use

In Ontario, recent legislation received Royal Assent on May 28, 2015 (*Bill 45: The Making Healthier Choices Act, 2015*), which banned the sale of flavoured smokeless products as of January 1, 2016, with a delayed implementation date of January 1, 2017 for menthol-flavoured tobacco products.

Canadian Community Health Survey

- In 2015, less than one per cent (0.4%) of Ontarians aged 12 years and over (or 48,000) used smokeless tobacco in the past month (marginal estimate, interpret with caution).

Wholesale Sales Data

- The overall volume of wholesale sales in smokeless tobacco is low (Table 2-1), with 48,049 kg of sales in 2016.^{iv} In 2016, there was a 6.9% relative decrease in sales compared to 2015 (48,049 vs. 51,621, respectively). The 2016 sales were 25% relatively lower than the five-year benchmark of 2012 (48,049 in 2016 vs. 64,255 in 2012). (Note: Annual sales data may be influenced by wholesale shipment dates).

Table 2-1: Smokeless Tobacco Sales (kg), Ontario 2007 to 2015

Year	Smokeless Tobacco Sales (kg)
2007	52,253
2008	46,198
2009	52,328
2010	57,439
2011	58,777
2012	64,255
2013	61,826
2014	53,244
2015	51,621
2016	48,049

Source: Health Canada.

Use of Other Alternative Products

Waterpipe Use

A waterpipe—also known as hookah, narghile, or waterpipe shisha—is a device used to smoke flavoured tobacco as well as non-tobacco herbal shisha. The tobacco or herbal ingredients (with or without added nicotine liquid) is heated by charcoal and a water-filled chamber cools the resulting smoke before it is inhaled through a hose and mouthpiece.

Canadian Community Health Survey

- In 2015, 1.2% of Ontarians aged 12 years and older used a tobacco waterpipe in the past 30 days, representing 141,600 people. Similarly, among adults 19 years of age or older, 1.2% used a tobacco waterpipe, representing 125,200 people.

Vaping Devices

Vaping devices are also known as electronic cigarettes, e-cigarettes, vapes, mods and hookah pens. They are battery-operated devices that heat e-liquid or e-juice to create a vapour. Some are one-time, disposable products. Others are reusable with a cartridge or tank system. (We do NOT include vapourizers used for cannabis, unless specifically mentioned in the question.)

Canadian Community Health Survey

- In 2015, 3.0% of Ontarians aged 12 years and older used a vaping product in the past 30 days, representing 351,400 people. Similarly, among adults 19 years of age or older, 2.9% used a vaping product, representing 305,600 people.

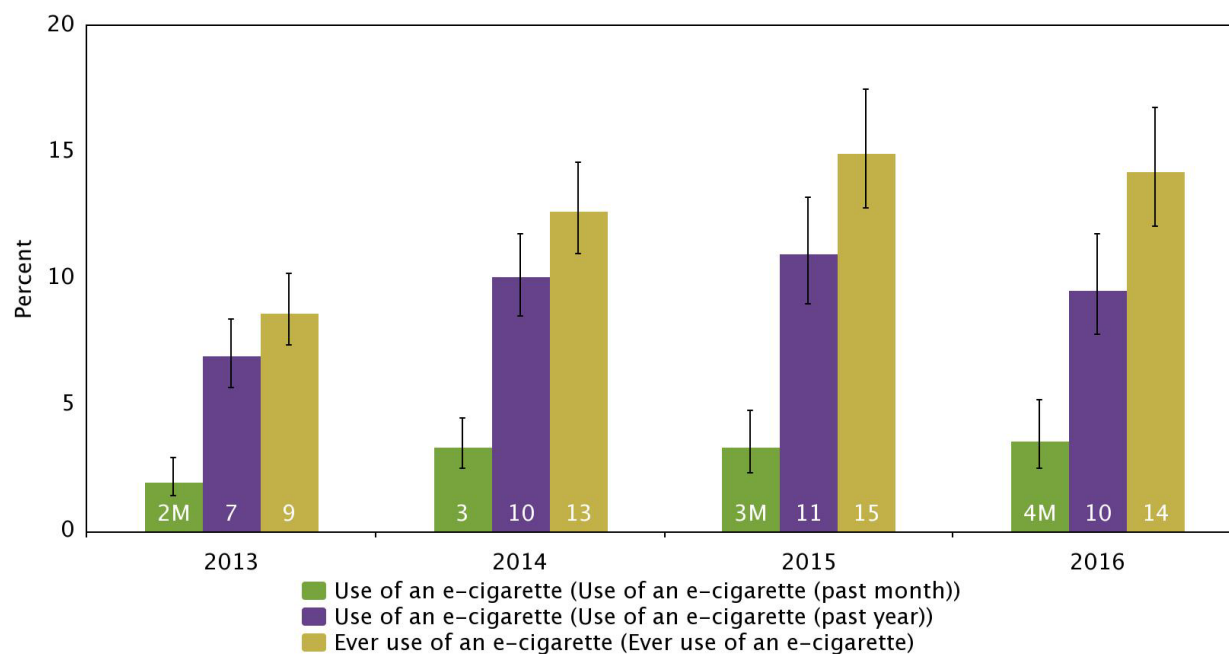
Centre for Addiction and Mental Health Monitor

The Centre for Addiction and Mental Health Monitor is a useful survey to monitor vaping behaviour given that it has multiple questions on the topic (the Canadian Community Health Survey has only past 30-day use).

- Among adults in Ontario 18 years and older, vaping has remained constant over the past several years (Figure 2-2). However, lifetime use in 2013 was significantly lower than that reported in 2014, 2015 and 2016.
- Past 30-day vaping was 3.6%^{iv} in 2016, statistically unchanged from 2015.
- In 2016, past-year vaping was 9.6%, statistically unchanged over that reported in 2015 (11%). However, the gender difference was particularly pronounced: 13.5% of males compared to 5.9% of females vaped in the past year.
- In 2016, 14% of adults aged 18 years and older vaped at some point in their life, which is not statistically different from that reported in 2015 (15%).^v
- In 2016, 18 to 29 year olds had a statistically higher rate of lifetime vaping than all other age groups examined: 18 to 29 year olds (29%) versus 30 to 44 (16%), 45 to 64 (11.5%) and 65 and over (2.6%, Figure 2-3).
- In Canada, e-cigarettes and e-liquid are not permitted to contain nicotine, yet in Ontario, 61% of past-year vapers aged 18 and over reported using nicotine in their last e-cigarette (Centre for Addiction and Mental Health 2016, data not shown).

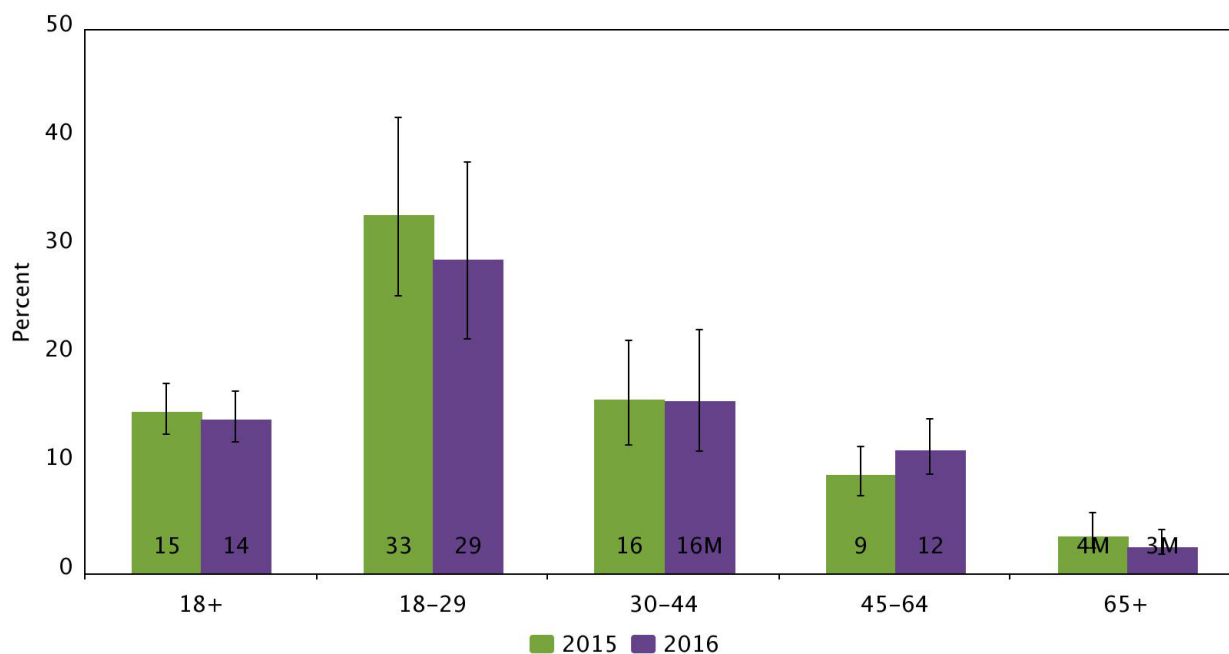
^{iv} M = Marginal estimate. Interpret with caution: subject to moderate sampling variability.

^v E-cigarette use was not asked in our benchmark year of 2012.

Figure 2-2: E-Cigarette Use, Ages 18+, Ontario, 2013 to 2016

Note: M = Marginal. Interpret with caution: subject to moderate sampling variability. [Full data table for this graph provided in the Appendix \(Table 2A-2\).](#)

Source: Centre for Addiction and Mental Health Monitor 2013-2016.

Figure 2-3: Ever Use of an E-Cigarette, by Age, Ontario, 2015 and 2016

Note: M = Marginal. Interpret with caution: subject to moderate sampling variability. [Full data table for this graph provided in the Appendix \(Table 2A-3\).](#)

Source: Centre for Addiction and Mental Health Monitor 2015-2016.

Cannabis Use

Cannabis—also known as marijuana, weed, pot, grass, hashish, hash and hash oil—is a psychoactive drug derived from the cannabis plant. The federal government is expected to legalize combustible cannabis for recreational use mid-2018. At present, it is widely available on the black market.

Centre for Addiction and Mental Health Monitor

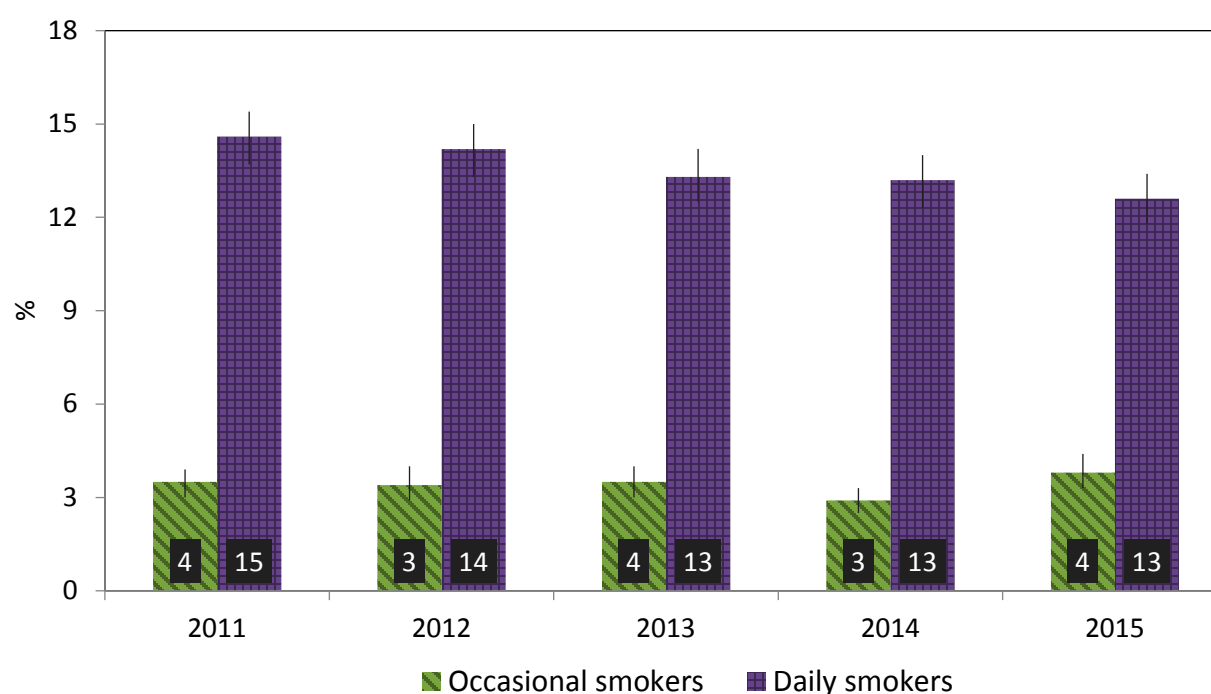
- In 2016, among adults aged 18 years or older, 47% (or 4,748,600 people) have ever used cannabis. Ever use of cannabis significantly differed by sex, with 41% of females and 54% of males having used cannabis.
- Those aged 65 and over were significantly less likely to have ever tried cannabis compared to younger adults: 25% for adults aged 65 and over versus 44.5% for adults aged 18 to 24, 56% for adults 25 to 44 and 51% for adults 45 to 64. No other statistically significant age differences were noted.
- Among adults aged 18 years or older, 16% used cannabis in the past year. Past-year cannabis use significantly differed by sex, with 10% of females and 22% of males using cannabis.
- Among adults aged 18 years and older, past 30-day cigarette smokers were more likely to use cannabis in the past year (35%) compared to former (16%) and never smokers (11%).
- Among past-year cannabis users, 32% used cannabis mixed with tobacco at the same time.

Patterns of Cigarette Use

Daily and Occasional Smoking (Past 30 Days)

- According to the 2015 Canadian Community Health Survey, the prevalence of current smoking was 16.4% among Ontarians 12 years or older, with daily smoking at 12.6% and past-month occasional smoking at 3.8% (Figure 2-4).
- The proportion of current smokers who smoke daily has remained constant over the past several years—at about 77%.
- In 2015, the mean number of cigarettes smoked per day among daily smokers aged 12 years or older was 13.9, with a significant sex difference (12.8 for females vs. 14.7% for males; CCHS, data not shown).

Figure 2-4: Daily and Occasional Smoking, Ages 18+, Ontario, 2011 to 2015



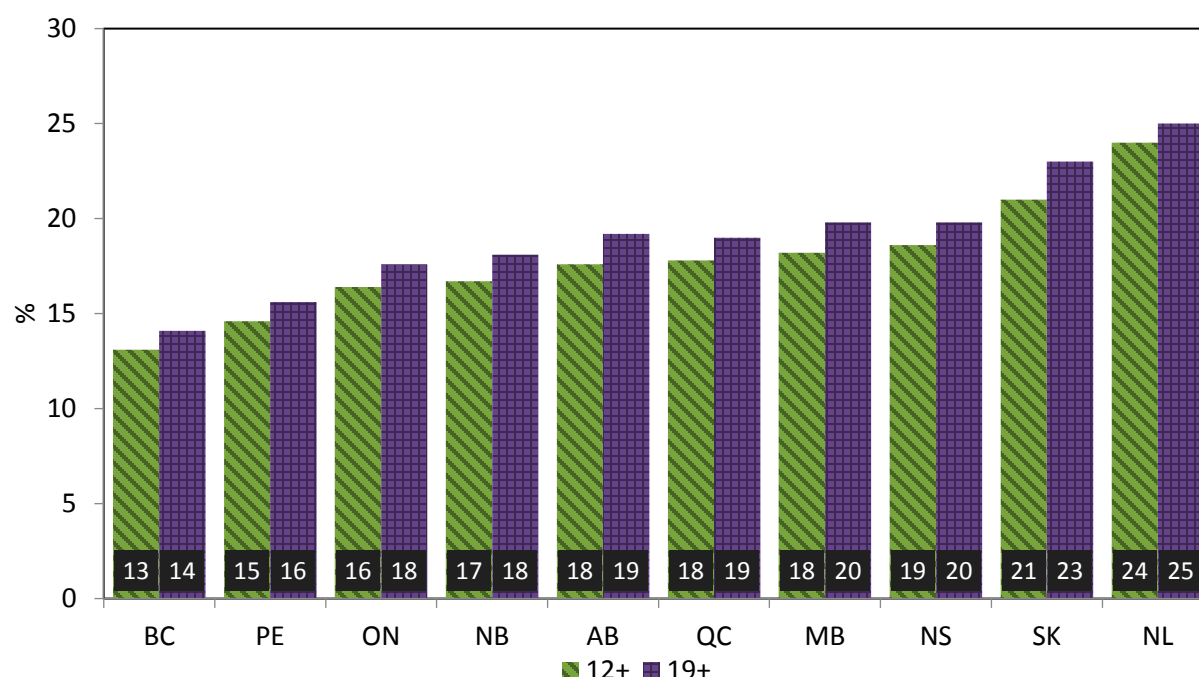
Note: Vertical lines at top of bars represent 95% confidence intervals. The Canadian Community Health Survey was redesigned in 2015. Interpret trend with caution. [Full data table for this graph provided in the Appendix \(Table 2A-4\).](#)
Source: Canadian Community Health Survey 2011-2015.

Current Smoking (Past 30 Days), by Location

Federal, Provincial, Territorial

- Across Canada in 2015, past 30-day current smoking among respondents aged 12 and over ranged from 13% in British Columbia to 24% in Newfoundland and Labrador (Figure 2-5). (The Territories were not sampled in 2015.) Current smoking was slightly higher among respondents 19 years of age or older compared to that among respondents 12 years of age or older (Figure 2-5).
- The prevalence of current smoking in Ontario was not significantly different from the national average (for 12+, 16.4% vs. 16.8% and for 19+, 17.6% vs. 18.1%, respectively; Figure 2-5).
- In recent years, Ontario's goal has been to have the lowest rate of smoking in Canada.² As shown in Figure 2-5, the rate of current smoking in British Columbia (but not Prince Edward Island) is significantly lower than Ontario (for residents aged 12 years and older, as well as 19 years or older).

Figure 2-5: Current Smoking (Past 30 Days), by Jurisdiction, Ages 12+ and 19+, 2015



Note: Ordered lowest to highest, by region. [Full data table for this graph provided in the Appendix \(Table 2A-5\).](#)

Source: Canadian Community Health Survey 2015.

Health Regions

- In the most recently available data for health region (2013/14 combined years), the rate of current smoking among those 12 years and older in Ontario was 16.5% (representing 1,924,900 smokers), significantly lower than that reported in 2009/10 (17.9%). Among health regions, past 30-day current smoking ranged from 10.9% in Peel to 29.1% in Timiskaming (Table 2-2).
- The prevalence of current smoking was 25% or more in three of Ontario's 36 health regions (Brant, Peterborough, Timiskaming; Table 2-2).
- In 2013/14, past 30-day current smoking was significantly lower in Durham, Haldimand-Norfolk and Peel public health regions compared to our SFO baseline year of 2005 (Table 2-2). (Note: Small sample sizes within health regions make it unlikely that modest differences will be found to be statistically significant between any given time period.)

Table 2-2: Current Smoking (Past 30 Days), by Public Health Unit, Ages 12+, Ontario, 2005 to 2013/14

Public Health Unit	Current Smoking ^a (%)				
	2005	2007/08	2009/10	2011/12	2013/14
Peel	17.4*	15.3	14.8	14.2	10.9*
Halton Regional	17.2	17.7	16.1	17.4	13.6
Ottawa	16.9	16.3	14.3	14.1	14.1
Toronto	17.0	16.2	15.0	15.3	14.6
Middlesex-London	16.7	18.9	19.5	18.4	15.0
York Regional	14.5	13.6	15.2	14.7	15.1
Waterloo	18.0	20.4	17.1	19.9	16.0
Durham Region	24.1*	19.7	17.9	20.8	16.3*
Windsor-Essex County	22.6	18.3	21.1	16.1	17.0
North Bay Parry Sound	25.4	25.9	22.0	25.6	18.2
Elgin St. Thomas	25.8	24.7	19.3	25.4	18.2
Grey Bruce	20.0	19.9	17.0	21.5	18.2
Wellington-Dufferin-Guelph	20.4	22.1	17.3	19.4	18.3
Haliburton, Kawartha, Pine Ridge	21.1	23.3	24.0	23.2	18.8
Hamilton	21.7	21.6	18.2	18.9	18.8
Huron County	23.0	22.0	17.1	21.4	19.1
Northwestern (ON)	21.2	23.2	21.6	16.0	19.2
Haldimand-Norfolk	28.7*	24.1	21.8	22.6	19.2*
Simcoe Muskoka	22.4	22.0	23.2	18.6	19.3
Kingston, Frontenac, Lennox & Addington	21.5	23.2	17.0	17.1	19.5
Perth	18.2	16.0	21.5	19.1	19.7
Eastern Ontario	25.9	26.0	24.7	23.7	19.8
Oxford County	22.1	27.7	22.5	26.3	20.2
Niagara Region	21.8	23.8	20.2	17.3	21.4
Lambton	24.4	23.8	22.3	23.5	21.6
Renfrew County	26.8	23.8	24.1	20.7	21.8
Chatham-Kent	23.4	25.8	20.5	24.0	21.8
Sudbury	23.2	24.5	23.7	25.3	22.4
Leeds, Grenville & Lanark	24.0	22.6	24.5	23.2	22.5
Hastings Prince Edward	25.6	26.2	26.2	26.7	22.6
Algoma	22.5	21.7	27.4	22.7	22.6
Thunder Bay	26.1	25.2	23.6	21.7	23.1
Porcupine	28.2	27.7	24.6	27.1	23.8
Brant	24.7	22.0	26.4	22.9	25.0
Peterborough	20.0	21.7	18.5	23.8	25.4
Timiskaming	25.9	22.7	19.2	22.8	29.1
Ontario	19.6*	19.0	17.9 ^y	17.8	16.5* ^y

^a Current smoking defined as past 30-day use and 100 cigarettes in lifetime.

^b Ordered by 2013/2014 current smoking (lowest to highest).

* Significantly different (lower) from 2013/14 to 2005.

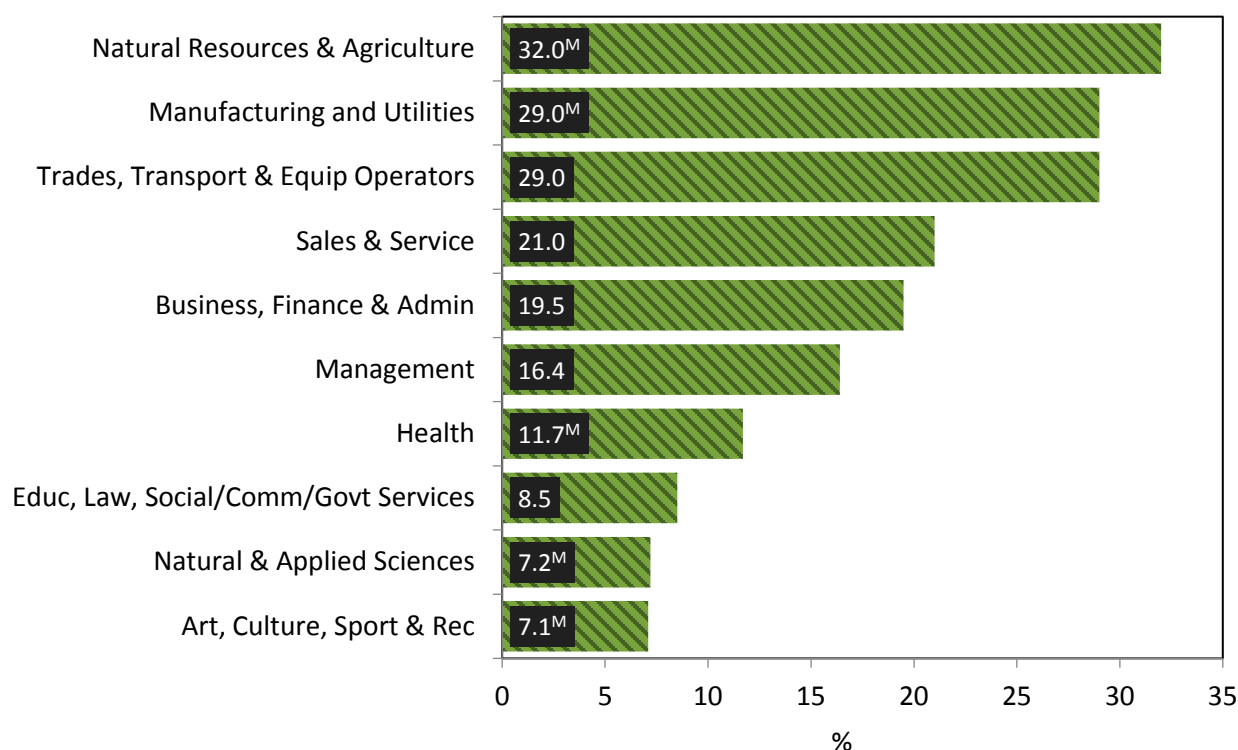
^y Significantly different from 2013/14 to 2009/10.

Source: Canadian Community Health Survey 2005-2013/14.

Current Smoking (Past 30 Days), by Occupation

- In 2015, current smoking was highest among workers in natural resources & agriculture (32%M); manufacturing and utilities (29%M); and trades, transport & equipment operators (29%), representing a combined total of 345,800 (or 29%) of the 1,187,400 employed smokers in Ontario aged 15 to 75 years (CCHS 2015; Figure 2-6).
- Sales and service workers had a smoking rate of 21% (343,800 workers), which was significantly higher than workers in art, culture, sport & recreation; natural & applied sciences, education, law, social/community/government services (Figure 2-6).
- Those working in art, culture, sport & recreation; natural & applied sciences; education, law, social/community/government services had a significantly lower rate of smoking than all other workers, health excepted.

Figure 2-6: Current Smoking (Past 30 Days), by Occupation, Ages 15 to 75, Ontario, 2015



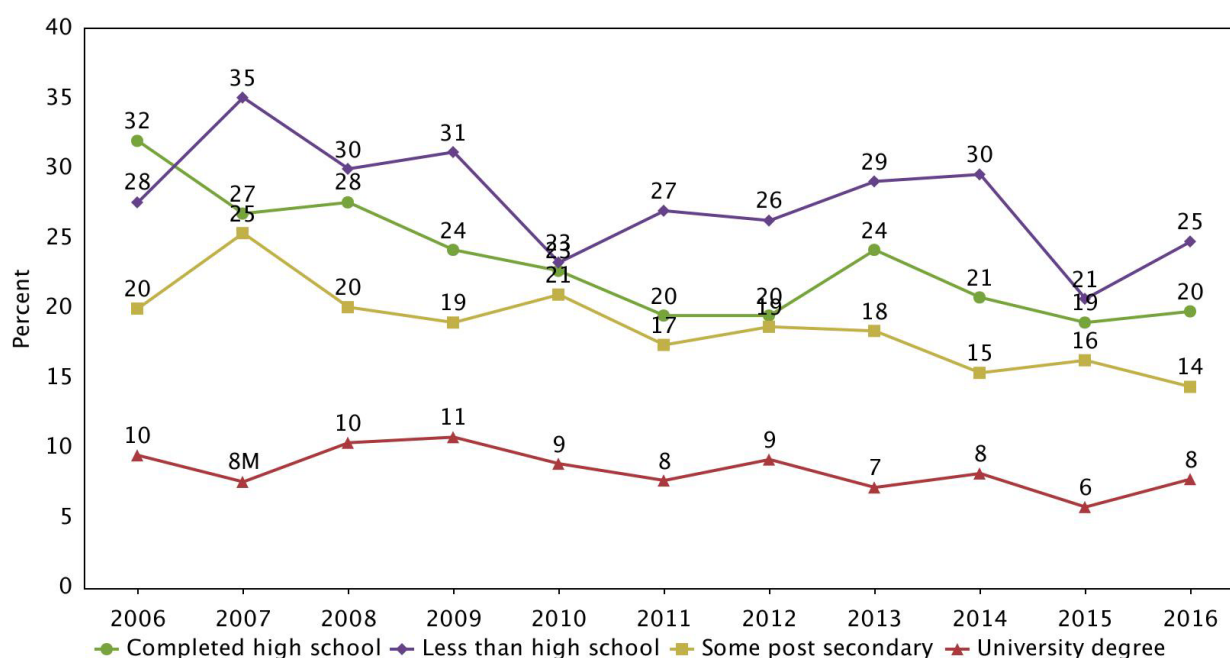
Note: M = Marginal. Interpret with caution: subject to moderate sampling variability. [Full data table for this graph provided in the Appendix \(Table 2A-6\).](#)

Source: Canadian Community Health Survey 2015.

Current Smoking (Past 30 Days), by Educational Attainment

- According to the CAMH Monitor, in 2016, 13.5%^{vi} of Ontarians aged 18 years and over were past 30-day current smokers.^{vii} In recent years, Ontarians with a university degree were significantly less likely to be current smokers than those with less education (Figure 2-7).
- Over the past few years, levels of smoking have remained relatively steady among all educational attainment levels (Figure 2-7). (Note: The apparent drop from 2014 to 2015 among those with less than a high school education—from 30% to 21%—is not statistically significant.)

Figure 2-7: Current Smoking (Past 30 Days), by Educational Attainment, Ages 18+, Ontario, 2006 to 2016



Note: M = Marginal. Interpret with caution: subject to moderate sampling variability. [Full data table for this graph provided in the Appendix \(Table 2A-7\).](#)

Source: Centre for Addiction and Mental Health Monitor 2006-2016.

^{vi} The CAMH Monitor and the Canadian Community Health Survey each present different rates of smoking, albeit these rates are consistent with each other over time. For further information on differences between these two surveys, see Appendix A.

^{vii} Past 30-day current smoking on the CAMH Monitor includes only those respondents who have smoked 100 or more cigarettes in their lifetime.

Risk Factors and Social Determinants of Health in Relation to Smoking

The purpose of this section is to characterize current smokers by other recognized behavioural and social risk factors for poor health and other social determinants of health.

Table 2-3 lists a number of subpopulations that have a rate of current smoking of 25% or more, as observed in the 2015 CCHS. Some of the reported subpopulations have high rates of smoking but represent very few Ontarians (e.g., low levels of income), whereas other subpopulations with high rates represent a large number of Ontarians (e.g., exceed low-risk drinking, self-reported mood disorder). The high rate of cigarette smoking for certain subpopulations is of concern from an equity perspective irrespective of the (population) number of this group.

To explore the association of risk factors and social determinants of health with smoking status (current smoker vs. nonsmoker) by age, we conducted separate analyses for youth (students in grades 7 to 12 using the Ontario Drug Use and Health Survey—OSDUHS data), young adults (aged 18 to 29 years using CCHS data) and adults (18 years and older using CCHS data), as reported below. The analysis for youth explored smoking status among subpopulations defined by risky behaviours (e.g., drinking, drug use) and social determinants of health (e.g., income, housing). The analysis for young adults and adults explored smoking status among subpopulations defined by chronic disease risk factors (e.g., obesity, inactive lifestyle) and social determinants of health (e.g., income, food security). Not all the indicators used in the youth analyses were available for young adults/adults and vice versa.

Youth

- According to the 2015 Ontario Student Drug Use and Health Survey,^{viii} current smokers in grades 9 to 12 were significantly more likely than nonsmokers to have a drug-use problem (80% vs. 14%), be a hazardous drinker (71% vs. 18%), employed outside of home (work for pay) (70% vs. 43%), visit a health professional for a mental health problem (41% vs. 19%), engage in delinquent behaviour (38%^M vs. 5%), feel no social

^{viii} The indicators listed in this section are from the 2015 OSDUHS. The 2017 data is embargoed until the release of the Mental Health and Well-Being report in the summer of 2018.

cohesion at school (34% vs. 20%), have poor self-rated health (28% vs. 8%). (M = Marginal. Interpret with caution: Subject to moderate sampling variability (Figure 2-8).

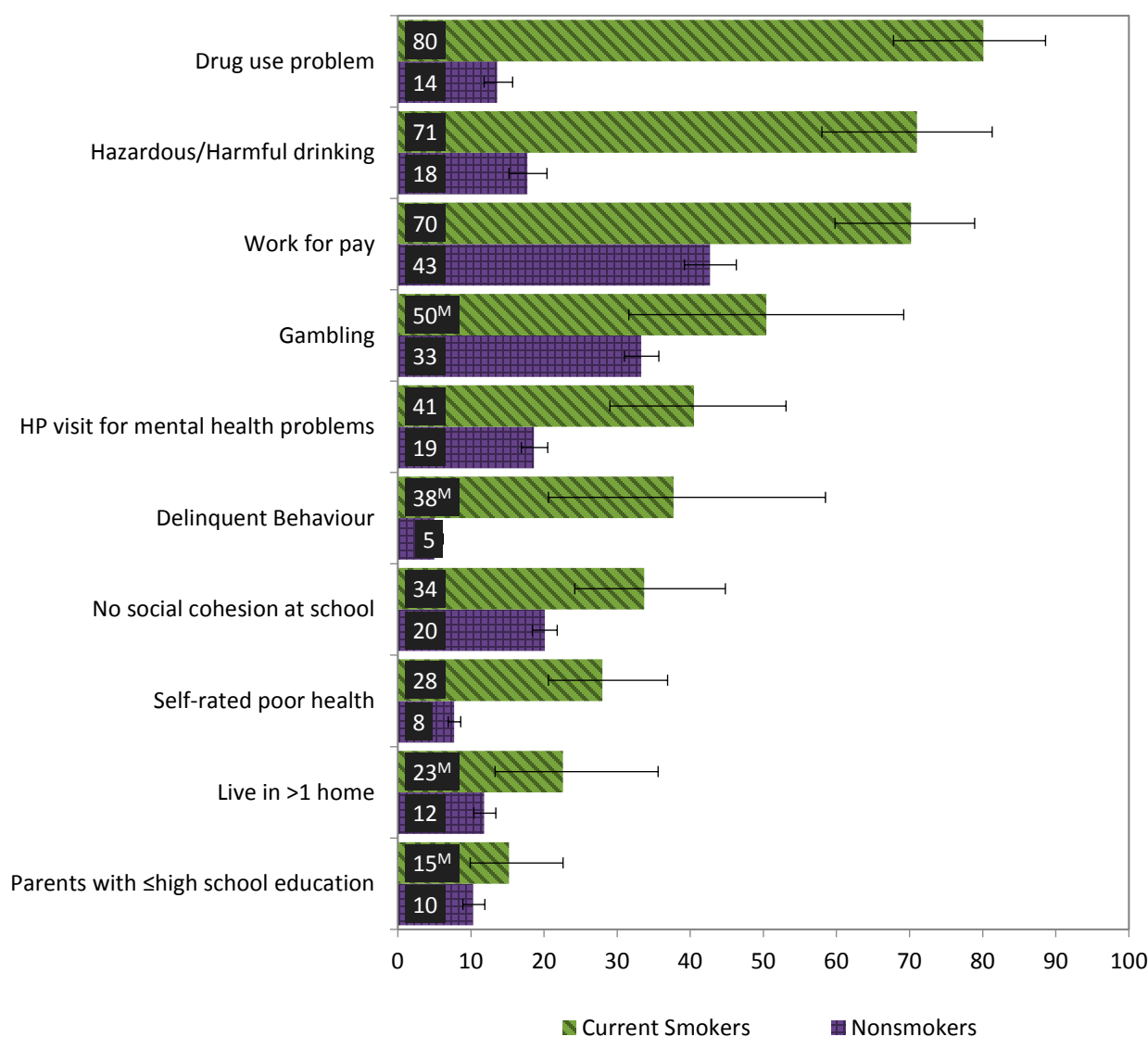
Table 2-3: Subpopulations of Current Smokers with a Rate of Smoking of 25% or More, Ontario, 2013/14

Group	Smoking (%)	Population Estimate of Smokers (n)
12+ (baseline)	16	1,930,800
18+ (baseline)	17.5	1,905,400
Household income: \$5,000 – \$9,999 (Age 18+)	37 ^M	45,600
Cultural background: Aboriginal ^a identity (Age 12+)	34	104,800
Age 30-44, male	32	150,400
Household income: less than \$5,000 (Age 18+)	32 ^M	17,000
Occupation: natural resources, agriculture or related production (Age 15-75)	32 ^M	28,000
Chronic disease: mood disorder (Age 12+)	31	314,400
Household income: no income or income loss (Age 18+)	S	S
Occupation: trades, transport & equipment operators + related (Age 15-75)	29	226,800
Manufacturing and utilities (Age 15-75)	29 ^M	91,000
Household income: \$20,000 to \$29,999 (Age 18+)	28	226,400
Age 55-59, male	27	130,600
Less than secondary school graduation (Age 18+)	27	292,400
Household income: \$10,000 – \$14,999 (Age 18+)	27	69,000
Unemployed (Age 15-75)	27 ^M	80,400
Sexual orientation: homosexual (lesbian or gay)/bisexual (Age 15+)	27	94,800
Chronic disease: exceed low-risk drinking (Age 19+)	27	776,800
Age 25-29, male	26 ^M	107,000
Household income (Age 18+): \$15,000 to \$19,999	26	81,000
Age 35-39, male	25	98,600
Age 30-44, male	25	328,600

^a Residents of Indian reserves are excluded from the survey's coverage, therefore the numbers reflect First Nations people living off reserve, Métis and Inuit. Other survey exclusions include health-care institutions, some remote areas, and full-time members of the Canadian Forces (living on or off military bases).

Note: Subpopulations ordered by value from highest to lowest. M = Marginal. Interpret with caution: subject to moderate sampling variability. S = Suppressed due to small sample size.

Source: Canadian Community Health Survey 2015.

Figure 2-8: Factors^a Associated with Smoking Status among Students in Grades 9 to 12, Ontario, 2015

^a Indicator definitions and information on data analysis provided in Appendix A.

Note: Horizontal lines represent 95% confidence intervals. M = Marginal. Interpret with caution: subject to moderate sampling variability. [Full data table for this graph provided in the Appendix \(Table 2A-8\).](#)

Source: Ontario Student Drug Use and Health Survey 2015.

Young Adults Aged 18 to 29

- In 2015, among those aged 18 to 29 years, current smokers and nonsmokers were equally born in Canada (74% vs. 73%). The majority of current smokers and nonsmokers identified as White (68% vs. 61%; CCHS 2015, data not shown).
- Among young adults, 65% of current smokers were male, whereas only 48% of

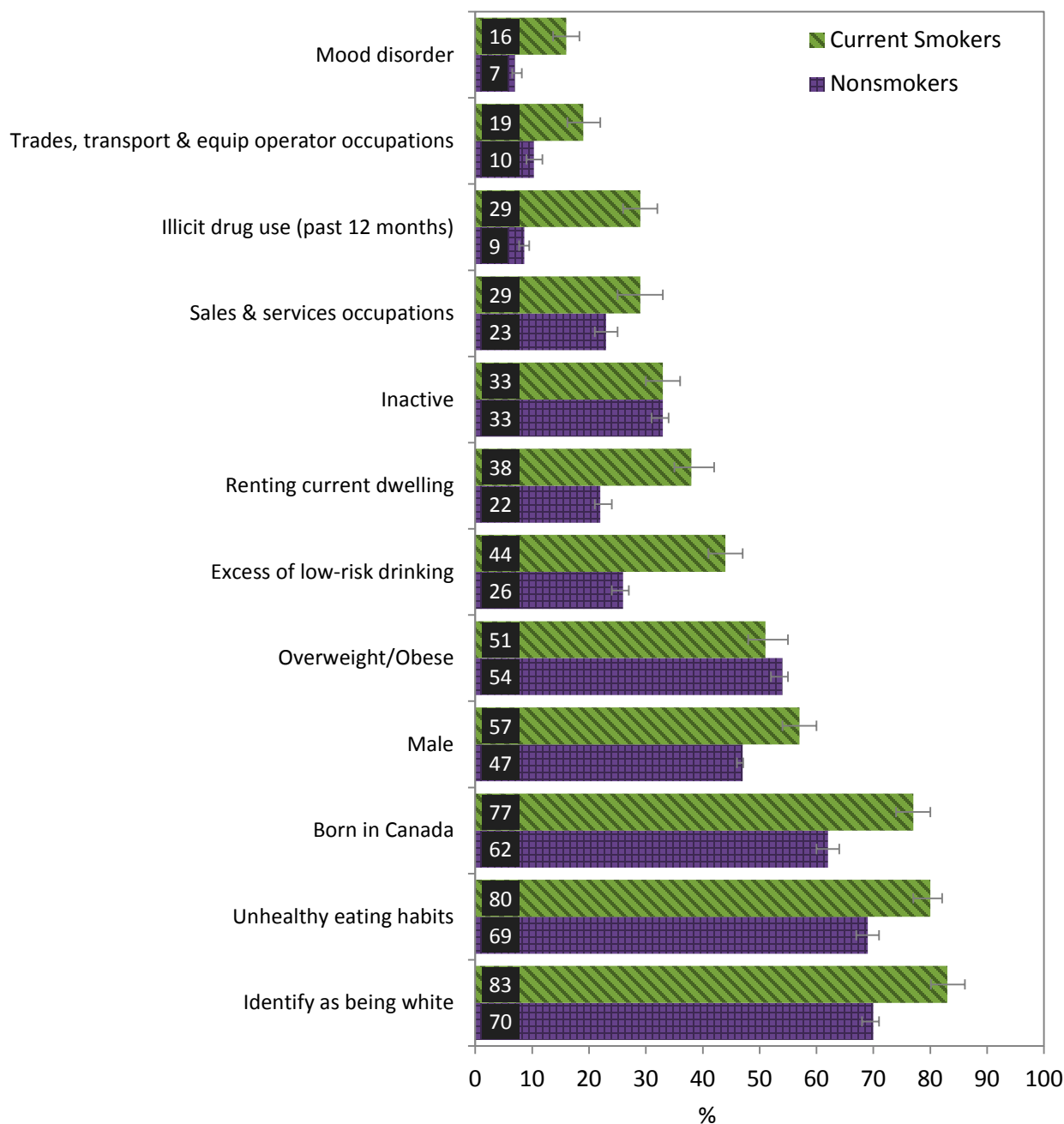
nonsmokers were male.

- Current smokers did not differ from nonsmokers in unhealthy eating habits (eating less than five fruits or vegetables per day: 74% vs. 76%).
- Current smokers had a higher rate of drinking in excess of the low-risk drinking guidelines compared to nonsmokers (59% vs. 37%).
- A greater proportion of current smokers than nonsmokers used illicit drugs in the past 12 months including cannabis (50% vs. 23%; CCHS 2015, data not shown).
- Current smokers did not differ from nonsmokers in being clinically diagnosed with a mood disorder (11% vs. 7%, marginal estimates: interpret with caution; CCHS 2015, data not shown).
- A similar proportion of current smokers and nonsmokers aged 18 to 29 reported having a low activity level (sedentary or somewhat active)^{ix} in leisure time (19% vs. 22%) or being overweight/obese (32% vs. 32%; CCHS 2015, data not shown).
- The proportion of respondents not having a family doctor was not significantly different among current smokers compared to nonsmokers (30% vs. 21%). A larger number of current smokers reported having less than a high-school education compared to nonsmokers (11.5% vs. 4.5%; CCHS 2015, data not shown).

Adults Aged 18 Years and Older

- Current smokers aged 18 years and older were more likely to identify themselves as White (83%) compared to nonsmokers (70%); they were also more likely to be Canadian born (77%) compared to nonsmokers (62%; CCHS 2015; Figure 2-9).
- A greater proportion of current smokers than nonsmokers were male (57% vs. 47%).
- Current smokers compared to nonsmokers were more likely to report working in trades, transportation and equipment operation occupations (19% vs. 10%) and working in sales and service occupations (29% vs. 23%).
- A greater proportion of current smokers than nonsmokers reported having low education (less than high school: 16% vs. 9%). (Data not shown.)

^{ix} Low activity level coded as sedentary or somewhat active relative to a high activity level, which was coded as active or moderately active.

Figure 2-9: Factors^a Associated with Smoking Status, Ages 18+, Ontario, 2015

^a Indicator definitions and information on data analysis provided in Appendix A.

Note: Horizontal lines represent 95% confidence intervals. [Full data table for this graph provided in the Appendix \(Table 2A-9\).](#)

Source: Canadian Community Health Survey 2015.

- More current smokers reported living in a rented dwelling compared to nonsmokers (38% vs. 22%).
- A greater proportion of current smokers than nonsmokers were more likely to report

engaging in other behaviours that are risk factors for the development of chronic disease including: having unhealthy eating habits (eating less than five fruits or vegetables per day: 80% vs. 69%), drinking in excess of the low-risk drinking guidelines (44% vs. 26%), and using illicit drugs over the last 12 months including cannabis (29% vs. 9%).

- Similar proportions of current smokers and nonsmokers reported being overweight/obese (51% vs. 54%) and having a low activity level (sedentary or somewhat active) in leisure time (33% vs. 33%).
- A greater proportion of current smokers than nonsmokers were more likely to report having a mood disorder (16% vs. 7%), and not having a regular family doctor (17% vs. 11%; data not shown).

Chapter Summary

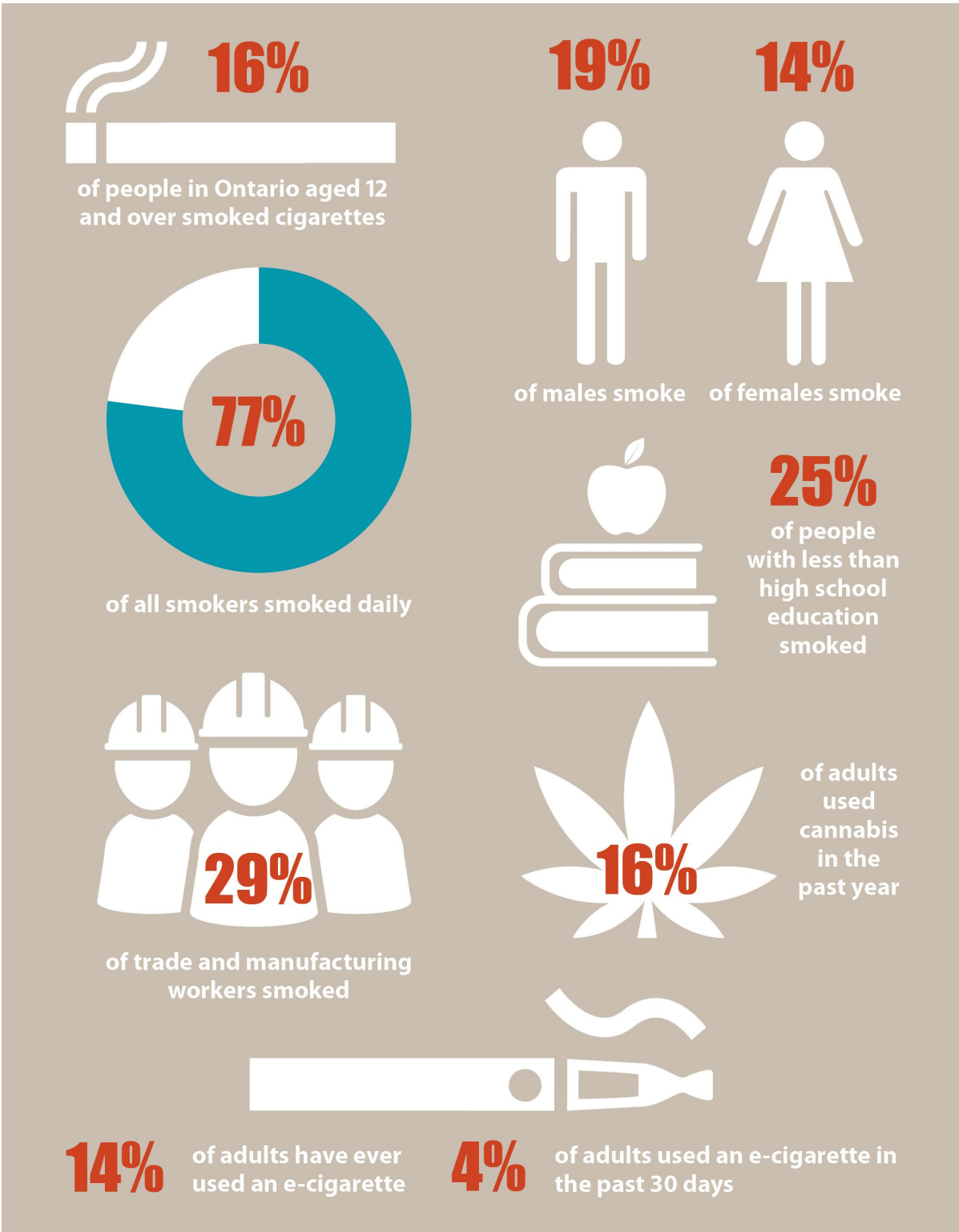
Tobacco use rates continue to decline at a painfully slow pace. Over the past five years, the rate of decline in current cigarette smoking is only one-third of a percentage point per year. This slow rate of progress is insufficient to achieving Ontario's stated goal of becoming the Canadian jurisdiction with the lowest smoking rate. It is far too slow to obtaining the federal government's desire to reach less than 5% prevalence of tobacco use by 2035. With past 30-day tobacco use rates of 20% (2,268,300 Ontarians 12 years and over), the less than 5% goal is very far away.

In addition to the 20% prevalence of past 30-day tobacco use, is the 3% of Ontarians (or 351,400 people) who have vaped e-cigarettes in the past 30 days. Vaping by young non-smokers presents new public health risks, from potential addiction and long-term regular vaping behaviours and from the potential of converting vapers who would have not otherwise smoked to tobacco users.

The impending legalization of cannabis presents additional public-health risks from smoking⁶ and from mixing tobacco with cannabis, as is done by 32% of current cannabis smokers.

Data in this chapter demonstrate that there has not been progress in alleviating inequities in the burden of tobacco use, as lower SES Ontarians remain far more likely to use tobacco.

Visual Summary of Key Indicators



Appendix: Data Tables

Table 2A-1: Current Smoking (Past 30 Days), by Sex, Ages 12+, Ontario, 2003 to 2015

Group	Year	Population Estimate	Value (%)	Lower 95% Confidence Limit	Upper 95% Confidence Limit
Females	2003	951,100	18.2	17.4	18.9
	2005	912,400	17.0	16.3	17.7
	2007	928,200	16.8	15.9	17.7
	2008	858,000	15.3	14.3	16.3
	2009	835,200	14.7	13.6	15.8
	2010	839,800	14.6	13.5	15.7
	2011	835,100	14.4	13.3	15.4
	2012	873,800	14.9	13.6	16.2
	2013	831,300	14.0	12.9	15.1
	2014	721,200	12.0	11.1	13.0
	2015	818,200	13.6	12.5	14.8
Males	2003	1,189,900	23.6	22.7	24.5
	2005	1,156,900	22.3	21.4	23.1
	2007	1,188,800	22.3	21.1	23.5
	2008	1,177,600	21.8	20.3	23.3
	2009	1,128,000	20.6	19.3	21.9
	2010	1,204,000	21.8	20.3	23.3
	2011	1,218,100	21.8	20.2	23.4
	2012	1,153,200	20.4	18.9	21.9
	2013	1,132,600	19.8	18.4	21.3
	2014	1,167,800	20.4	18.9	22.0
	2015	1,112,600	19.4	17.9	21.0
Total	2003	2,141,100	20.8	20.2	21.4
	2005	2,069,300	19.6	19.0	20.1
	2007	2,117,000	19.5	18.8	20.2
	2008	2,035,600	18.5	17.6	19.4
	2009	1,963,200	17.6	16.7	18.5
	2010	2,043,700	18.2	17.2	19.1
	2011	2,053,200	18.0	17.1	19.0
	2012	2,027,000	17.6	16.6	18.6
	2013	1,963,800	16.9	16.0	17.8
	2014	1,889,000	16.1	15.2	17.0
	2015	1,930,800	16.4	15.5	17.4

Note: Data table is for Figure 2-1.

Source: Canadian Community Health Survey 2003-2015.

Table 2A-2: E-Cigarette Use, Ages 18+, Ontario, 2013 to 2016

Year	Year	Population Estimate	Value (%)	Lower 95% Confidence Limit	Upper 95% Confidence Limit
Past-Month Use	2013	207,700	2 ^M	1.4	2.9
	2014	343,300	3.4	2.5	4.5
	2015	341,000	3.4 ^M	2.3	4.8
	2016	360,900	3.6 ^M	2.5	5.2
Past-Year Use	2013	703,500	7	5.7	8.4
	2014	1,021,600	10.1	8.5	11.8
	2015	1,113,000	11	9.0	13.2
	2016	954,500	9.6	7.8	11.8
Ever Use	2013	881,500	8.7	7.4	10.2
	2014	1,291,700	12.7	11.0	14.6
	2015	1,524,800	15	12.8	17.5
	2016	1,420,200	14.3	12.1	16.8

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

Source: Centre for Addiction and Mental Health monitor 2003-2016.

Table 2A-3: Ever Use of an E-Cigarette, by Age, Ontario, 2015 and 2016

Year	Year	Population Estimate	Value (%)	Lower 95% Confidence Limit	Upper 95% Confidence Limit
18+	2015	1,524,800	15	12.8	17.5
	2016	1,420,200	14.3	12.1	16.8
18-29	2015	664,700	33.2	25.5	42.0
	2016	544,900	29.1	21.6	37.9
30-44	2015	397,200	16.1	11.8	21.5
	2016	406,000	16 ^M	11.2	22.4
45-64	2015	327,900	9.2	7.2	11.7
	2016	420,500	11.5	9.2	14.3
65+	2015	64,700	3.6 ^M	2.3	5.6
	2016	48,700	2.6 ^M	1.7	4.1

Note: M = Marginal. Interpret with caution: subject to moderate sampling variability. [Data table is for Figure 2-3.](#)

Source: Centre for Addiction and Mental Health Monitor 2015 and 2016.

Table 2A-4: Daily and Occasional Smoking, Ages 18+, Ontario, 2011 to 2015

Primary Indicator	Year	Population Estimate	Value (%)	Lower 95% Confidence Limit	Upper 95% Confidence Limit
Occasional smokers	2011	394,200	3.5	3	3.9
	2012	394,700	3.4	2.9	4
	2013	409,500	3.5	3	4
	2014	343,300	2.9	2.5	3.3
	2015	446,800	3.8	3.3	4.4
Daily smokers	2011	1,659,100	14.6	13.7	15.4
	2012	1,632,300	14.2	13.3	15
	2013	1,554,400	13.3	12.5	14.2
	2014	1,545,600	13.2	12.3	14
	2015	1,484,000	12.6	11.8	13.4

Note: [Data table is for Figure 2-4.](#)

Source: Canadian Community Health Survey 2011-2015.

Table 2A-5: Current Smoking (Past 30 Days), by Jurisdiction, Ages 12+ and 19+, 2015

Geography	Age	Population Estimate	Value (%)	Lower 95% Confidence Limit	Upper 95% Confidence Limit
British Columbia	12+	522,800	13.1	11.9	14.4
	19+	515,400	14.1	12.9	15.5
Prince Edward Island	12+	18,400	14.6	12.1	17.6
	19+	18,000	15.6	12.9	18.8
Ontario	12+	1,930,800	16.4	15.5	17.4
	19+	1,886,800	17.6	16.7	18.7
New Brunswick	12+	107,800	16.7	14.4	19.4
	19+	107,000	18.1	15.5	21.0
Alberta	12+	612,400	17.6	16.1	19.2
	19+	607,000	19.2	17.6	21.0
Quebec	12+	1,254,400	17.8	16.8	18.9
	19+	1,232,600	19.0	17.9	20.0
Manitoba	12+	186,800	18.2	16.2	20.0
	19+	182,800	19.8	17.6	22.0
Nova Scotia	12+	150,800	18.6	16.6	21.0
	19+	147,400	19.8	17.6	22.0

Geography	Age	Population Estimate	Value (%)	Lower 95% Confidence Limit	Upper 95% Confidence Limit
Saskatchewan	12+	191,200	21.0	18.6	24.0
	19+	189,000	23.0	20.0	26.0
Newfoundland and Labrador	12+	111,000	24.0	21.0	27.0
	19+	107,600	25.0	22.0	29.0

Note: Ordered from lowest to highest Value for age 12+. [Data table is for Figure 2-5.](#)

Source: Canadian Community Health Survey 2015.

Table 2A-6: Current Smoking (Past 30 Days), by Occupation, Ages 15 to 75, Ontario, 2015

Group	Population Estimate	Value (%)	Lower 95% Confidence Limit	Upper 95% Confidence Limit
Natural Resources & Agriculture	28,000	32.0 ^M	21.0	46.0
Trades, Transport & Equip Operators	226,800	29.0	25.0	34.0
Manufacturing and Utilities	91,000	29.0 ^M	21.0	38.0
Sales & Service	343,800	21.0 ^M	18.4	25.0
Business, Finance & Admin	210,800	19.5	16.3	23.0
Management	111,200	16.4	12.7	21.0
Health	55,600	11.7 ^M	8.4	16.2
Education, Law, Social/Comm/Gov't Services	61,800	8.5	6.3	11.3
Natural & Applied Sciences	44,600	7.2 ^M	4.8	10.6
Art, Culture, Sport & Recreation	13,800	7.1 ^M	4.3	11.5

Note: M = Marginal. Interpret with caution: subject to moderate sampling variability. [Data table is for Figure 2-6.](#)

Source: Canadian Community Health Survey 2015.

Table 2A-7: Current Smoking (Past 30 Days), by Educational Attainment, Ages 18+, Ontario, 2006 to 2016

Year	Group	Population Estimate	Value (%)	Lower 95% Confidence Limit	Upper 95% Confidence Limit
2006	Completed high school	NA	32.0	27.0	37.5
	Less than high school	NA	27.6	21.6	34.4
	Some post-secondary	NA	20.0	16.7	23.8
	University degree	NA	9.5	7.0	12.6
2007	Completed high school	NA	26.8	22.4	31.8
	Less than high school	NA	35.1	28.4	42.4
	Some post-secondary	NA	25.4	21.6	29.5
	University degree	NA	7.6 ^M	5.1	11.1
2008	Completed high school	NA	27.6	22.7	33.1
	Less than high school	NA	30.0	23.4	37.4
	Some post-secondary	NA	20.1	16.7	24.1
	University degree	NA	10.4	7.8	13.7
2009	Completed high school	NA	24.2	19.6	29.6
	Less than high school	NA	31.2	24.4	38.9
	Some post-secondary	NA	19.0	15.7	22.8
	University degree	NA	10.8	8.0	14.4
2010	Completed high school	NA	22.7	18.9	27.0
	Less than high school	NA	23.3	18.1	29.4
	Some post-secondary	NA	21	18.1	24.2
	University degree	NA	8.9	6.9	11.4
2011	Completed high school	NA	19.5	16.1	23.5
	Less than high school	NA	27.0	21.0	34.0
	Some post-secondary	NA	17.4	14.7	20.5
	University degree	NA	7.7	5.9	9.9
2012	Completed high school	410,700	19.5	16	23.7
	Less than high school	243,700	26.3	20.6	33.0
	Some post-secondary	706,600	18.7	16.0	21.8
	University degree	295,400	9.2	7.1	11.8
2013	Completed high school	510,900	24.2	19.8	29.1
	Less than high school	281,500	29.1	22.6	36.6
	Some post-secondary	661,900	18.4	15.4	21.7
	University degree	240,300	7.2	5.4	9.4
2014	Completed high school	430,400	20.8	16.5	25.8
	Less than high school	239,800	29.6	23	37.2
	Some post-secondary	535,300	15.4	12.8	18.5
	University degree	299,600	8.2	5.9	11.2

Year	Group	Population Estimate	Value (%)	Lower 95% Confidence Limit	Upper 95% Confidence Limit
2015	Completed high school	401,300	19	15.9	22.6
	Less than high school	108,300	20.7	16	26.4
	Some post-secondary	606,900	16.3	14	18.9
	University degree	216,200	5.8	4.6	7.3
2016	Completed high school	396,400	19.8	15.9	24.3
	Less than high school	149,300	24.8	18.7	32.2
	Some post-secondary	498,600	14.4	11.8	17.6
	University degree	312,600	7.8	6.1	10

Note: M = Marginal. Interpret with caution: subject to moderate sampling variability. [Data table is for Figure 2-7.](#)
Source: Centre for Addiction and Mental Health Monitor 2006-2016.

Table 2A-8: Factors Associated with Smoking Status among Students in Grades 9 to 12, Ontario, 2015

Risk Factors	Current Smokers (%)	Nonsmokers (%)
Parents with ≤high school education	15.2 ^M	10.3
Live in >1 home	22.6 ^M	11.8
Self-rated poor health	28.0	7.7
No social cohesion at school	33.7	20.1
Delinquent Behaviour	37.7 ^M	5.0
HP visit for mental health problems	40.5	18.6
Gambling	50.4 ^M	33.3
Work for pay	70.2	42.7
Hazardous/Harmful drinking	71.0	17.7
Drug use problem	80.1	13.6

Note: Indicator definitions and information on data analysis provided in Appendix A. M = Marginal. Interpret with caution: subject to moderate sampling variability. [Data table is for Figure 2-8.](#)
Source: Ontario Student Drug Use and Health Survey 2015.

Table 2A-9: Factors Associated with Smoking Status, 18+, Ontario, 2015

Occupation	Current Smokers (%)	Nonsmokers (%)
Identify as being White	83	70
Unhealthy eating habits	80	69
Born in Canada	77	62
Male	57	47
Overweight	51	54
Excess of low-risk drinking	44	26
Renting current dwelling	38	22
Inactive	33	33
Sales & services occupations	29	23
Illicit drug use (past 12 months)	29	9
Trades, transport & equip operator occupations	19	10
Mood disorder	16	7

Note: [Data table is for Figure 2-9.](#)
Source: Canadian Community Health Survey 2015.

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