

# SMOKE-FREE ONTARIO

..... The Next Chapter - 2018

..... For a Healthier Ontario .....

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# THE TOBACCO BURDEN

## TOBACCO USE IS THE LEADING CAUSE OF PREVENTABLE DEATH AND DISEASE IN ONTARIO

Every day tobacco kills more Ontarians than alcohol, illicit substances, accidents, suicide and homicides combined. People who use tobacco are more likely to go to the hospital and stay longer. They are also likely to die younger. Tobacco products contain nicotine, which is a substance that makes them highly addictive.

Tobacco can be used in various ways, but smoking remains the most common method. Cigarette smoke contains more than 7,000 chemicals. It impacts almost every organ of the body, contributing to chronic diseases such as cancers, heart and lung diseases, and other diseases. Even people who do not smoke are affected by the health harms of tobacco through exposure to second-hand and/or third-hand smoke.

## TOBACCO USE COSTS ONTARIO BILLIONS OF DOLLARS EACH YEAR

Over two billion dollars a year is spent by Ontario to treat and care for people with smoking-related health concerns. The provincial economy loses over five billion dollars a year in lost productivity or missed days of work because of smoking-related health issues. The overall costs of tobacco to society are even higher given how litter and smoke from tobacco affects the environment.



# ONTARIO'S PROGRESS

The percentage of people who smoke in Ontario has decreased over the years. The provincial smoking rate is the third lowest in all of Canada with roughly one in five Ontarians who smoke. Over the past decade, Ontario has worked hard to reduce tobacco use in the province and has established itself as both a national and international leader in tobacco control. In 2005, the government created Smoke-Free Ontario encompassing Ontario's actions and investments in tobacco control, and combining evidence-based approaches to prevent children and young people from starting to smoke, helping Ontarians quit smoking and protecting Ontarians from exposure to second-hand smoke. Ontario's previous efforts, in partnership with Public Health Units, non-governmental organizations, health professionals and institutions, have provided people with the programs and services to live smoke-free.

Some key achievements of the programs and services that Ontario, together with its partners, has been able to deliver include helping people who smoke access:

- Counselling and supports in hospitals and community health care settings (e.g., family health teams, community health centres, etc.) to help quit smoking
- Phone counselling and online resources to help quit smoking
- No-cost nicotine replacement therapy in combination with counselling

## THE SMOKE-FREE ONTARIO ACT

For over a decade, Ontario has been putting policies in place to reduce tobacco use in Ontario and these policies have provided the legislative force needed to further protect the health of Ontarians. The *Smoke-Free Ontario Act (SFOA)*, which came into force in 2006, is an example of ground-breaking legislation that helps to reduce access to tobacco products and to protect workers and the public from the hazards of second-hand smoke. The SFOA imposes strict controls on the sale of tobacco to young people, restricts the display and promotion of tobacco at point-of-sale, and prohibits smoking in enclosed workplaces and enclosed public places, as well as other designated places.

# ONTARIO'S KEY TOBACCO CONTROL MILESTONES

## 2006

- Created *Smoke-Free Ontario Act (SFOA)* legislation to protect Ontarians from second-hand smoke
- Prohibited smoking in enclosed workplaces and enclosed public places

## 2009

- Protected children from exposure to second-hand smoke in motor vehicles

## 2010

- Prohibited the sale of most flavoured cigarillos and required that they be sold in packages of 20 or more

## 2015

- Prohibited smoking on patios, playgrounds and sports fields
- Created *Electronic Cigarettes Act (ECA)* legislation to regulate vapour products

## 2016

- Protected children from flavoured tobacco products
- Doubled the maximum fines for youth-related offences
- Prohibited indoor use of tobacco in waterpipe bars and restaurants
- Expanded outdoor smoke-free spaces (hospitals, psychiatric facilities, buildings owned by Province)

## 2017

- Prohibited the sale of menthol and clove-flavoured tobacco products

## 2018

- Implemented 100 per cent smoke-free hospitals
- Enacted *Smoke-Free Ontario Act (SFOA), 2017* to protect people from second-hand smoke and vapour
- Developed Smoke-Free Ontario Strategy



**SMOKING RATES HAVE  
DECREASED IN ONTARIO  
FROM 24.5% IN 2000  
TO 16% IN 2016**

Note: Smoking data is from Statistics Canada's Canadian Community Health Survey (CCHS). In 2014, CCHS redesigned its data collection methodology; therefore, 2016 data is not directly comparable to previous years.

# THE IMPERATIVE

Combatting tobacco use remains a significant challenge in Ontario. Despite widespread public knowledge about the harms of tobacco, and the significant investments in tobacco control by Ontario and its partners, the smoking rate has plateaued in recent years. Approximately two million Ontarians currently smoke and some groups — such as rural, LGBTQ and Indigenous communities, Northern Ontario residents and people of low socio-economic status — continue to have higher smoking rates than the provincial average. This speaks to complex underlying drivers making the issue challenging to solve.

Most people who smoke want to quit. Over a million Ontarians intend to quit each year, but only a small number of them are successful. Nicotine is highly addictive and it can take up to 30 quit attempts to be successful.

Ontario is committed to having the lowest smoking prevalence rate in Canada, but Ontarians face a number of barriers. Current challenges include gaps in service among a number of existing programs and services. In addition, there are gaps in existing e-cigarettes legislation and a lack of controls to protect Ontarians from the potentially harmful effects of second-hand smoke and vapour from medical cannabis.

## A CHANGING LANDSCAPE IN ONTARIO: NEW AND EMERGING PRODUCTS

Electronic cigarettes (also called e-cigarettes) have become widely available and are growing in popularity, especially among youth and young adults. E-cigarettes are battery-operated devices that heat an internal fluid, generating a vapour that the user inhales. Evidence on the risks and benefits of e-cigarettes is still emerging. The risks of exposure to e-cigarettes' second-hand vapour are uncertain at this time. As a result, Ontario will continue to take a precautionary approach on the sale, supply, display, promotion and use of e-cigarettes.

## MEDICAL CANNABIS

Unlike recreational cannabis, medical cannabis is used for its therapeutic benefits. Therefore, it will continue to be treated differently from recreational cannabis, which is addressed under the *Cannabis Act, 2017*. A primary concern of the government is to protect everyone from the potentially harmful effects of medical cannabis second-hand smoke and vapour.

# SMOKE-FREE ONTARIO STRATEGY: ROADMAP TO SUCCESS

## MOVING FORWARD

The Ontario government has developed a strategy to address the harms of tobacco smoke and vapour in a coordinated and comprehensive way. The Smoke-Free Ontario (SFO) Strategy will build on many of the existing programs, services and policies and add to this force through new strategic investments. The SFO Strategy will leverage efforts across the three strategic priorities of tobacco control (cessation, prevention, and protection) to address:

- gaps in current tobacco control infrastructure
- accessibility of tobacco products and vapour products
- demand for tobacco created by addiction, social acceptability and other factors
- potential health risks of new and emerging tobacco and vapour products, including e-cigarettes and heat-not-burn products
- minimizing exposure to second-hand smoke and vapour from tobacco, vapour products and medical cannabis

Across each strategic priority, the goal is to influence change at three different levels to ensure integration and comprehensiveness:

- individual and community-level (e.g., at-risk populations)
- program and service-level
- system-level (e.g., policy, legislation and regulations)

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### INDIVIDUALS

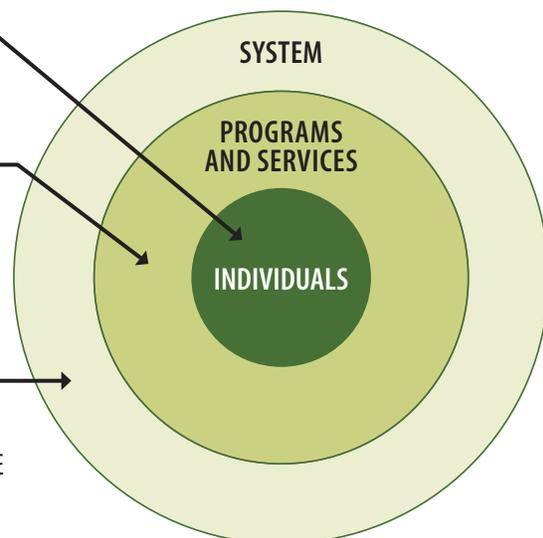
- TOBACCO USERS, FAMILY AND FRIENDS
- YOUTH AND YOUNG ADULTS
- INDIGENOUS AND OTHER PRIORITY POPULATIONS

### PROGRAMS AND SERVICES

- INTEGRATED SMOKING CESSATION DELIVERY SYSTEM
- PREVENTION PROGRAMMING IN SCHOOLS, WORKPLACES AND COMMUNITY SETTINGS
- PUBLIC EDUCATION AND OUTREACH

### SYSTEM

- LEGISLATIVE AND REGULATORY FRAMEWORK TO PROTECT AND PROMOTE THE HEALTH OF THE PEOPLE OF ONTARIO (*SMOKE-FREE ONTARIO ACT, 2017*)
- SURVEILLANCE AND MONITORING SYSTEM
- RESEARCH AND EVALUATION



Helping people who use tobacco to quit requires leadership across the country. Through the SFO Strategy, Ontario will continue to work collaboratively with provincial, federal and territorial partners to reach priority populations, and both develop and implement tobacco control solutions that meet the needs of Ontarians.

Ontario has a vision: that within one generation, Ontario will be free of the epidemic of disease, death and other harms caused by tobacco, and the potential harms caused by smoking and vaping of other substances.

To achieve this, Ontario's goals are to:

- Reduce the proportion of people who smoke in Ontario to 10 per cent by 2023
- Reduce exposure to the harmful effects of tobacco and the potentially harmful effects of other inhaled substances and emerging products (including medical cannabis)
- Reduce smoking-related health and social costs
- Reduce the number of smoking-related deaths by 5,000 each year

To meet these goals, the SFO Strategy focuses on the three strategic priorities of tobacco control: cessation, prevention and protection. The SFO Strategy sets out to:

- Increase the number of people who successfully quit using tobacco
- Prevent the initial and increased use of tobacco and vapour products
- Implement policies that reduce exposure to second-hand smoke and vapour; and explore opportunities to reduce the sale, supply and demand for tobacco and vapour products



**GOAL**  
REDUCE ONTARIO'S  
SMOKING RATE TO

**10%**  
BY 2023

REACHING THIS GOAL  
WOULD RESULT IN ALMOST  
**A MILLION FEWER**  
**PEOPLE WHO SMOKE**  
IN ONTARIO

The infographic features a photograph of a diverse family of six people (a woman, a man, a young girl, a young boy, and two older adults) walking together in a park. The text is overlaid on the left side of the image, with a green circular graphic containing the number '10%' and 'BY 2023'. The overall design is clean and uses a green color scheme.

# STRATEGIC PRIORITIES

## CESSATION

### Goal

Increase the number of people who successfully quit using tobacco by 80,000 each year.

### Approach

**Individual:** Motivate people who use tobacco to quit and increase their awareness of the cessation supports available.

**Programs and Services:** Create an integrated smoking cessation delivery system that increases the reach, access and availability of cessation aids and meets the needs of people who use tobacco in Ontario.

**System:** Create supportive environments through tax, pricing and smoke-free policies to motivate people who use tobacco to quit.

## ACTIONS

# 1

### ONTARIO WILL PROVIDE ACCESS TO QUALITY CESSATION SERVICES THROUGH ONE WINDOW

The government will implement an integrated smoking cessation delivery system, which will serve as a coordinated system of services to support people throughout their journey to quitting, eliminate duplication and effectively use resources.

The integrated delivery system will ensure coordination among health care, community and population-based services, and provide systematic referrals to ensure seamless services, supports and follow up for people who use tobacco and want to quit. The government will help people who are looking to quit access treatment efficiently and effectively. This includes:

- an easily recognized brand for all cessation services
- an online cessation hub
- 24/7 provincial quitline with wrap-around services (by telephone and online)

# 2

## ONTARIO WILL ENSURE EVIDENCE-BASED SMOKING CESSATION SERVICES ARE IMPLEMENTED IN PUBLIC HOSPITALS AND IN COMMUNITY SETTINGS

Smoking cessation is a critical element of chronic disease management. Therefore, the government is leveraging its network of health system partners so that people who use tobacco are offered high-quality support with smoking cessation. A systematic approach to cessation services will be used across the continuum of care including prevention, primary care, acute care, rehabilitation, chronic care, home care and palliative care to ensure access is universal. Working with health care providers and community partners, the government will ensure evidence-based smoking cessation services in public hospitals and communities across the province to create an integrated smoking cessation delivery system.

### SFO STRATEGY IN ACTION:

**The Ottawa Model for Smoking Cessation (OMSC)** is achieving organizational change in cessation within various clinical settings by changing practices within hospitals, primary care and mental health facilities, and embedding evidence-based cessation services into care pathways and other related patient care processes.

# 3

## ONTARIO WILL ENSURE PEOPLE RECEIVE CONSISTENT, HIGH-QUALITY CESSATION SERVICES

People who smoke often need supports to successfully quit. To assist these people, the government will work with partners to develop and implement quality guidelines for health service providers to ensure that smoking cessation services are part of routine health care. A standardized approach to cessation in health care settings will ensure that all Ontarians receive consistent and effective care. The government, with its partners, will ensure that cessation service providers receive evidence-based training so that services that help achieve smoking quits are accessible to all Ontarians.

## **SFO STRATEGY IN ACTION:** **The Centre for Addiction and Mental Health (CAMH)**

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**Smoking Treatment for Ontario Patients (STOP)** study, now a program, started in 2006. Since then, it has been building partnerships with other Smoke-Free Ontario-funded organizations, and engaging and helping over 100,000 people who smoke make a quit attempt. STOP has been implemented in Ontario's Family Health Teams, Community Health Centres, Aboriginal Health Access Centres, Public Health Units, Addiction Agencies and other health sectors, ensuring people who use tobacco have access to tobacco dependence treatment including no-cost nicotine replacement therapy.

# 4

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## **ONTARIO WILL INCREASE ACCESS TO CESSATION AIDS**

To help Ontarians quit smoking, the government is increasing access to no-cost nicotine replacement therapy (NRT). The government will work with delivery partners and health care providers across the province to reach more people who use tobacco by providing access to smoking cessation interventions including enhanced access to NRT in combination with counselling support. In a phased approach, the government will increase access to no-cost NRT in public hospitals and communities as part of a cessation system, and to Ontarians who are interested in quitting smoking.

# 5

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## **ONTARIO WILL OFFER MORE INTENSIVE SUPPORTS FOR PRIORITY POPULATIONS**

It is important that the right supports are provided to populations with high smoking rates. Populations at higher risk for tobacco use may require tailored and more intensive supports.

Indigenous communities, particularly First Nations living on-reserve, are an example of a priority population experiencing higher prevalence rates for commercial tobacco use. The government is committed to working with Indigenous communities to improve access to culturally appropriate cessation services. The government will also work with community service providers to reach other priority populations at the local level (e.g., new immigrants, rural communities). In addition, the government will maintain its focus on supporting equitable access to cessation programs by continuing to partner with organizations and agencies in the community to deliver cessation services in French.

## EXAMPLE PRIORITY POPULATIONS

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- Indigenous Peoples
- people with chronic diseases or a number of serious health problems
- people with mental health and addiction issues
- people who work in the industrial and service sectors
- young adults
- people who are at high risk of poor health outcomes from smoking (e.g., people in hospital) and people whose smoking will have a negative impact on their own or others' health (e.g., pre and postnatal women)
- cancer patients

**“ ONTARIO IS COMMITTED TO ITS GOAL OF HAVING THE LOWEST SMOKING RATE IN CANADA...TOBACCO TAXES ARE CRITICAL IN SUPPORTING PROVINCIAL HEALTH OBJECTIVES, SMOKING CESSATION AND PREVENTION. ”**  
2018 ONTARIO BUDGET

## 6

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### ONTARIO WILL INSPIRE PEOPLE TO QUIT

Public education on the health harms and the benefits of quitting can help increase the attempts to quit by people who use tobacco. The government will run targeted public education campaigns to inform Ontarians about better access to smoking cessation support and services, and will also continue to run a cessation campaign indicating that setbacks are a natural part of the quitting journey. Reframing failure this way can have a positive impact on quit intentions and attitudes towards quitting, and help motivate smokers to quit.

## 7

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### ONTARIO WILL EXPLORE INCREASING THE TOBACCO TAX RATE

Through the Ontario 2018 Budget, the government increased tobacco taxes by \$4 a carton of cigarettes and will again in 2019. This will bring Ontario's rate closer to the national average.

Research shows that a 10 per cent increase in total tobacco price would result in an approximate four (4) per cent reduction in cigarette demand. Tobacco tax increases will help support smoking cessation efforts under the SFO Strategy by motivating smokers to quit.

# STRATEGIC PRIORITIES

## PREVENTION

### Goal

Prevent the initial and increased use of tobacco and vapour products such that no more than 10,000 people start smoking each year.

### Approach

**Individual:** Develop actionable knowledge, skills and resiliency in youth and young adults so they can be smoke- and vapour-free.

**Programs and Services:** Partner on initiatives targeting youth and young adults in schools, workplaces and community settings to reduce social exposure to the use of tobacco and vapour products.

**System:** Implement a cohesive approach to reducing access and social exposure to tobacco and vapour products by building supportive environments through tax, pricing and other policies.

## ACTIONS

### 1

#### ONTARIO WILL FOCUS ON THOSE MOST AT RISK WITH TAILORED SUPPORT

Ontario will align with the federal government's tobacco control strategy to place an emphasis on reaching specific high-risk populations. Those at greater risk for starting to use tobacco include Indigenous youth and young adults, and those transitioning into post-secondary education, or into the workforce. Peer pressure and elevated mental health stressors as well as risks at different life stages can also increase people's risk of using tobacco. The government will work with Public Health Units (PHUs) to reduce tobacco use at the local level. In addition, the government will provide guidance, resources and support to help PHUs implement effective prevention interventions with priority populations in their communities. The government will work with Indigenous communities to develop and implement culturally appropriate prevention interventions to reduce uptake of commercial tobacco, while respecting traditional practices.

## SFO STRATEGY IN ACTION:

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**The ministry partners with Aboriginal Health Access Centres (AHAC)** to provide culturally appropriate health promotion and chronic disease prevention initiatives in schools and in community organizations that focus on tobacco prevention, tobacco cessation and other chronic disease risk factors.

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**The Ontario Federation of Indigenous Friendship Centres** delivers smoking prevention and cessation supports through the Urban Aboriginal Healthy Living Program.

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**The Aboriginal Tobacco Program (ATP)** delivers tailored campaigns and workshops to Indigenous communities on commercial tobacco prevention, cessation and protection to reduce the high smoking rates. The ATP builds capacity towards Tobacco-Wise communities that are empowered to make the necessary changes to protect their well-being and that of their friends and community.

## 2

### ONTARIO WILL RAISE AWARENESS OF PREVENTION

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The government will run targeted public education campaigns to inform Ontarians about new vaping and smoking rules as part of efforts to prevent youth and young adults from taking up smoking and vaping. The government will also continue to work with community partners to educate youth and young adults in schools so they can remain smoke- and vapour-free. Ontario will support communication efforts that raise awareness on tobacco as a risk factor for serious diseases. In addition, Ontario will work with partners to educate Ontarians and significantly impact the burden of tobacco through prevention. This approach will align with the federal government's effort to promote healthy living and prevent chronic disease caused by risk factors such as tobacco.

# 3

## ONTARIO WILL KEEP OUR YOUTH AND YOUNG ADULTS SAFE FROM TOBACCO AND VAPOUR PRODUCTS

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The accessibility of tobacco products and vapour products influences youth and young adults' attitudes towards the use of these products and their susceptibility to smoking.

Ontario is strengthening the laws with respect to how tobacco and vapour products can be displayed and promoted in stores. The new law prohibits branded accessories (e.g., lighters) from being displayed in all stores. The new law also restricts specialty tobacco and vapour product stores from displaying products that are visible to the public from outside the store and prohibits anyone less than 19 years of age from entering these stores. By prohibiting the sale of tobacco products and e-cigarettes to anyone less than 19 years of age and by limiting exposure to these products, the government is helping to discourage youth and young adults from starting to use tobacco and vapour products.

### **DID YOU KNOW?**

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Evidence shows that almost 90 per cent of adults who ever smoked daily (aged 30–39) reported trying their first cigarette by the time they were 18 years old — and nearly two-thirds of them began smoking daily by this age.

# STRATEGIC PRIORITIES

## PROTECTION

### Goal

Implement policies that reduce exposure to second-hand smoke and vapour.

### Approach

**Individual:** Protect people from exposure to second-hand smoke and vapour.

**Programs and Services:** Build training capacity for tobacco inspectors and enforcement managers, as well as enforcement of an expanded legislative and regulatory framework.

**System:** Create and support adoption of smoke- and vapour-free environments to protect people from the harmful effects of tobacco smoke and the potentially harmful effects of vapour.

## ACTIONS

# 1

### ONTARIO WILL CLOSE THE GAPS ON TOBACCO AND VAPOUR PRODUCT LAWS

The market landscape of new and emerging tobacco and vapour products continues to evolve rapidly. Ontario is responding by strengthening existing smoking and vaping laws to protect people from exposure to tobacco smoke and vapour products. The new *Smoke-Free Ontario Act, 2017* (SFOA, 2017), which will come into force July 1, 2018, will replace both the previous *Smoke-Free Ontario Act* (SFOA) and the *Electronic Cigarettes Act, 2015* (ECA) with a single legislative framework. A single law will make it clearer for both the public and retailers to understand and comply with Ontario's rules related to the sale, supply, display, promotion and use of tobacco and vapour products. The new Act also regulates the smoking and vaping of medical cannabis and will provide clarity to medical cannabis users on where they can smoke and vape their medical cannabis.

The SFOA, 2017 also provides additional flexibility to add other products or substances in the future that will be subject to the Act's restrictions on the sale, supply, display, promotion and use.

## 2

### ONTARIO WILL CREATE MORE SMOKE- AND VAPOUR-FREE SPACES

Prohibiting the smoking of tobacco in more outdoor areas can help people who smoke to smoke less. It can also prompt people to consider quitting, and if they have quit, or are trying to quit, this can help them stay on track by reducing visual cues for smoking. It also protects other Ontarians from exposure to second-hand smoke.

Under the new law, the use of an e-cigarette and the smoking and vaping of medical cannabis would be prohibited in the same places where the smoking of tobacco is currently prohibited. The law also expands smoke- and vapour-free areas around outdoor restaurants and bar patios, and areas around schools and children and youth recreational facilities.

## 3

### ONTARIO WILL GIVE OUR FRONT-LINE PARTNERS THE TOOLS THEY NEED

Ontario will continue to align with the federal government's efforts to combat the unregulated tobacco market. Ontario will also leverage partnerships with tobacco authorities at all levels to implement activities, including policy and surveillance interventions, to monitor and reduce the availability of unregulated tobacco.

To optimize oversight of unregulated tobacco in retail locations, Ontario will collaborate across all levels of government on joint inspections and enforcement. This cooperative approach will leverage existing resources and enhance coordination and effectiveness of inspection activities to address non-compliance under both the *Tobacco Tax Act* and the *Smoke-Free Ontario Act, 2017* (SFOA, 2017).

In addition, the government will continue to support provincial and federal policies to regulate the manufacturing, sale, labelling and promotion of tobacco products to reduce the health consequences of tobacco use. The government will enhance Public Health Unit front-line compliance and enforcement knowledge and expertise by aligning training for inspectors and enforcement managers with common foundational training delivered across Ontario's regulatory and compliance ministries, agencies and other authorities. This model supports a modern compliance approach by providing the Public Health Units' tobacco inspectorate with greater access to resources, knowledge and expertise, training and best practices from across organizations.

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# POTENTIAL FUTURE CONSIDERATIONS

Even as this report is being written, new evidence on tobacco and vapour products is emerging. As the SFO Strategy is being implemented, the government will continue to work with scientific experts, as well as tobacco control and health service partners, to monitor the evidence, and to identify opportunities to implement effective initiatives to impact the burden of tobacco.

## 1 ONTARIO WILL EXPLORE WAYS TO REDUCE THE AVAILABILITY OF TOBACCO PRODUCTS

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Evidence shows that when tobacco is harder to obtain, fewer people start smoking. Distancing points of sale of tobacco from where children and youth congregate, and other priority locations, make these products less available to priority populations.

The government will explore options to reduce the availability of tobacco products sold at retail locations in the province (e.g., retail density and zoning restrictions).

## 2 ONTARIO WILL EXPLORE OPPORTUNITIES TO FURTHER EXPAND SMOKE- AND VAPOUR-FREE POLICIES

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When people are exposed to others using tobacco or vapour products it not only has health impacts from second-hand smoke or vapour, but it creates the impression that the use of tobacco and vapour products is common and socially acceptable. Limiting exposure to second-hand smoke and vapour and changing perceived norms on smoking can reduce the demand for these products.

The government will work with community partners to explore additional policies to create more smoke- and vapour-free public spaces and reduce social cues to smoking and vaping (e.g., smoke and vapour-free post-secondary campuses, outdoor workplace smoking policies).

## 3 ONTARIO WILL EXPLORE MEASURES TO INCREASE TRANSPARENCY

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The government will explore approaches to increase transparency and disclosure of industry practices to ensure health tobacco policies are created in the best interest of Ontarians.

# ENABLING SUCCESS

The government believes that activities that extend across all areas of focus are critical to helping the SFO Strategy achieve its goals.

## ONTARIO WILL PRIORITIZE A RESEARCH AND EVIDENCE-BASED APPROACH

Ontario will align itself with the federal government's evidence-based approach, by utilizing data from a variety of sources including surveillance, research and evaluation. Ontario is committed to supporting evidence that contributes to effective tobacco control by developing a coordinated research agenda that is responsive to emerging issues and relevant to the government, its partners and communities.

The province wants to get the most out of investments that make a difference in people's lives. The government is committed to funding programs based on evidence, and will encourage partners to work together towards implementing interventions that work and have a positive impact.

### SFO STRATEGY IN ACTION:

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The government invests in tobacco control research as part of the **Health System Research Fund (HSRF)**. A number of tobacco research projects on various topics to inform tobacco policy, program development and strategic planning going forward are currently being funded.

## ONTARIO WILL BUILD CAPACITY IN THE COMMUNITY

The government will help strengthen the ability of the public health system by providing leadership to build competency in the field. Community development through training and public education and awareness will be supported.

# TRACKING OUR PROGRESS

## ONTARIO WILL TRACK PROGRESS AND REPORT BACK ON SUCCESS

To ensure that the SFO Strategy is meeting its goals, the government will look at the current state and assess the gaps to achieving its target (reducing the proportion of people who smoke to 10 per cent). Ontario will work with partners to build a comprehensive data backbone to provide a clearer picture of the impacts being made. It will work with partners to organize all the important indicators from different sources into a coordinated system and plan how best to measure progress.

The government will work with internal and external partners to find new measures to strengthen the database, and enhance existing internal data collection systems to monitor trends and address gaps and needs.

### SFO STRATEGY IN ACTION:

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**The Tobacco Inspection System (TIS)** is a data collection system that is currently used to collect inspection data for compliance with the SFOA and ECA. Building off TIS and developing system enhancements will provide a platform for standardized reporting and monitoring of key performance indicators.

Ontario will track population health measures related to smoking and vaping that are available, including:

- exposure to second-hand smoke and vapour
- locations of second-hand smoke exposure
- smoking-related deaths in non-smokers
- smoking and vaping use
- smoking-related mortality

- Quitting rates across the province and by different groups of people (e.g., different age groups, priority populations)
- Quit attempts across the province and by different groups of people (e.g., different age groups, priority populations)

To ensure transparency and accountability, the government will report on progress annually and provide context for the data to support evidence-based public health decisions.

## ONTARIO WILL EVALUATE THE SFO STRATEGY'S PERFORMANCE AND LOOK FOR WAYS TO IMPROVE OUTCOMES

The government is committed to evaluating the SFO Strategy's programs and policies to allow for continual improvements, insight and information sharing, and to identify what is working and making a positive difference.

In an ever-changing environment, new opportunities will arise and Ontario may also face unexpected challenges. Regular and meaningful evaluations of the SFO Strategy's activities will be key to uncovering opportunities and identifying successful investments.

The government will develop an evaluation plan that focuses on actionable measures of the SFO Strategy's programs and services such as:

- Who is being reached?
- Are the programs, services and policies doing what they are intended to do?
- Are we meeting the needs of both people who use tobacco and stakeholders?



# CONCLUSION

The Smoke-Free Ontario Strategy reflects the government's commitment to reducing the burden of tobacco and vapour products in Ontario and moves the province one step closer to ending the epidemic of tobacco-related disease. The strategy continues to build on Ontario's momentum and enables Ontarians to live smoke- and vapour-free. The Smoke-Free Ontario Strategy is poised for success because of its ability to address both tobacco and vapour products in a coordinated way as well as its flexibility in addressing new products. Ontario will continue to leverage local and national partnerships to take on a complex and ever-changing issue with determination and confidence.

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