

### A. RRFSS Provincial Sample Pilot Project (PSPP)

The RRFSS PSPP is intended to provide reliable and representative estimates for 2011 RRFSS indicators for Ontario as a whole, and in so doing:

- Provide a valid comparator for local health unit results for selected indicators;
- Allow for a reduction in RRFSS “core” content; and
- Provide a more flexible, timely system by which to collect provincially-relevant risk factor surveillance data than is currently available.

The provincial sample includes over 1800 interviews, with the number of interviews proportionate to the size of the health units’ populations. Within households, the adult with the most recent birthday is selected to participate in the survey.

### B. PSPP Evaluation

The evaluation of the RRFSS PSPP is supported by Locally-Driven Collaborative Project funding through Public Health Ontario.

The purpose of the PSPP evaluation is to summarize the implementation and results of the RRFSS PSPP, documenting what worked well and why, what the challenges were, what the benefits of the PSPP were and whether or not they were worth the costs.

The information will be used to inform decisions related to future provincial sampling in RRFSS.

### C. Data Collection Period

January - December 2011  
(Data was collected for Ontario and for all RRFSS-participating health units during this time period)

Only RRFSS participating health units who agreed to share their data have been included in this report.

### D. Definitions

Current smokers include individuals who have smoked 100 cigarettes in their lifetime and currently smoke everyday or some days. Former smokers include individuals who have smoked 100 cigarettes in their lifetime and currently do not smoke. Never smoked includes individuals who have never smoked at least 100 cigarettes in their lifetime

A 95% confidence interval (CI) refers to the range of values that has a 95% chance of including the ‘true’ estimate. A large CI means that there is a large amount of variability or imprecision. When CI’s do not overlap, estimates are significantly different. CI’s were selected as the measure of significance due to their conservative nature and transparency; there is less chance of incorrectly identifying a significant difference, which is important given the multiple tests of significance. CI’s are reported in brackets or presented as  $\pm$  in the graphs. CI’s for Ontario are also presented in Figure 3 using a dashed line (---).

## Tobacco Use

### PURPOSE OF MODULE

The purpose of this RRFSS module is to assess tobacco use among adults in the population. The government of Ontario created a Smoke-Free Ontario Strategy, ultimately intended to: help smokers quit, protect non-smokers from exposure to second-hand smoke and encourage young people to never start<sup>1</sup>. In addition, Cancer Care Ontario’s 2020 target for the proportion of current adult smokers aged 18 and over is 5%<sup>2</sup>.

### KEY FINDINGS

- In 2011, 16% (95% CI, 14-18) of adults aged 20 and over in Ontario were current smokers, 31% (95% CI, 28-33) were former smokers and 53% (95% CI, 51-56) had never smoked (see Table 1).

### Sex

- In 2011, the proportion of current and former smokers in Ontario was higher in males than in females, however, these differences were not statistically significant (see Figure 1).
- In 2011, the proportion of females who had never smoked in Ontario was significantly higher than the proportion of males who had never smoked (see Figure 1).

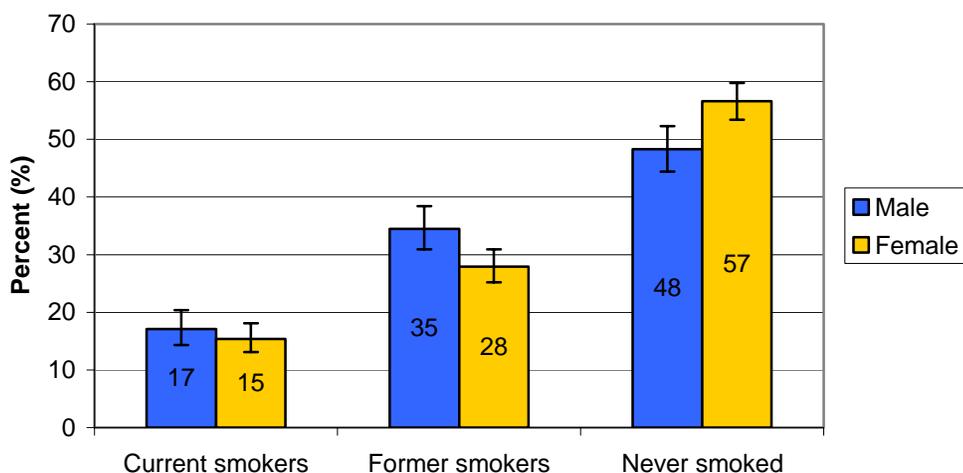
### Age Group

- In 2011, the proportion of current smokers in Ontario was lowest among adults aged 65 and over and highest among adults aged 20-44, however, these differences were not statistically significant (see Figure 2).
- In 2011, the proportion of former smokers in Ontario was lowest among adults aged 20-44 and highest among adults aged 65 and over. The differences were statistically significant between all age groups (see Figure 2).
- In 2011, the proportion of Ontario adults aged 20-44 who had never smoked was significantly higher than the proportion of Ontario adults aged 45 and over who had never smoked (see Figure 2).

### Health Unit

- In 2011, the proportion of adults who were current smokers was significantly higher in Brant, Chatham-Kent, Haldimand-Norfolk and Sudbury than in Ontario (see Table 1 and Figure 3).
- In 2011, the proportion of adults who were former smokers was significantly higher in Haliburton, Kawartha, Pine Ridge and significantly lower in Peel and York than in Ontario (see Table 1).
- In 2011, the proportion of adults who had never smoked was significantly higher in Peel and York and significantly lower in Brant, Haldimand-Norfolk, Haliburton, Kawartha, Pine Ridge and Sudbury than in Ontario (see Table 1).

**Figure 1: Tobacco Use, Ontario Adults Aged 20 and Over, By Sex, 2011**



**D. Definitions Continued**

Coefficient of variation (CV) refers to the precision of the estimate. When the CV is between 16.6 and 33.3, the estimate should be interpreted with caution because of high variability. Estimates with a CV of 33.3 or greater are not reportable.

**E. Limitations**

RRFSS results are self-reported and may not necessarily be recalled accurately. Individuals not living in households (such as those in prison, hospitals, or the homeless) are excluded. Similarly, individuals who live in a household without a landline telephone (about 12% of all Ontario households<sup>3</sup>) will not be reached through RRFSS. Thus the percentages may not represent the true estimates for the general population as respondents may have different characteristics than people who have not been included in the survey.

Household (HH) weights were used for any questions related to individuals. The HH weight adjusts for the fact that adults from larger HH are less likely to be selected than individuals from smaller HH. Provincial results were also weighted to account for the actual distribution of adults among health units in Ontario. Estimates were multiplied by the 2006 population for the health unit to adjust for this difference.

Don't know and refused responses were excluded from the analysis.

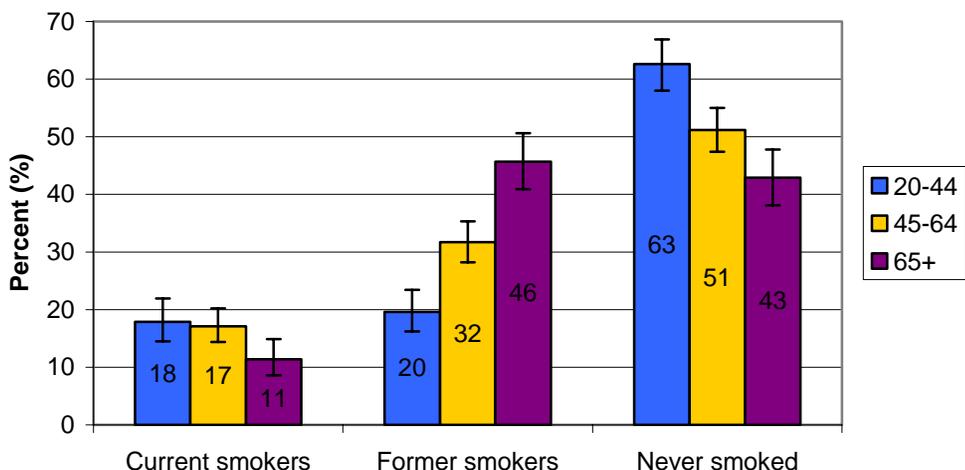
Non-rounded estimates and confidence intervals were used when determining significant differences; however, rounded numbers were used for the presentation of data, thus estimates may not total 100 and confidence intervals may appear to overlap.

**F. References**

- 1 Ministry of Health and Long-Term Care (2011). Smoke-Free Ontario Legislation. Retrieved May 2012, from <http://www.mhp.gov.on.ca/en/smoke-free/legislation/default.asp>
- 2 Cancer 2020 Steering Committee (2003). Summary of Cancer 2020 Targets and Measures. Retrieved May 2012, from <https://www.cancercare.on.ca/common/pages/UserFile.aspx?fileId=13490>
- 3 Ialomiteanu, A., Adlaf, E. M. (2011). CAMH Monitor 2010: Technical Guide. Retrieved May 2012 from [http://www.camh.ca/en/research/Documents/www.camh.net/Research/Areas\\_of\\_research/Population\\_Life\\_Course\\_Studies/CAMH\\_Monitor/CM2010\\_TechDoc.pdf](http://www.camh.ca/en/research/Documents/www.camh.net/Research/Areas_of_research/Population_Life_Course_Studies/CAMH_Monitor/CM2010_TechDoc.pdf)

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**Figure 2: Tobacco Use, Ontario Adults Aged 20 and Over, By Age Group, 2011**



**Table 1: Tobacco Use, Ontario Adults Aged 20 and Over, By Health Unit, 2011**

Health Unit/Province	Current Smokers		Former Smokers		Never Smoked	
	Percent (CI)	↑ ↓	Percent (CI)	↑ ↓	Percent (CI)	↑ ↓
<b>ONTARIO</b>	<b>16 (14-18)</b>	-	<b>31 (28-33)</b>	-	<b>53 (51-56)</b>	-
Brant	23 (21-26)	↑	31 (29-34)		45 (42-48)	↓
Chatham-Kent	21 (18-23)	↑	30 (27-33)		50 (47-53)	
Durham Region	16 (15-18)		29 (27-32)		54 (52-57)	
Haldimand-Norfolk	21 (18-23)	↑	36 (33-38)		44 (41-47)	↓
Haliburton, Kawartha, Pine Ridge	18 (16-21)		37 (34-40)	↑	45 (42-48)	↓
Halton	13 (11-16)		32 (29-35)		55 (52-58)	
Kingston	17 (15-19)		34 (31-37)		49 (46-52)	
Leeds, Grenville and Lanark	17 (15-20)		32 (29-36)		50 (47-54)	
Middlesex-London	16 (14-18)		29 (26-31)		56 (53-59)	
Niagara	17 (15-20)		31 (28-34)		52 (49-55)	
Ottawa	15 (13-18)		33 (30-36)		52 (49-55)	
Peel	14 (12-16)		22 (20-25)	↓	64 (61-67)	↑
Simcoe-Muskoka District	20 (18-23)		31 (28-34)		49 (46-53)	
Sudbury	23 (21-26)	↑	32 (29-35)		45 (42-48)	↓
Waterloo	18 (15-20)		27 (24-30)		56 (53-59)	
York	14 (12-16)		22 (20-25)	↓	64 (61-67)	↑

↓ Health Unit was significantly lower than Ontario      ↑ Health Unit was significantly higher than Ontario

**Figure 3: Current Smokers, Ontario Adults Aged 20 and Over, By Health Unit, 2011**

