



THE ONTARIO
TOBACCO
RESEARCH
UNIT

UNITÉ
DE RECHERCHE
SUR LE TABAC
DE L'ONTARIO

Generating knowledge for public health

EVALUATION NEWS

Volume 8, Issue 2
September 2014

OTRU Knowledge and Evaluation Support Team Update

Welcome to the second of four 2014-2015 newsletters from OTRU's Knowledge and Evaluation Support Team! We are excited to be sharing information about our activities and progress this year.

Current Projects

Since April 1, 2014, OTRU has received 51 evaluation and knowledge needs requests from across the province (Table 1): 27 new requests and 24 requests continued from the previous fiscal year. Thirty-five requests have been from TCANs or PHUs, nine requests have come from other stakeholders, and seven requests have come through OTRU's Knowledge Exchange Advisory Group.

Table 1: Current Evaluation and Knowledge Needs Requests from TCANS (March – September 2014)

TCAN	PHU	# of Requests
Provincial	All TCANS	3
South West	TCAN Wide	6
	Windsor-Essex	1
Central West	TCAN wide	2
	Niagara	1
Central East	TCAN wide	3
	Peel	2
	Peterborough	1
	York	1
Toronto	Toronto	3
East	TCAN Wide	4
	Ottawa	1
North East	TCAN wide	3
North West	TCAN wide	2
	Thunder Bay	2

The Knowledge and Evaluation Support team classifies requests by their complexity and the amount of time taken to complete them. Since April 1, 2014, we have received 16 brief requests, 23 moderate requests and 12 intensive requests that can take a month or more to complete.



THE ONTARIO
TOBACCO
RESEARCH
UNIT

UNITÉ
DE RECHERCHE
SUR LE TABAC
DE L'ONTARIO

Generating knowledge for public health

EVALUATION NEWS

2015 Workplans

Planning to evaluate some of your 2015-2016 work plan activities?

Invite OTRU to join your next TCAN, PHU or TPA meeting. We can help you to identify evaluation and knowledge generation opportunities.

We have already helped TCANS to identify many opportunities, including evaluations of Smoke-Free Outdoor Spaces. OTRU is currently developing an evaluation toolkit for smoke-free outdoor spaces that can be adapted for different jurisdictions. We also plan to synthesize findings from across the jurisdictions. Please contact us to have your jurisdiction included!

Recent Reports

OTRU's Knowledge and Evaluation Support Team receives requests across all three pillars in tobacco control. Below we provide summaries of selected intensive and moderate-level requests that have recently been addressed by our Team.

Tobacco Smoke Entering Homes in Multi-Unit Dwellings in Ontario

Exposure to secondhand smoke (SHS) is a long standing public health issue. The *Smoke-Free Ontario Act* protects many Ontarians from exposure to SHS in enclosed public places and workplaces including restaurants and bars, casinos, in vehicles, and in the common areas of multi-unit dwellings (MUDs), but exposure still occurs in MUDs through drifting smoke from neighbouring dwellings, shared indoor spaces, ventilation systems, and through windows and doors.

In May, OTRU was approached by Ontario's Smoking and Health Action Foundation and the Program Training and Consultation Centre to complete data analysis related to tobacco smoke entering homes in multi-unit dwellings in Ontario. OTRU produced an update that reviews the extent of reported exposure to SHS in multi-unit dwellings and notes regional differences among the province's seven Tobacco Control Area Networks (TCANs).

At least a third of residents of multi-unit dwellings reported some tobacco smoke from external sources entering their homes (38% in 2011, and 33% in 2012) according to data from the CAMH Monitor. Emerging evidence also points to hazards associated with exposure to third hand smoke, chemicals and compounds from residual secondhand smoke that settle on surfaces or in dust and can persist for long periods of time. This has implications for the health of tenants who move into units previously occupied by smokers.¹

¹ Matt GE, Quintana PJ, Zakarian JM, et al. When smokers move out and non-smokers move in: residential thirdhand smoke pollution and exposure. *Tobacco Control* 2011;20(1):e1



EVALUATION NEWS

Some local jurisdictions are moving beyond measures in the provincial legislation to protect those living in MUDs from harmful exposure to tobacco smoke, particularly those residents of social/non-profit housing.² Increased public awareness of the hazards of second and third hand smoke exposure and development and implementation of smoke-free housing policies will help to protect the health of Ontarians living in multi-unit dwellings.

To find out more and to access the full update, please visit: <http://otru.org/tobacco-smoke-entering-homes-multi-unit-dwellings-ontario/>

Smoking Cessation Interventions for Youth: A Review of the Literature

The York Region Public Health (YRPH) requested OTRU's help to explore the current state of knowledge about effective and promising interventions and practices in addressing smoking cessation among youth. Cessation interventions targeting youth aged 15-19 years were of a particular interest as middle (15-17 years) to late adolescence (18-19 years) is considered a critical period for experimentation and development of regular smoking behavior.

A review of the academic and grey literature identified effective and promising interventions aimed at helping youth quit smoking, as well as key factors to determine the success of such interventions.

Highlights from the literature review include the following:

- Youth cessation programs should have appropriate and relevant content, presentation approach, and frame; and take into account factors such as accessibility, affordability, cost-effectiveness, and recruitment to optimize reach and impact.
- Programs that are based on cognitive-behavioural or motivational interviewing strategies have been shown to be effective.
- There is considerable evidence of the effectiveness of established programs such as Not-On-Tobacco (N-O-T).
- Physical activity-based and school-based interventions appear to be promising as options to help youth stop smoking.
- Internet and mobile-based cessation interventions are promising, although further research is needed as this remains a nascent field of inquiry.
- The evidence is mixed about the impact of self-help, minimal interventions, however the Quit4Life Program has been shown to be successful in Canada.
- There is limited evidence on the efficacy of pharmacological and healthcare professional-delivered interventions on smoking cessation in youth, and further study is needed in these areas.

² Smoke Free Housing Ontario. Ontario Community/Non-Profit Housing Providers with No-Smoking Policies. Available at: http://www.smokefreehousingon.ca/hso/file/files/Community_Housing_May_29_2014.pdf. Accessed July 29, 2014.



EVALUATION NEWS

- Studies demonstrate that peer and family smoking status, social connectedness, sense of belonging, and school policies can impact youth smoking and cessation behavior.

Overall findings indicate that it is important for tobacco control programs to take a comprehensive approach. There is a need for multi-sectoral, cross-organizational collaboration to tackle the myriad of factors that affect tobacco use and cessation in young people. Smoking cessation programs should seek to involve health professionals such as physicians and nurses, as well as parents, teachers and counselors. Interventions should also be supplemented by legislative and policy efforts to deter tobacco use among youth. Given the severe and well-known risks of smoking, it is important to continue to research and develop policies and interventions to prevent the uptake of smoking among young people, as well as to assist established youth smokers to quit smoking.

For more information, contact Dr. Robert Schwartz (Robert.Schwartz@utoronto.ca)

North East TCAN: Back To Basics

In late 2013, the North East Tobacco Control Area Network (NE TCAN) implemented a public health education campaign to increase adult awareness about supplying cigarettes to teenagers. The campaign used a social marketing strategy through various channels to disseminate messaging: television, online, newspaper ads, Facebook video, and other social media resources such as You Tube.

OTRU was approached to help with the evaluation design, protocol development, data analysis and report writing. Street-intercept interviews were conducted with 318 adult (19 years of age or older), English speaking participants in four communities in the NE TCAN region. All participants were shown a 30 second advertisement and asked about their receptivity to the campaign messages. Participants were also asked about their:

- History of social supply of cigarettes to minors
- Knowledge of the legal age to purchase cigarettes
- Awareness of the campaign
- General demographic characteristics

Key findings for behaviours, knowledge, and campaign awareness and receptivity include the following:

- 26% of participants reported being asked to buy or give cigarettes to a teenager in the past year
- In the past year, 5% of all participants supplied minors with cigarettes; however, among those who were asked to buy or give cigarettes to teenagers (26% of the population), 17% did so
- Those who did supply appear to be younger adults and smokers
- 96% believe it is not OK to give cigarettes to teenagers



EVALUATION NEWS

- Under the *Smoke-Free Ontario Act*, it is illegal for retailers to sell cigarettes to those less than 19 years of age. Thirty-two per cent of participants believe the legal age to buy cigarettes is less than 19 years; 56% identified a legal age of 19 years and 7% believed it was greater than 19 years³
- 26% of participants confirmed awareness of the campaign advertisement; among those aware of the campaign, most were older (35+) and all those who were aware had not supplied cigarettes to youth in the past year
- Television was the most common method of campaign exposure with limited exposure online or on Facebook
- More than half of participants identified that the main message of the campaign was not to give cigarettes to kids/teenagers/minors;
- 85% of all respondents reported that the ad grabbed their attention
- All participants were shown the ad during the survey. Three out of four participants reported that the ad gave them good reasons not to give cigarettes to teenagers; however, among those who supplied cigarettes to youth in the past year, a smaller proportion felt the ad gave them good reasons not to supply cigarettes compared to those who had not supplied cigarettes in the past year

In general, the campaign was well received among those who completed the survey; however, this convenience sample was mostly middle aged, with limited numbers of young adults and those who have supplied cigarettes to youth in the past year. Future campaigns and messaging should target the population most likely to supply cigarettes to youth (younger adults and smokers). In addition, further assessment of dissemination methods is recommended to ensure optimal and efficient dissemination to this target population. Youth access to cigarettes is multifaceted and extends beyond adult supply: youth may take cigarettes without adults knowing, and younger youth may get cigarettes from older youth who successfully purchase from a retail store.

For more information about the campaign or the report, please contact Leila Pilon at: pilonl@sdhu.com

For more information about the evaluation, please contact Dr. Robert Schwartz at:

Robert.Schwartz@utoronto.ca

³The survey asked about the legal age to buy cigarettes. In Ontario, there is no prohibition on the purchase of cigarettes by youth; rather, the SFOA stipulates that it is illegal to sell cigarettes to youth who are under 19 years of age.



THE ONTARIO
TOBACCO
RESEARCH
UNIT

UNITÉ
DE RECHERCHE
SUR LE TABAC
DE L'ONTARIO

Generating knowledge for public health

EVALUATION NEWS

Looking for Help?

If you would like to discuss your research and evaluation needs further, please complete our [Knowledge and Evaluation Support Request Form](#) online or contact our team members:



Robert Schwartz, PhD
Project Lead
416-978-3901
robert.schwartz@utoronto.ca



Shawn O'Connor, PhD
Project Lead
416-978-0418
shawn.oconnor@camh.ca



Emily Di Sante, MA
Project Coordinator
416-978-6931
emily.disante@utoronto.ca