

**Report to
Rapport au:**

**Ottawa Board of Health
Conseil de santé d'Ottawa
20 April 2020 / 20 avril 2020**

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**Submitted by
Soumis par:**

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Ward: CITY WIDE / À L'ÉCHELLE DE LA VILLE File Number: ACS2020-OPH-HPP-0005

**SUBJECT: OTTAWA PUBLIC HEALTH SUBMISSION TO THE ONTARIO MINISTRY
OF HEALTH ON PROPOSED VAPING REGULATIONS**

**OBJET: SOUMISSIONS DE SANTÉ PUBLIQUE OTTAWA AU MINISTÈRE DE LA
SANTÉ DE L'ONTARIO AU SUJET DE LA RÉGLEMENTATION
PROPOSÉE SUR LE VAPOTAGE**

REPORT RECOMMENDATION

That the Board of Health for the City of Ottawa Health Unit receive the Medical Officer of Health's submission to the Ontario Ministry of Health on proposed vaping regulations, as outlined in Document 1, and approve the recommendations contained therein.

RECOMMANDATION DU RAPPORT

Que le Conseil de santé de la circonscription sanitaire de la ville d'Ottawa prenne connaissance de la soumission de la médecin chef en santé publique au Ministère de santé de l'Ontario au sujet de la réglementation proposée sur le vapotage, présentée dans le document 1, et approuve les recommandations qui y figurent.

BACKGROUND

On March 4, 2019, the Board of Health received the report [Let's Clear the Air \(LCA\) 3.0](#), which outlined Ottawa Public Health's (OPH) updated strategy to prevent youth initiation of smoking, vaping and cannabis use and described work with partners to reduce exposure to second-hand smoke and vapour, and increase supports for cessation. This report also included recommendations to strengthen smoking legislation and regulations at the municipal, provincial and federal levels.

Since that time, the Board of Health has considered multiple reports on OPH submissions to Health Canada on vaping-related regulatory measures, specifically on [June 17, 2019](#), on [September 16, 2019](#) and on [February 20, 2020](#).

On February 25, 2020, Ontario's Minister of Health announced that the Province was proposing regulatory changes to the *Smoke-Free Ontario Act* that, if approved, would limit where flavoured and high nicotine vapour products are sold at retail. On February 28, 2020, the Province launched consultation on these proposed vaping regulations, with a submission deadline is Sunday, March 29th. The proposed changes include:

- Restricting the retail sale of flavoured vapour products to specialty vape stores and cannabis retail stores, which are restricted to people aged 19 and over, with the exception of menthol, mint and tobacco flavours;
- Restricting the retail sale of high nicotine vapour products (more than 20mg/ml) to specialty vape stores; and
- Requiring specialty vape stores to ensure that vapour product displays, and promotions are not visible from outside their stores.

The Province has advised that, if approved, the proposed regulation changes would come into effect on July 1, 2020.

In addition to the proposed regulatory changes mentioned above, Ontario is also planning to:

- Increase access to services to help people quit vaping by expanding Telehealth Ontario;
- Work with major online retailers of vapour products and stakeholders to ensure compliance with age-based sales restrictions for online sales;
- Enhance mental health and addiction services and resources to include vaping and nicotine addiction;
- Establish a Youth Advisory Committee to provide advice on vaping issues; and
- Call on the federal government to implement a national tax on vaping products.

The surge of vaping product availability and the increasing prevalence of vaping among youth who were formerly not smoking is a public health concern. Vaping use has increased from 10% in 2017 to 19% in 2019 among Ottawa students in Grades 7-12. Further, 26% of high school students in grades 9-12 have used an electronic cigarette at least once.¹ According to the 2017 Canadian Tobacco Alcohol and Drugs Survey, of the 15% of individuals who vape but reported never having smoked, 58% were youth and 33% were young adults.²

Vaping may predispose youth to addiction to nicotine and possibly to smoking cigarettes and other drugs.³ Among Ottawa high school students in grades 7-12 who use e-cigarettes, almost half (51%) of students usually used e-cigarettes with nicotine.⁴ Further, there is substantial evidence that vaping increases risk of ever smoking among youth and young adults.⁵ Lastly, in 2019, 48% of students in Ottawa (grades 7-12) reported that they felt it would be fairly to very easy to get e-cigarettes. Students in grades 9 to 12 were *significantly* more likely (60%) than students in lower grades in grades 7 to 8 (19%) to say that it would be fairly to very easy to get e-cigarettes. It is noteworthy that among grade 7 – 8 students, almost one in five report it would be fairly easy to get e-cigarettes.⁶

To date, no vapour product has been licensed by Health Canada to treat nicotine dependence and there is limited evidence that e-cigarettes may be effective aids to promote smoking cessation.⁷ Although vaping can result in symptoms of dependence⁸, there are currently no clinical vaping cessation guidelines.

DISCUSSION

Since March 2019, OPH has made progress on its *Let's Clear the Air 3.0 Strategy*, including: increasing youth knowledge about the harms associated with vaping within

schools and other community settings; and working with the Emergency and Protective Services Department to harmonize the City's smoking related by-laws; and recommending that the federal and provincial governments strengthen smoke-free and vape-free legislation to reduce youth access and appeal of vaping products. OPH continues to look for opportunities to further strengthen smoke-free can vaping legislation and regulations.

Ottawa Public Health (OPH) supports the regulations for vaping products currently being proposed by the Ontario Ministry of Health, including:

- Restricting the sale of flavoured vapour products to Specialty Vape Stores and Cannabis Retail Stores, except for unflavoured, menthol, mint and tobacco flavoured products.
- Requiring Specialty Vape Stores to ensure that vapour product displays and promotions are not visible from outside their stores.
- Restricting the sale of vapour products with high nicotine concentrations (>20 mg/ml) to Specialty Vape Stores.
- Exempting Cannabis Retail Stores from a ban on displaying vapour products to align with the rules for displaying vapour products with Specialty Vape Stores.

In addition, OPH offered the following complementary recommendations. See Document 1 for the full submission.

1: Require specialty vape stores to obtain smoking cessation training, including vaping cessation training

OPH recommends that the Ministry develop vaping and smoking cessation guidelines for staff working in Specialty Vape Stores; that these guidelines be offered as mandatory training for staff; that the training be considered a requirement in the Specialty Vape Stores registration process; and require business owners to ensure that all their employees are trained on the smoking and vaping cessation guidelines.

Given the highly addictive nature of nicotine⁹, it is also important that guidelines be developed to help people quit vaping. Currently, there are no clinical guidelines to assist vendors and health care providers to advise clients about vaping cessation. However, some conclusions are widely accepted including: (1) persons who don't smoke should not vape; (2) young persons should avoid vaping or consuming nicotine (unless they are

using nicotine replacement therapy for cessation); (3) persons who have transitioned from smoking to vaping, should switch completely and not go back to smoking.

2: Enhancing enforcement efforts to combat non-compliance with specialty vape stores

OPH recommends that stricter penalties be considered for specialty vape stores that demonstrate continual non-compliance for selling vapour products to minors, similar to what is in place for tobacco sales offences.

Currently, the penalties for retailers who are convicted for violating the *Smoke Free Ontario Act, 2017 (SFOA, 2017)* are not equal between tobacco vendors and vapour product vendors. If there are **two or more owner convictions for tobacco sales** offences committed in the same location within a five year period, that location will be subject to an automatic prohibition. If that were to happen, that location could not sell or store any tobacco and no wholesaler or distributor may deliver tobacco to that location. An automatic prohibition lasts for six, nine or twelve months, depending on the number of convictions for tobacco sales offences that have taken place within the five-year period. Automatic prohibitions do not apply to vendors with vapour product sales convictions.

3: Reduce the availability of tobacco in retail settings

Tobacco can be a lethal product with no safe level of use. It continues to be the single greatest cause of avoidable disease and premature death in the province, killing 16,000 Ontarians in 2012.¹⁰ There are currently about 2 million smokers in Ontario. About half of those who continue to smoke long-term will die prematurely.¹¹ Ottawa Public Health recommends that the province consider reducing the availability of tobacco products in retail settings.

Although Canadian smoking rates have been steadily declining for decades, they appear to have plateaued at around 15%.¹² The current smoking rate for adults 19 years and older is 13% for Ottawa and 17% for the rest of Ontario.¹³ Despite smoking being the single greatest cause of premature death and avoidable disease in Ontario, tobacco products are available 24/7 in more than 10,000 retail settings across the province. When tobacco is less available, fewer people start smoking and current smokers are more likely to successfully quit or smoke less.

4: Increase the minimum age to purchase tobacco, and vaping products to 21 or older

OPH supports regulation and enforcement to prohibit the sale and supply of tobacco and vapour products to anyone who is less than 21 years old.

The initiation age of tobacco use is critical. Among adults who become daily smokers, approximately 90 percent report first use of cigarettes before reaching 19 years of age, and almost 100 percent report first use before age 26.¹⁴

Research identifies 21 years of age for legal access as a best practice to prevent or delay initiation of the use of tobacco. The evidence¹⁵ shows that a higher minimum age can:

- Delay the age of initiation;
- Decrease the prevalence of use, particularly among adolescents; and
- Decrease access through social channels for younger teens (less likely to have someone of legal age within their social network).

Due to the timelines associated with the public consultation process, these recommendations were circulated to Members of the Board of Health for their review and feedback on March 26, 2020 and were then submitted to the Ontario Ministry of Health on March 28, 2020, in advance of the March 29, 2020 deadline.

RURAL IMPLICATIONS

There are no rural implications associated with this report.

CONSULTATION

There was no consultation required for the preparation of this submission and corresponding report.

LEGAL IMPLICATIONS

There are no legal impediments to the Board of Health approving this report's recommendation.

RISK MANAGEMENT IMPLICATIONS

There are no risk management implications associated with this report.

FINANCIAL IMPLICATIONS

There are no financial implications associated with this report.

ACCESSIBILITY IMPACTS

There are no accessibility impacts associated with this report.

SUPPORTING DOCUMENTATION

Document 1 - Medical Officer of Health's submission to the Ontario Ministry of Health on proposed vaping regulations

DISPOSITION

This report is presented to the Board for approval of the recommendations outlined in the supporting document. OPH will continue to monitor any proposed legislation, regulations and emerging evidence related to vaping products promotion regulations and report to the Board of Health as needed.

¹ Ottawa Public Health. Public Health Monitoring of Risk Factors in Ontario-OSDUHS (2019). Centre for Addiction and Mental Health; 2020.

² Health Canada. Canadian Tobacco, Alcohol and Drugs Survey (CTADS): Summary of Results for 2017. Canada.ca. Published January 4, 2019. Accessed March 12, 2020.

³ Health Canada. Risks of Vaping: <https://www.canada.ca/en/health-canada/services/smoking-tobacco/vaping/risks.html> Date modified: March 5, 2020. Accessed March 12, 2020.

⁴ Ottawa Public Health. Public Health Monitoring of Risk Factors in Ontario-OSDUHS (2019). Centre for Addiction and Mental Health; 2020.

⁵ 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>

⁶ Ottawa Public Health. Public Health Monitoring of Risk Factors in Ontario-OSDUHS (2019). Centre for Addiction and Mental Health; 2020.

⁷ 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>

⁸ Health Canada. Risks of Vaping: <https://www.canada.ca/en/health-canada/services/smoking-tobacco/vaping/risks.html> Date modified: 2020-03-05. Accessed March 12, 2020.

⁹ [National Academies of Sciences, Engineering, and Medicine. Public Health Consequences of E-cigarettes. 2018; Washington, D.C.: The National Academies Press.](#)

¹⁰ Dobrescu A, Bhandari A, Sutherland G, Dinh T. The costs of tobacco use in Canada, 2012. Ottawa, ON: The Conference Board of Canada; 2017.

¹¹ Smoke-Free Ontario Modernization. Report of the Executive Steering Committee. 2017.

¹² University of Waterloo. School of Public Health and Health Systems. Tobacco use in Canada report. Accessed March 12, 2020. <https://uwaterloo.ca/tobacco-use-canada/adult-tobacco-use>

¹³ Canadian Community Health Survey 2017, Statistics Canada, Share File, Ontario MOHLTC.

¹⁴ Institute of Medicine 2015. Public Health Implications of Raising the Minimum Age of Legal Access to Tobacco Products. Washington, DC: The National Academies Press.

¹⁵ Institute of Medicine 2015. Public Health Implications of Raising the Minimum Age of Legal Access to Tobacco Products. Washington, DC: The National Academies Press.