

**Report to
Rapport au:**

**Ottawa Board of Health
Conseil de santé d'Ottawa
4 March 2019 / 4 mars 2019**

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**Submitted by
Soumis par:**

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Ward: CITY WIDE / À L'ÉCHELLE DE LA VILLE File Number: ACS2019-OPH-HPP-0002

SUBJECT: LET'S CLEAR THE AIR (LCA) 3.0

OBJET: PLAN PURIFICATIONS L'AIR 3.0

REPORT RECOMMENDATIONS

That the Board of Health for the City of Ottawa Health Unit:

- 1. Approve the proposed Let's Clear the Air 3.0 Plan, as outlined in this report;**
- 2. Direct Ottawa Public Health staff to work with Emergency Protective Services staff on harmonizing current City of Ottawa smoke-free by-laws;**
- 3. Approve that the Chair of the Board of Health write a letter to the Ontario Minister of Health recommending that action be taken to reduce the appeal of vaping products to youth and prohibit point of sale advertising of vaping products, as outlined in Document 1 attached, and that the Mayor of Ottawa be provided the opportunity to co-sign the letter;**

4. Approve the comments in response to the Health Canada *Notice of Intent – Potential Measures to Reduce the Impact of Vaping Products Advertising on Youth and Non-users of Tobacco Products*, as outlined in Document 2; and
5. Subject to the approval of Recommendation 4, approve that the Chair of the Board of Health write a letter to the federal Minister of Health recommending that measures be introduced without delay to further restrict advertising of vaping products, enhance health warnings and require plain and standard packaging for vaping products, and that the Mayor of Ottawa be provided the opportunity to co-sign the letter.

RECOMMANDATIONS DU RAPPORT

Que le Conseil de santé de la circonscription sanitaire de la Ville d'Ottawa :

1. approuve le plan Purifions l'air 3.0 proposé, tel que détaillé dans le présent rapport;
2. demande au personnel de Santé publique Ottawa de collaborer avec celui des Services de protection et d'urgence afin d'harmoniser les règlements sans fumée actuels d'Ottawa;
3. approuve que le président du Conseil de santé écrive une lettre au ministre de la Santé et des Soins de longue durée de l'Ontario afin que des mesures soient prises pour diminuer l'attrait des produits de vapotage pour les jeunes et en interdire la publicité dans les points de vente, tel que détaillé dans le Document 1 ci-joint, et que le maire d'Ottawa ait l'occasion de cosigner ladite lettre;
4. approuve les commentaires en réponse à l'*Avis d'intention – Des mesures à l'étude visant à atténuer l'impact de la publicité des produits de vapotage sur les jeunes et les non-utilisateurs de produits de tabac* de Santé Canada, fournis dans le Document 2;
5. approuve, sous réserve de l'approbation de la recommandation 4, que le président du Conseil de santé écrive une lettre au ministre de la Santé fédéral afin de recommander que les mesures visant à restreindre davantage la publicité des produits de vapotage, à améliorer les mises en garde relatives à la santé et à exiger que les emballages des produits de vapotage soient neutres et génériques, soient prises sans attendre, et que le maire d'Ottawa ait l'occasion de cosigner ladite lettre.

EXECUTIVE SUMMARY

This report outlines Ottawa Public Health's proposed updated approach to addressing smoking of tobacco, cannabis and vaping. In 2012, the Ottawa Board of Health approved the ["Let's Clear the Air: A Renewed Strategy for a Smoke-Free Ottawa"](#). This strategy was designed to protect children and non-smokers from second-hand smoke (SHS) while reducing smoking rates by expanding smoke-free outdoor spaces in the City of Ottawa to include parks, city properties, beaches, outdoor markets as well as restaurant and bar patios. Since 2012, Ottawa Public Health (OPH) has been working with partners and other City departments to address growing concern about the health effects from non-tobacco substances, such as shisha (water-pipe) product, electronic cigarettes (e-cigarettes) and cannabis that produce smoke and/or vapour in public places and workplaces. This work included: introducing a new City of Ottawa Water-Pipe By-law (Let's Clear the Air 2.0), working collaboratively with City departments, and provincial partners to implement OPH's 4-point plan to address cannabis legalization, prepare for the legalization of cannabis, as well as working with schools and youth to address the growing number of youth who vape.

Local data demonstrates that e-cigarette use is increasing among youth; youth are using e-cigarettes that contain nicotine and youth believe that regular vaping presents only slight or no health risks. In 2017, e-cigarette use among Ottawa's youth surpassed tobacco use, with 10% of Ottawa students having used an e-cigarette, compared to 6% that smoked cigarettes in the past 12 months.ⁱ Furthermore, cannabis use in the past year, among Ottawa students in grades 7 to 12 (18%), is similar to students in the rest of Ontario (19%).

Local data also demonstrates that there are misconceptions about the risks associated with vaping products, especially among youth. Almost half (48%) of Ottawa students in grade 9-12 believe that regular vaping presents only slight or no health risks.ⁱⁱ Some reasons why youth are using these products include: curiosity, flavoring/taste and the perception that they are non-harmful to health.ⁱⁱⁱ In addition, 71% of grade 7-12 students feel that smoking cannabis regularly carries a medium or great risk of health harm.^{iv}

With an increase in youth vaping in Ottawa, the misconceptions about the health effects of vaping, and the new provincial legislation regarding cannabis, OPH is proposing an update to its "Let's Clear the Air Action Plan" to better reflect the changing landscape. The Let's Clear the Air 3.0 Action Plan outlines three main goals: prevent youth initiation of smoking, vaping and cannabis use; work with partners to reduce exposure to second-hand smoke and vapour; and increase supports for cessation.

Through this report, OPH is also proposing to address gaps in municipal, provincial and federal smoking-related legislation and regulations. This would include working with City departments to harmonize City smoking related regulations, advocating for stronger provincial smoke-free and vape-free legislation in regards to advertising and promotion of vaping products, as well as responding to the current federal consultations regarding proposed vaping regulations. Addressing these legislative gaps will seek to better protect Ottawa residents from second-hand smoke, help de-normalize vaping among youth, and better align proposed Federal advertising and promotion of vaping products to current tobacco advertising and promotion regulations.

RÉSUMÉ

Ce rapport présente la nouvelle approche proposée par Santé publique Ottawa (SPO) concernant le tabac, le cannabis et les produits de vapotage. En 2012, le Conseil de santé d'Ottawa a approuvé [Purifions l'air : une stratégie renouvelée pour un Ottawa sans fumée](#), qui vise à protéger les enfants et les non-fumeurs contre la fumée secondaire tout en réduisant le taux de tabagisme par l'inclusion des parcs, des propriétés municipales, des plages, des marchés extérieurs et des terrasses de restaurants et de bars dans les espaces extérieurs sans fumée de la ville d'Ottawa. Depuis cette même année, SPO, avec ses partenaires et d'autres directions générales de la Ville, s'attaque aux inquiétudes grandissantes entourant les effets sur la santé de produits autres que le tabac, comme la chicha (pipe à eau), la cigarette électronique et le cannabis, qui génèrent de la fumée ou de la vapeur dans les espaces publics et les lieux de travail. Ainsi, nous avons présenté un nouveau règlement municipal sur les pipes à eau (*Purifions l'air 2.0*), mis en œuvre le plan en quatre points de SPO sur la légalisation du cannabis avec les directions générales de la Ville et les partenaires provinciaux, préparé le terrain en vue de la légalisation du cannabis, et travaillé avec les écoles et les adolescents sur la question du nombre croissant de jeunes vapoteurs.

Selon des statistiques locales, la cigarette électronique est de plus en plus populaire chez les jeunes, qui consomment des produits contenant de la nicotine, et croient que vapoter régulièrement présente peu ou pas de risques pour la santé. En 2017, la cigarette électronique était plus populaire que le tabac chez les jeunes d'Ottawa : 10 % des élèves ottaviens avaient vapoté une cigarette électronique au cours des 12 derniers mois, contre 6 % qui avaient consommé du tabac pendant cette période^v. Par ailleurs, la proportion d'élèves de la 7^e à la 12^e année d'Ottawa ayant consommé du cannabis au cours de la dernière année (18 %) était semblable à celle parmi les élèves du reste de l'Ontario (19 %).

Les statistiques locales témoignent également de la présence de mythes au sujet des risques associés aux produits de vapotage, surtout chez les jeunes : près de la moitié (48 %) des élèves de la 9^e à la 12^e année d'Ottawa croient que vapoter régulièrement présente peu ou pas de risques pour la santé^{vi}. Les jeunes consomment ces produits notamment par curiosité, à cause de la saveur ou du goût, et parce qu'ils les considèrent comme inoffensifs^{vii}. En revanche, 71 % des élèves de la 7^e à la 12^e année estiment que la consommation régulière de cannabis pose un risque modéré à élevé pour la santé^{viii}.

Vu l'augmentation du nombre de jeunes vapoteurs à Ottawa, les mythes entourant les effets du vapotage sur la santé et la nouvelle législation provinciale sur le cannabis, SPO propose d'actualiser son plan d'action *Purifions l'air!* Ainsi, le plan *Purifions l'air 3.0* définit trois grands objectifs : éviter que les jeunes commencent à consommer du tabac, du cannabis ou des produits de vapotage; collaborer avec les partenaires pour réduire l'exposition à la fumée secondaire et à la vapeur; et offrir plus de mesures d'aide à ceux qui veulent cesser de consommer.

Dans ce rapport, SPO suggère en outre de s'attaquer aux lacunes de la législation et de la réglementation municipales, provinciales et fédérales sur la fumée. Pour ce faire, il faudra par exemple travailler avec les directions générales de la Ville à harmoniser les règlements municipaux en la matière, militer pour le renforcement des lois provinciales antifumée et antivapotage pour ce qui est de la publicité et de la promotion des produits de vapotage, et participer aux consultations fédérales actuelles sur la réglementation de vapotage projetée. Par ces actions dans la sphère législative, SPO souhaite mieux protéger les résidents d'Ottawa contre la fumée secondaire, dénormaliser le vapotage chez les jeunes, et harmoniser davantage la réglementation fédérale projetée sur la publicité et la promotion des produits de vapotage avec la réglementation actuelle ciblant la publicité et la promotion du tabac.

BACKGROUND

In 2012, the Ottawa Board of Health approved the ["Let's Clear the Air: A Renewed Strategy for a Smoke-Free Ottawa"](#). This strategy was designed to protect children and non-smokers from second-hand smoke (SHS) while reducing smoking rates by expanding smoke-free outdoor spaces in the City of Ottawa to include parks, city properties, beaches, outdoor markets as well as restaurant and bar patios. While the Let's Clear the Air Strategy and smoke-free related regulations largely focus on tobacco, there was growing concern about the health effects from non-tobacco

substances, such as shisha (water-pipe) product, electronic cigarettes (e-cigarettes) and cannabis that produce smoke and/or vapour in public places and workplaces.

To address this gap in smoke-free regulations, in 2015, City Council approved a motion requesting that the Board of Health direct staff to review and consult with relevant stakeholders on the potential to expand by-laws to regulate the smoking of non-tobacco combustible substances and the use of e-cigarettes in public spaces and workplaces. In December 2015, the Board approved the [“Let’s Clear the Air 2.0: Consultation Plan,”](#) which outlined OPH’s plan to engage Ottawa residents, businesses and other interested parties to solicit their input on the potential for regulating non-tobacco combustible substances and e-cigarettes in Ottawa workplaces and public places. This consultation reached over 1,300 people and showed support for a ban on smoking of non-tobacco combustible substances that create second-hand smoke and second-hand vapours in workplaces and public spaces. At the same time that OPH completed its public consultation, the Ontario government announced, in March 2016, plans to further strengthen smoke-free and vaping laws by proposing six additional changes to the regulations made under the *Smoke-Free Ontario Act, 2017* (SFOA) and the *Electronic Cigarette Act, 2015* (ECA).

Subsequently, in April 2016, the Board approved the [“Let’s Clear the Air 2.0 – 2016 Action Plan”](#) report, which outlined OPH’s proposed plan to address the local gaps in smoke-free regulations, along with actions to prevent youth initiation and de-normalize smoking behaviours among youth and young adults. The Action Plan’s three main focus areas included:

- Community Action: Contributing to the provincial government’s consultation on proposed ECA and SFOA amendments and advocating to the federal government to address current gaps, stronger regulations for e-cigarettes and shisha (water pipe) product.
- Prevention: Implementing tailored awareness activities for youth to increase knowledge of the health risks associated with water-pipe use, cannabis and e-cigarettes and promoting the ECA requirements to retailers.
- Protection: Enforcing municipal and provincial smoke-free legislation and the new ECA sales to minors provision by conducting youth access inspections of e-cigarette vendors.

The Chair of the Board of Health submitted comments to the Ministry of Health and Long-Term Care on the regulatory changes proposed in the Consultation Paper titled

“Strengthening Ontario’s Smoking and Vaping Laws” and requested that these changes be put in force at the earliest opportunity. The Chair recommended to the Provincial government that the ECA be further strengthened by prohibiting the sale of flavoured e-cigarettes and e-liquid and by restricting promotional activities advertising e-cigarettes and tobacco products. The Chair also submitted a letter to the federal Minister of Health recommending that the proposed recommendations in the House of Commons’ Standing Committee on Health’s report “[Vaping: Toward a Regulatory Framework for E-Cigarettes](#)” be implemented. The Chair recommended that the (then) *Tobacco Act* be amended to explicitly mention that the regulations around health warnings, labelling, packaging and flavours also apply to shisha (water pipe) tobacco products.

Since the Provincial legislative changes did not include herbal shisha products, staff [reported](#) to the Board in June 2016, on options for enacting a municipal by-law to address this gap in smoke-free regulations to address hookah and shisha. In August 2016 City Council approved the enactment of the *Water Pipes in Public Places and Work Places By-law* that prohibits the use of water pipes in enclosed public places, enclosed workplaces, and outdoor restaurant and bar patios. The *Water Pipes in Public Places and Work Places By-law* came into effect December 1, 2016.

Since 2016, OPH has been implementing the 2016 Action Plan while also addressing emerging issues in the field of smoking prevention and control. OPH has also contributed to a number of provincial and federal government consultations related to smoking and vaping. In particular, OPH has advocated for:

- The inclusion of herbal water-pipe product into provincial and federal regulations;
- Prohibiting cannabis consumption in public places;
- Prohibiting smoking and vaping on post-secondary campuses; outdoor construction sites; outdoor spectator events, festivals and fairs; outdoor fruit and vegetable markets and within 9 metres of doorways of workplaces and public places;
- Prohibiting all combustible products inside multi-unit housing units, balconies and inside hotels, motels and inns;
- Prohibiting the promotion of vaping products in all retail locations;
- Prohibiting sampling of vapour products inside specialty vape stores; and
- Dedicated funding to support the additional enforcement requirements under the new SFOA 2017.

Recently, OPH contributed to the Federal government's consultation on health warnings for tobacco products. In doing so, OPH recommended that the proposed measures to enhance health labelling also be applied to all vaping products in order to increase public awareness about the health hazards of using vaping products. OPH has also participated in the Federal government's consultation on proposed regulations on edible cannabis, extracts and topicals. In particular, OPH recommended restrictions on products that could be appealing to children and youth such as gummy bears, lollipops, chocolate bars and cookie brands and to prohibit the use of flavouring agents in cannabis extracts.

OPH is continuing to implement its [4-point plan to address cannabis legalization](#). Specifically, OPH has developed and disseminated a client-informed health promotion campaign. OPH has also worked with youth workers, parents and health care providers to increase their capacity to discuss cannabis, identify problematic use and increase awareness of local treatment services. To date, a total of 14 information sessions were conducted, reaching 800 participants. Lastly, OPH continues to monitor the health outcomes of cannabis legalization.

HEALTH EVIDENCE

There is no safe level of exposure to second-hand smoke, which contains tar and many harmful fine particles, chemicals and carcinogens that are harmful to health.^{ix} Exposure to second-hand smoke can trigger cardiovascular events, severe asthma attacks and can aggravate existing chronic obstructive pulmonary disease and other respiratory conditions.^x There is evidence that cannabis second-hand smoke contains the same harmful chemicals as second-hand smoke from tobacco. Cannabis smoke contains tar, fine particulate matter and many of the same harmful chemicals and cancer-causing agents as tobacco smoke.^{xi xii xiii} Exposure to cannabis second-hand smoke could be harmful for vulnerable populations such as children, pregnant women, the elderly and those with respiratory problems.

Current research demonstrates that there may be health impacts of e-cigarette use and exposure to e-cigarette vapour. Specifically, e-cigarette use increases airborne concentrations of particulate matter, nicotine and other toxicants in indoor environments compared to background levels.^{xiv} The health effects to non-users from exposure to second-hand vapour are still unknown. At the same time, there is conclusive evidence that completely substituting e-cigarettes from combustible tobacco cigarettes reduces the user's exposure to numerous toxicants and carcinogens present in combustible

tobacco cigarettes.^{xv} However, the long-term safety of inhaling the substances in vaping products is unknown and continues to be assessed.^{xvi}

Research clearly indicates that nicotine is a highly addictive substance. Vaping product use could result in symptoms of dependence.^{xvii} Children and youth are vulnerable to the negative effects of liquid nicotine, including addiction. Nicotine is known to alter brain development and can affect memory and concentration. It may also predispose youth to addiction to nicotine and possibly other drugs.^{xviii} There is substantial evidence that e-cigarette use increases risk of ever smoking among youth and young adults.^{xix}

Finally, there is limited evidence that e-cigarettes may be effective aids to promote smoking cessation.^{xx} Although some studies suggest that more frequent use of e-cigarettes (with nicotine) is associated with an increased likelihood of cessation, more research is needed on the effectiveness of vapour products as a smoking cessation aid.^{xxi} To date, no vapour product has been licensed by Health Canada to treat nicotine dependence.

RECENT MUNICIPAL, PROVINCIAL & FEDERAL REGULATIONS

Federal

On October 17, 2018, the Federal *Cannabis Act* came into force, authorizing the production and sale of cannabis for non-medical purposes. The *Cannabis Act* also enacts a minimum age of 18 to purchase or possess cannabis. It also imposes limits to personal possession in public, limits to personal cultivation, and prohibitions related to the display and promotion of cannabis.

In May 2018, the Federal government enacted the *Tobacco and Vaping Products Act* that created a legal framework for governing vaping products and allowed the sale of nicotine products, specifically e-liquids and vaping products, to adults. On February 5, 2019, the federal government launched a public consultation, which closes on March 22, 2019, on potential measures to reduce the impact of advertising of vaping products on youth and non-users of tobacco products. In addition to this consultation, in March 2019, Health Canada will post another consultation document seeking comments on further measures being considered to address and reverse the recent trends of youth vaping. Some of these additional measures could include examining the role of flavours, nicotine concentration and product design that can make vaping products appealing to youth and non-smokers.

Provincial

On October 17, 2018, the *Cannabis Control Act*, the *Cannabis License Act* and amendments to the [Smoke-Free Ontario Act, 2017](#) (SFOA) came into effect and regulate how cannabis can be sold and consumed in Ontario. The amendments to the SFOA prohibit the use of vapour products (vaping or electronic cigarettes) or holding lighted cannabis in the same places that tobacco smoking is banned, including enclosed public places, workplaces and on outdoor bar and restaurant patios. Some additional places were also included:

- Within 20 metres from the perimeter of the grounds of elementary and secondary schools;
- Within 20 metres of the perimeter of outdoor grounds of a community recreation facility and public areas; and
- Within nine metres of a restaurant or bar patio.

Municipal

Since early 2018, OPH has participated in discussions with other city departments, through the City's Cannabis Legalization Steering Committee and Operational Team, to address and monitor the potential impacts of cannabis legalization on public health and safety. Through these teams, OPH supports the coordination and oversight of the City's activities in response to and preparation for cannabis legalization.

In December 2018, City Council approved a [report](#) from the General Manager of Emergency and Protective Services (EPS) and the General Manager of Planning, Infrastructure and Economic addressing private cannabis retail stores in Ottawa. One of the actions arising from the report is to conduct a review of the City's regulatory by-laws that include smoking or smoking-related prohibitions in order to determine whether amendments are required as a result of the legalization of cannabis and the recent amendments to the provincial *Smoke-Free Ontario Act, 2017* (SFOA). The by-law review will address the harmonization of language and approach among the various by-laws, particularly in respect of cannabis. Since then, OPH has been consulting with EPS (Public Policy Development and By-law and Regulatory Services) and Legal Services on options to harmonize the City's smoke-free by-laws.

LOCAL EPIDEMIOLOGY

E-cigarette, tobacco and cannabis use

Local data demonstrates that e-cigarette use is increasing among youth; youth are using e-cigarettes that contain nicotine and youth believe that regular vaping presents only slight or no health risks. E-cigarette use among Ottawa's youth surpasses tobacco use. In 2017, 10% of Ottawa students have used an e-cigarette, compared to 6% that smoked cigarettes in the past 12 months.^{xxii} In 2017, 23% of Ottawa high school students in grades 9-12 have used an e-cigarette at least once.^{xxiii}

In comparison, e-cigarette use in Ottawa among those aged 19 and over is 12% for use in lifetime and 8% for use in the past 12 months.^{xxiv} Of those who have used an e-cigarette in their lifetime, most e-cigarette use amongst adults appears related to smoking cessation or a desire to decrease harms of smoking.^{xxv} Of Ottawa residents (aged 19+) who currently smoke, approximately 40% report having used an e-cigarette in the past 12 months.^{xxvi} Among adults, use out of curiosity has dropped markedly from over 40% in 2016 to 12% in 2017.^{xxvii}

The current smoking rate for adults 19 years and older is 14% for Ottawa compared to 18% for Ontario.^{xxviii} In the past 12 months, cannabis use in Ottawa, among those 19 years of age or older, is slightly higher than the provincial average at 15% compared to 11%.^{xxix} Young adults age 19 to 24 have the highest smoking rates (18% in the past 12 months) and the highest use of cannabis (33% in the past 12 months).^{xxx}

Cannabis use in the past year, among Ottawa students in grades 7 to 12 (18%), is similar to students in the rest of Ontario (19%). Among students who have used cannabis, 50% first tried it in grade 9 or 10, and 21% first tried it in grade 11 or 12.^{xxxi}

Perception of health harms

While smoking and vaping tobacco, cannabis, e-juice and other products are all associated with some health risks, local data demonstrates that there are misconceptions about the risks associated with these products, especially among youth.

Almost half (48%) of Ottawa students in grade 9-12 believe that regular vaping presents only slight or no health risks.^{xxxii} Some reasons why youth are using these products include: curiosity, flavoring/taste, and the perception that they are non-harmful to health.^{xxxiii} In addition, 71% of grade 7-12 students feel that smoking cannabis regularly carries a medium or great risk of health harm.^{xxxiv}

Adults have misconceptions about health risks associated with smoking and vaping these products. Ottawa residents (aged 19+) were asked, in general, if people who use e-cigarettes are putting their health at high risk, medium risk, low risk or no risk

compared to not using e-cigarettes or an unknown risk. The perception of no risk was low at less than 2%, but nearly one in five report not knowing the risks of e-cigarette use.^{xxxv} Those who had used an e-cigarette in the past 12 months were nearly three times as likely as non-users to say that e-cigarettes represented low or no risk.^{xxxvi}

Finally, 84% of those Ottawa residents who had used cannabis in the past 12 months thought that smoking cigarettes was more harmful than smoking cannabis.^{xxxvii} Those who used before but not in the past year were less likely to think this (62%) as were those who have never used (42%).^{xxxviii}

Exposure to second-hand smoke and vape

In Ottawa, 15% of those aged 12 and older who are not daily smokers report regular exposure to environmental tobacco smoke in public places.^{xxxix} Seventy-two per cent of residents aged 16 and older are concerned or moderately concerned about exposure to second-hand cannabis smoke in public places and 68% are concerned about second-hand vape in public places.^{xl}

DISCUSSION

OPH has updated its 2016 Let's Clear the Air Action Plan to better reflect the changing landscape in Ottawa resulting from the legalization of cannabis and the rapidly increasing vaping rates among youth. The Let's Clear the Air 3.0 Action Plan outlines three main goals: prevent youth initiation of smoking, vaping and cannabis use; work with partners to reduce exposure to second-hand smoke and vapour; and increase supports for cessation.

Recommendation 1: Approve the proposed Let's Clear the Air 3.0 Plan, as outlined in this report

PREVENTION - Prevent the use of tobacco, cannabis and vaping especially among youth

In an effort to prevent the initiation and reduce smoking and vaping among youth, OPH will provide targeted prevention education programs and resources to youth, parents, youth workers, teachers and school administrators. Education will focus on the risks of vaping and smoking to increase knowledge, address social influences, and build capacity. In particular, OPH will provide support for in-class presentations, school wide assemblies and interactive displays to increase knowledge and build critical media and marketing appraisal skills among youth. To date, approximately 5000 students have received an in-class presentation from a Public Health Nurse on vaping and smoking, in

addition nurses have provided resources and materials for teachers to present in class.. OPH has also developed resources for parents and educators to engage youth in meaningful discussion about the risks of vaping and smoking. Lastly, OPH will build capacity with adults who work with at-risk youth in Ottawa to increase knowledge about the health effects of vaping. In 2018, the topic of vaping was included in five education sessions at four youth-serving agencies, reaching a total of 80 youth influencers.

Working with all four Ottawa school boards, OPH will also support the implementation of peer-to-peer groups in local high schools to promote positive mental health, prevent substance use, and reduce harms associated with problematic substance use, including vaping and smoking. Public Health Nurses will work with peer groups to encourage students to use critical thinking and media literacy skills and to effectively communicate with their peers. Evidence demonstrates that peer-to-peer youth engagement strategies can improve health outcomes for youth in the areas of mental health and substance use.^{xli}

OPH will promote national, provincial and regionally developed mass media and social marketing campaigns to prevent youth initiation of vaping and smoking. Mass media and social marketing campaigns are recognized as effective public health interventions that can reduce the initiation of smoking as well alternative tobacco and nicotine product use among young adult post-secondary students.^{xlii} OPH will be developing a vaping de-normalization campaign that aims to provide information of the harmful effects of vaping and the marketing tactics used by the vaping industry to entice youth to vape. In addition, OPH as a member of the East Tobacco Control Area Network, is developing a social marketing campaign that aims to educate youth about the risks while producing positive changes in attitudes, beliefs and intentions about vaping.

PROTECTION - Reduce second-hand exposure to tobacco, cannabis and vaping

To protect Ottawa residents from second-hand exposure to tobacco, cannabis and vaping, OPH will support enforcement (i.e. Tobacco Enforcement Officers); promote the new standard lease and encourage tenants, landlords and property managers to include the “no smoking” clause in their rental agreements; and continue to work with community partners to expand smoke-free and vape-free spaces.

Presently, designated Tobacco Enforcement Officers within the City’s By-law and Regulatory Services (BLRS) enforce the SFOA, 2017 (on behalf of the Board of Health and funded in the Board of Health’s annual budget) in respect of prohibited places of consumption for tobacco cannabis and vaping, in addition to enforcement of applicable City smoke-free regulations. Tobacco Enforcement Officers also conduct youth access

inspections with tobacco and e-cigarette vendors and respond to complaints of smoking and vaping in prohibited areas. Since October 17, 2018, new regulations under the SFOA prohibit vaping and smoking cannabis anywhere tobacco smoking is prohibited, including 100% of secondary school properties.

OPH is working with school boards, and BLRS to raise awareness about the new regulations. In addition, while the impact of the legalization of recreational cannabis continues to be evaluated, it is expected that ongoing efforts will be required from BLRS for both proactive and reactive enforcement of cannabis and vaping related regulations, including smoking on City property (e.g. parks, beaches, City facilities), on school or hospital property, on restaurant/bar patios, and other locations. Based on past experience with new smoking related regulations, demand for enforcement is higher at the outset of the implementation of new rules, but gradually declines over several years and plateaus to about 500 annual requests for service. Smoking of cannabis and the increase of vaping among youth may result in additional complaints, given that it is a new and involves a change in societal norms and expectations. To address these new SFOA amendments, Tobacco Enforcement Officers have been using a progressive enforcement approach when enforcing the SFOA regulations on school property. This approach consists of education, complaint-based inspections and proactive inspections where time and resources permit. Since October 2018, 30 enforcement actions have been taken in schools related to students vaping, including verbal warnings, written warnings and charges. Additionally, the new SFOA requires specialty vape stores and tobacconists to register with the Board of Health in order to be eligible for exemptions under the Act. Consequently, additional resources are required to inspect these specialty stores to ensure compliance with the regulations. OPH has applied for one-time provincial funding for cannabis and vaping related enforcement costs and will be tracking the enforcement costs - as the aim is to recover the costs from cannabis-related revenue, as part of OPH's work to address public cannabis use.

In addition to OPH's support of enforcement efforts, OPH is working with key stakeholders and City departments to identify any current regulatory gaps to ensure better protection from second-hand effects of cannabis smoking, and vaping of any products. Research shows that policy and health promotion programs are effective in: protecting people, including vulnerable populations, from second-hand exposure; reducing youth initiation through de-normalization; increasing quit attempts; and improving health outcomes.^{xliii} In Ottawa, public policy and health promotion programs have helped reduce Ottawa's current smoking rate from 21% in 2005, to 17% in 2011/12, and to 15% in 2015/16.^{xliiv}

A review of existing municipal by-laws that contain smoking-related prohibitions and the SFOA shows that smoking and vaping are not prohibited in the following public places;

- post-secondary campuses;
- outdoor construction sites;
- outdoor spectator events, festivals and fairs (where these are not on municipal properties);
- within 9 metres of doorways of workplaces and public places, other than City buildings;
- inside multi-unit housing units, balconies and inside designated smoking rooms in select hotels, motels and inns;
- Federal lands; and
- Privately owned outdoor properties where public, especially youth, congregate.

The public areas that are not currently covered by regulations would require further consultation with key stakeholders to determine feasibility, readiness for additional policies and/or regulations, as well as opportunities for voluntary smoke-free/vape-free spaces. It is important to note that there may be legal impediments to expanding the City's by-laws to apply to outdoor areas, whether they be privately owned lands or lands owned by the provincial or federal level of government. Consequently, OPH will continue to work with community partners and City departments to explore feasibility and readiness for further expanding the smoke-free and vape-free spaces within the City of Ottawa and whether potential expansion of these spaces would best occur through a regulatory approach or by other means, such as policies instituted by the particular property owner. OPH will also continue to advocate for the provincial government to expand the SFOA and to provide corresponding funding to support this work. In addition to the stakeholder engagement noted above, this work may also include public engagement and consultation.

Finally, OPH will promote the new standard lease and encourage tenants, landlords and property managers to include the no smoking clause in their rental agreements. Effective April 30 2018, the Standard Lease, introduced by the Ministry of Housing, became mandatory for most residential leases. Section 10 of the new lease invites landlords and tenants to agree to a smoke-free policy that can include a prohibition of smoking all combustible products (tobacco, cannabis, etc.) within the unit. Evidence demonstrates

that complete smoke-free policies in multi-unit housing are effective in reducing exposure to SHS and smoke-free housing policies encourage positive changes in smoking behaviour, such as reduced smoking and increased cessation.^{xliv} With about one quarter of Ontarians living in multi-unit housing, including specific populations that are more vulnerable to SHS exposure (e.g., infants, children and seniors), smoke-free housing policies would protect residents from exposure to second-hand smoke in the home. Lastly, there is support among Ottawa residents to prohibit smoking in multi-unit housing, with 75% of Ottawa residents indicating that smoking should be banned everywhere in multi-unit dwellings.^{xlvi}

CESSATION - Increase access to cessation supports

The goals of an effective cessation system are to increase quit attempts and the duration of smoking abstinence among quitters by reducing barriers to cessation services for the population overall and vulnerable populations.^{xlvi} In Ottawa, 54% of individuals who smoke reported that they were seriously considering quitting smoking in the next six months and 49 % of individuals who smoke stopped smoking for at least 24 hours in the past 12 months.^{xlvi} While some individuals are successful at quitting on their own, most benefit from support that may range from individual counselling, telephone, text messaging, web-based services, and/or group counselling. Cessation supports should also be widely available in multiple settings, such as workplaces, schools, community and health care settings, to support people to quit. Nicotine replacement therapy is also an effective cessation support, along with routine screening for tobacco use by health care professionals at all points of contact.

Since 2013, OPH has provided cost-free cessation pharmacotherapies and in-person and telephone counselling support. Many family health teams, community health centres and addiction agencies provide nicotine replacement therapy with counselling through the STOP (Smoking Treatment for Ontario Patients) partnership. In addition, Ottawa is home to the [Ottawa Model for Smoking Cessation](#), an evidence-based process delivered by outreach facilitators that uses organizational change principles to implement systematic approaches to smoking cessation.

In December 2018, key informant interviews were conducted on behalf of OPH to assess the current state of local smoking cessation systems. From these findings, OPH is exploring opportunities for greater collaboration and coordination to: identify underserved populations; follow up with organizations serving clients who would benefit from greater access to smoking cessation; and collaborate with stakeholders to identify ways to increase system capacity.

OPH recognizes there is a treatment gap in providing cessation support to youth who may be addicted to liquid nicotine in vapour products. To address this gap, OPH will work with other health organizations to evaluate vaping cessation needs among the youth population; encourage the development of guidelines for treating nicotine addiction with nicotine replacement therapy, and explore opportunities for provincial and federal partners to expand their current smoking cessation programs to include vaping cessation for young people.

Recommendation 2: Direct Ottawa Public Health staff to work with Emergency Protective Services staff on harmonizing current City of Ottawa smoke-free by-laws

On December 13, 2018, Ottawa City Council adopted a [report](#) recommending that private cannabis retail stores be permitted within the City of Ottawa. This report highlighted that two cannabis-related by-law review projects would begin in early 2019; specifically, a review of the Zoning By-law to establish regulations for legal cannabis production, cultivation and processing uses, and a review of the City's smoke-free related by-laws in light of cannabis legalization and related changes to the SFOA.

Currently, there are eight City of Ottawa by-laws, in addition to the SFOA, that address smoking: *Parks and Facilities By-law*, *Public Places By-law*, *Workplace By-law*, the *Right of Way Patio By-law*, the *Water Pipes in Public Places and Workplaces By-law*, *Transit By-law*, *By Ward Market Program By-law* and *Parkdale Market By-laws*.

The City's *Parks and Facilities By-law* is the most comprehensive by-law as it can be interpreted to prohibit tobacco, cannabis, vaping products and water-pipe use on all outdoor municipal properties. However, there are inconsistencies in the other City smoke-free regulations as these regulations do not directly address cannabis and vaping, though it is noted that the SFOA prohibits cannabis consumption in all places where tobacco consumption is currently prohibited.

Harmonization of the smoking-related municipal by-laws, with consistent and enforceable language addressing smoking and vaping of tobacco, cannabis and other substances, is currently being considered by staff. This would allow the public to more clearly understand the regulations, reduce enforcement complexities, and close the current regulatory gaps with respect to smoking cannabis in some public places. As such, OPH will work with other City departments to modernize the City's smoking prohibitions in current by-laws that includes cannabis and vaping, which will provide more protection from second-hand smoke and vapour.

Recommendation 3: Approve that the Chair of the Board of Health write a letter to the Ontario Minister of Health recommending that action be taken to reduce the appeal of vaping products to youth and prohibit point of sale advertising of vaping products, as outlined in Document 1 attached, and that the Mayor of Ottawa be provided the opportunity to co-sign the letter

OPH staff is recommending that the Chair of the Board of Health write a letter to the Ontario Minister of Health requesting that the provincial government address current gaps in provincial legislation, specifically to: prohibit the sale of all vaping products flavours and products that are designed to appeal to youth; and prohibit the advertising of vaping devices at point of sale.

In 2016, the Government of Ontario prohibited the sale of all flavoured tobacco products under the *Smoke-Free Ontario Act* (SFOA). It is recommended that this ban on flavoured tobacco product also be applied to flavoured vaping products that are designed to appeal to youth. Researchers have identified hundreds of unique e-cigarette flavours, including kid-friendly options such as cotton candy, root beer float, and banana split^{xlix}. Flavours appeal to youth and encourage experimentation. According to a systematic review of consumer preferences, adolescents consider flavour an important factor in their decision to try e-cigarettes.ⁱ

Promotion of vapour products has been shown to influence youth by increasing their odds of being open to e-cigarette use and promoting high curiosity about them.ⁱⁱ Although the new SFOA prohibits the point of sale display of vapour products in retail settings, promotion of vaping products through advertisements and other marketing forms is allowed. Currently, vaping products are advertised online, in newspapers and magazines, in stores and on television. Research shows that banning promotions removes sensory cues to purchase and use these products and helps to de-normalize use.ⁱⁱⁱ

The marketing of vapour products should align with the SFOA's display and promotion restrictions placed on tobacco products in retail locations, including but not limited to convenience stores and places where the products are manufactured.

Recommendation 4: Approve the comments in response to the Health Canada *Notice of Intent – Potential Measures to Reduce the Impact of Vaping Products Advertising on Youth and Non-users of Tobacco Products*, as outlined in Document 2

Currently, the *Tobacco and Vaping Products Act* prohibits advertising and promotion that could be appealing to young persons and lifestyle advertising. However, these restrictions could be strengthened in order to limit the negative health impacts associated with advertising and promotion of vapour products, especially among the youth population.

As previously noted, children and youth are influenced by marketing and advertising, as such, federal regulations that restrict children and youth exposure to marketing and advertising of vaping products can help reduce the normalization of youth vaping and the associated the health impacts.

Recommendation 5: Subject to the approval of Recommendation 4, approve that the Chair of the Board of Health write a letter to the federal Minister of Health recommending that measures be introduced without delay to further restrict advertising of vaping products, enhance health warnings and require plain and standard packaging for vaping products, and that the Mayor of Ottawa be provided the opportunity to co-sign the letter

Upon Board approval of recommendation 4, above, staff is recommending that the Chair of the Board of Health write a letter to the federal Minister of Health proposing the measures outlined in Document 2 and request that these be introduced without delay.

RURAL IMPLICATIONS

There are no rural implications associated with this report.

CONSULTATION

OPH staff consulted with EPS (Public Policy Development and By-law and Regulatory Services) and Legal Services on the development of the LCA 3.0 Action plan, in addition to initiating consultation with these City departments, and other stakeholders on options to harmonize the City's smoke-free by-laws.

LEGAL IMPLICATIONS

There are no legal impediments to implementing the recommendations contained in this report.

RISK MANAGEMENT IMPLICATIONS

There are no risk management implications associated with this report.

FINANCIAL IMPLICATIONS

There are no financial implications to implementing the recommendations contained in this report.

ACCESSIBILITY IMPACTS

There are no accessibility impacts associated with this report.

SUPPORTING DOCUMENTATION

Document 1 – Vaping among youth in Ontario: OPH recommendations to Ontario Minister of Health regarding tobacco and vaping legislation to protect Ontario youth and young adults

Document 2 – Ottawa Public Health staff recommendations to Health Canada in response to their Consultation on *Potential Measures to Reduce the Impact of Vaping Products Advertising on Youth and Non-users of Tobacco Products*

DISPOSITION

OPH will work with other City departments, community partners and youth intermediaries to implement the Let's Clear the Air 3.0: 2019 Action Plan. OPH will also write letters to the provincial and federal governments and continue to respond consultation opportunities.

ⁱ Ottawa Public Health. Public Health Monitoring of Risk Factors in Ontario-OSDUHS (2017). Centre for Addiction and Mental Health; 2018.

ⁱⁱ Ibid.

ⁱⁱⁱ U.S. Department of Health and Human Services. E-Cigarette Use Among Youth and Young Adults. A Report of the Surgeon General. Atlanta, GA: U.S. Department of Health and Human Services, Centers for Disease Control and Prevention, National Center for Chronic Disease Prevention and Health Promotion, Office on Smoking and Health, 2016.

^{iv} Ottawa Public Health. Public Health Monitoring of Risk Factors in Ontario-OSDUHS (2017). Centre for Addiction and Mental Health; 2018.

^v Ottawa Public Health. Public Health Monitoring of Risk Factors in Ontario-OSDUHS (2017). Centre for Addiction and Mental Health; 2018.

^{vi} Ibid.

^{vii} U.S. Department of Health and Human Services. E-Cigarette Use Among Youth and Young Adults. A Report of the Surgeon General. Atlanta, GA: U.S. Department of Health and Human Services, Centers for Disease Control and Prevention, National Center for Chronic Disease Prevention and Health Promotion, Office on Smoking and Health, 2016.

^{viii} Ottawa Public Health. Public Health Monitoring of Risk Factors in Ontario-OSDUHS (2017). Centre for Addiction and Mental Health; 2018.

^{ix} U.S. Department of Health and Human Services. [The Health Consequences of Smoking—50 Years of Progress: A Report of the Surgeon General](#). Atlanta: U.S. Department of Health and Human Services, Centers for Disease Control

and Prevention, National Center for Chronic Disease Prevention and Health Promotion, Office on Smoking and Health, 2014 [accessed 2019 Feb 19].

^x Ibid.

^{xi} McInnis O, Plecas D. Clearing the smoke on cannabis: Respiratory effects of cannabis smoking - An update. Canadian Centre on Substance Abuse. 2016. Available from: <http://www.ccsa.ca/Resource%20Library/CCSA-Cannabis-Use-Respiratory-Effects-Report-2016-en.pdf>.

^{xii} Repp KK, Raich AL. Marijuana and health: A comprehensive review of 20 years of research. Washington County Oregon Department of Health and Human Services. Hillsboro, OR: Washington County. 2014. Available from: http://learnaboutmarijuanawa.org/Reports/Marijuana_review_ReppRaich_Oct2014.pdf

^{xiii} Moir D, Rickert WS, Levasseur G, Larose Y, Maertens R, White P, Desjardins S. A comparison of mainstream and sidestream marijuana and tobacco cigarette smoke produced under two machine smoking conditions. Chem Res Toxicol. 2008

^{xiv} Public Health Ontario's Evidence Summary: Literature Review on Electronic Cigarettes – August 2018 Update.

^{xv} Evidence from the National Academies of Sciences, Engineering and Medicine: The Public Health Consequences of E-Cigarettes (2018) report <http://nationalacademies.org/hmd/Reports/2018/public-health-consequences-of-e-cigarettes.aspx>

^{xvi} Health Canada's Vaping webpage: <https://www.canada.ca/en/health-canada/services/smoking-tobacco/vaping.html> (accessed 2019 Feb 19)

^{xvii} Ibid.

^{xviii} Ibid.

^{xix} Evidence from the National Academies of Sciences, Engineering and Medicine: The Public Health Consequences of E-Cigarettes (2018) report <http://nationalacademies.org/hmd/Reports/2018/public-health-consequences-of-e-cigarettes.aspx>

^{xx} Ibid.

^{xxi} Ibid.

^{xxii} Ottawa Public Health. Public Health Monitoring of Risk Factors in Ontario-OSDUHS (2017). Centre for Addiction and Mental Health; 2018.

^{xxiii} Ibid.

^{xxiv} Ottawa Public Health. Rapid Risk Factor Surveillance System, 2017

^{xxv} Ibid.

^{xxvi} Ibid.

^{xxvii} Ottawa Public Health. Rapid Risk Factor Surveillance System, 2016-2017

^{xxviii} Canadian Community Health Survey 2015-2016, Statistics Canada, Share File, Ontario MOHLTC.

^{xxix} Ibid.

^{xxx} Ibid.

^{xxxi} Ottawa Public Health. Public Health Monitoring of Risk Factors in Ontario-OSDUHS (2017). Centre for Addiction and Mental Health; 2018.

^{xxxii} Ibid.

^{xxxiii} U.S. Department of Health and Human Services. E-Cigarette Use Among Youth and Young Adults. A Report of the Surgeon General. Atlanta, GA: U.S. Department of Health and Human Services, Centers for Disease Control and Prevention, National Center for Chronic Disease Prevention and Health Promotion, Office on Smoking and Health, 2016.

^{xxxiv} Ottawa Public Health. Public Health Monitoring of Risk Factors in Ontario-OSDUHS (2017). Centre for Addiction and Mental Health; 2018.

^{xxxv} Ottawa Public Health. Rapid Risk Factor Surveillance System, 2017

^{xxxvi} Ibid.

^{xxxvii} Survey of Ottawa Residents of Health Risks of Cannabis. EKOS Research Associates Inc. January 4, 2018.

^{xxxviii} Ibid.

^{xxxix} Canadian Community Health Survey 2015/16. Ontario Share File. Statistics Canada

^{xl} Survey of Ottawa Residents of Health Risks of Cannabis. EKOS Research Associates Inc. January 4, 2018

^{xli} Dunne, T. et al. A Review of Effective Youth Engagement Strategies for Mental Health and Substance Use Interventions, Journal of Adolescent Health, 2017

^{xlii} The Smoke-Free Ontario Scientific Advisory Committee's report "Evidence to Guide Action: Comprehensive Tobacco Control in Ontario, 2016

^{xliii} The Health Consequences of Involuntary Exposure to Tobacco Smoke: A Report of the Surgeon General, Office on Smoking and Health (US). Atlanta (GA): Centers for Disease Control and Prevention (US); 2006.

^{xliv} Canadian Community Health Survey 2005, 2011/2012 and 2015/2016, Statistics Canada, Share File, Ontario MOHLTC

^{xlv} The Smoke-Free Ontario Scientific Advisory Committee's report "Evidence to Guide Action: Comprehensive Tobacco Control in Ontario, 2016

^{xlvi} Ottawa Public Health. Rapid Risk Factor Surveillance System, 2017

^{xlvii} The Smoke-Free Ontario Scientific Advisory Committee's report "Evidence to Guide Action: Comprehensive Tobacco Control in Ontario, 2016

^{xlviii} Canadian Community Health Survey 2015-2016, Statistics Canada, Share File, Ontario MOHLTC

^{xlix} Zhu, S-H, et al., "Four Hundred and Sixty Brands of E-cigarettes and Counting: Implications for Product Regulation," Tobacco Control, 2014

ⁱ Zare, S., Nemati, M., Zheng, Y. A systematic review of consumer preference for e-cigarette attributes Flavor, nicotine, strength, and type. PLoS ONE, 2018 <https://doi.org/10.1371/journal.pone.0194145>

ⁱⁱ Margolis, K. A., Donaldson, E. A., Portnoy, D. B., Robinson, J., Ne, L. J., & Jamal, A. (2018). E-cigarette openness, curiosity, harm perceptions and advertising exposure among U.S. middle and high school students. Preventive Medicine, 2018.

ⁱⁱⁱ The Smoke-Free Ontario Scientific Advisory Committee's report "Evidence to Guide Action: Comprehensive Tobacco Control in Ontario, 2016