

CANADIAN TOBACCO USE MONITORING SURVEY

Annual

February-December 2000

You're not the only one smoking this cigarette

CTUMS Annual, 2000

The Canadian Tobacco Use Monitoring Survey (CTUMS) was developed to provide Health Canada and its partners with timely, reliable, and continual data on tobacco use and related issues. The survey's primary objective is to track changes in smoking status and amount smoked, especially for populations most at risk, such as 15-24 year olds.

These latest findings are based on interviews conducted by Statistics Canada between February and December 2000. (A full description of the survey design and methods may be found at the end of this document.) Fact sheets with results for 1999 have been published previously;^{1,2} additional fact sheets for 2000 will be released in the coming months.

This fact sheet focuses mainly on exposure to Environmental Tobacco Smoke (ETS, also known as second-hand smoke), but also includes updated estimates of smoking prevalence and amount smoked, and highlights of other findings on smoking behaviour, nicotine dependence, and readiness to quit smoking.

Exposure to Environmental Tobacco Smoke (ETS) in the Home

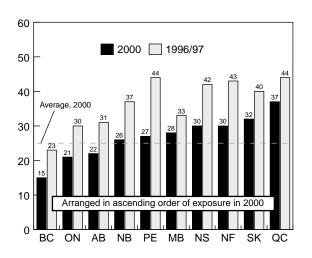
In 2000, 25% of the 2.4 million households with children under the age of 12 reported regular exposure of these children to Environmental Tobacco Smoke (ETS) in the home from cigarettes, cigars or pipes. This appears to be a substantial improvement from 1996/97, when there were smokers in 33% of such homes.³ Nevertheless, this means that approximately 900,000 children under the age of 12 continue to be regularly exposed to ETS while in the home. Considering that an additional 760,000 children between the ages of 12 and 17 were also regularly exposed to tobacco smoke while at home in 2000, this means that over 1.6 million children under the

age of 18 have increased risks for health and of taking up smoking. Children in British Columbia, Ontario, and Alberta homes were much *less* likely to be exposed to ETS at home, while their peers in Saskatchewan and Quebec homes are much *more* likely to be exposed. These provincial differences correspond to differences in prevalence rates.

Between 1996/97 (National Population Health Survey, Cycle 2) and 2000 (CTUMS), every province saw a reduction in exposure of children to ETS (Figure 1). The greatest proportional reduction in numbers of homes reported with second-hand smoke exposure occurred in Prince Edward Island and Newfoundland: 38% and 36% respectively.

——Figure 1—— Children's Exposure to Tobacco Smoke at Home

Homes with children age 0-11 where someone smokes regularly, by provinces, Canada, 1996/97 and 2000



Sources: 1996/97 National Population Health Survey and 2000 Canadian Tobacco Use Monitoring Survey



The number of cigarettes smoked indoors is a major determinant of the level of risk to a child's health. In those homes with children under the age of 12 where smoking occurs, 47% reported a daily indoor consumption of 1-10 cigarettes; 28% reported a daily indoor consumption of 11-20 cigarettes; and 25% reported a daily indoor consumption of more than 21 cigarettes. Where second-hand smoke exposure was reported, children under the age of 12 were exposed to slightly more than 12 cigarettes per day, on average.

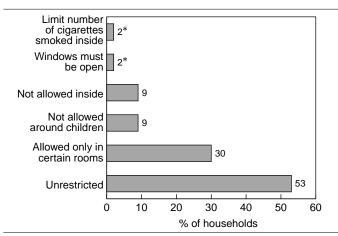
The number of smokers who smoke indoors also influences the level of health risk from ETS exposure at home. In about half of homes with young children (children under age 12) exposed to tobacco smoke, only one person smoked regularly indoors. However, over a third (34%) of homes with young children exposed to tobacco smoke had two indoor smokers, and 10% had three or more smokers.

Restrictions on Smoking at Home

Of those homes where smoking was permitted, about half of them (47%) reported a variety of restrictions intended to limit children's exposure to ETS (Figure 2). However, the other half (53%) reported no restrictions whatsoever. In those homes with restrictions, the most common measure was allowing smoking only in designated rooms (although this is unlikely to be effective as the polluted air circulates throughout the house). Requiring smokers to go outside and not smoking in front of children were also common measures intended to restrict ETS exposure at home. Of all these methods to limit ETS exposure, smoking outside is undoubtedly the most effective.

—Figure 2—
Restrictions on Smoking in Homes with Children⁴

Households with children age 0-11 where smoking is allowed, Canada, 2000



Source: 2000 Canadian Tobacco Use Monitoring Survey

Other Survey Highlights

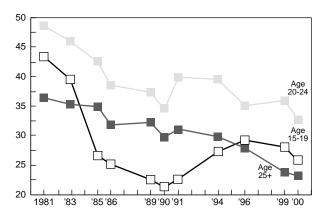
In addition to taking a measure of ETS exposure in Canadian homes, CTUMS 2000 also gathered other information on smoking behaviour. This information was obtained through approximately 20,000 interviews of people aged 15 years and older, about half of whom were between 15 and 24 years of age. Highlights are provided here; detailed fact sheets will appear in the coming months.

Prevalence of Smoking

In 2000, smoking prevalence in Canada for the population 15 years and older stood at 24%. This represented the lowest overall level since regular monitoring of smoking began in 1965. Recent trends continued downward for all age groups (Figure 3), with adults aged 25 and older showing the most consistent decline over the past 20 years. Among young adults aged 20-24, between 1999 and 2000, smoking declined from 35% to 32%. It is encouraging to note that the prevalence of smoking for teens aged 15-19, reported at 28% in CTUMS 1999, is now being reported at 25% for CTUMS 2000.

—Figure 3—
Trends in Smoking Since 1981

Current smokers,* by age group, Canada, 1981-2000



Sources: 1981-1986 Labour Force Survey supplements; 1989 National Alcohol and Other Drugs Survey; 1990 Health Promotion Survey; 1991 General Social Survey; 1994 Survey on Smoking in Canada, Cycle 1; 1996-97 National Population Health Survey; 1999 and 2000 Canadian Tobacco Use Monitoring Surveys

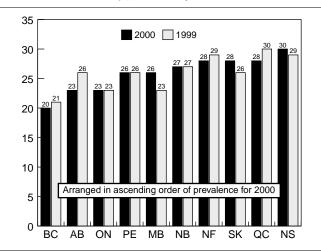
^{*} Moderate sampling error: use with caution

^{*} Current smokers - daily, non-daily

For the first time in a decade, smoking prevalence in Quebec was not ranked highest in the country. Indeed, Quebec, along with Alberta and Newfoundland, showed the greatest declines between 1999 and 2000. Overall, prevalence rates among the provinces continued to vary widely, from a low of 20% in British Columbia to a high of 30% in Nova Scotia (Figure 4). In addition, there were wide differences in average amounts reported smoked by daily smokers from a high of 14.8 cigarettes per day in British Columbia to 19 cigarettes per day in New Brunswick.

—Figure 4— Provincial Differences in Smoking

Current smokers,* by province, age 15+, 1999 and 2000



Source: 1999 and 2000 Canadian Tobacco Use Monitoring Surveys

CTUMS results indicate a relationship between both prevalence and self-reported amount smoked, and rates of taxation. In those provinces with "high" tax rates (B.C., Alta, Sask., Man., Nfld), the prevalence rates of those aged 15-24 and those aged 25 years and older were 27% and 22%, respectively. In the "low tax" provinces (Ont., Que., P.E.I., N.S., N.B.), the prevalence rates among 15-24 year olds and those 25 years and older were 30% and 25%, respectively. In "high tax" provinces, the self-reported amount smoked by daily smokers is 13 cigarettes per day for 15-24 year olds, and 16 per day for those aged 25 and older. In "low tax" provinces, the self-reported amount smoked by daily smokers is 14 cigarettes per day for 15-24 year olds, and 18 per day for those aged 25 years and older.

What Tobacco Products are Being Smoked?

In 2000, there were about 6 million cigarette smokers in Canada with the vast majority (84%) smoking only manufactured cigarettes. Nine percent smoked roll-yourowns sometimes or most of the time; while only 7% smoked roll-your-owns exclusively. Among cigarette smokers, the most popular choice was a light/mild cigarette (42%), while a third (34%) preferred regular strength, and 23% preferred ultra/extra light or ultra/extra mild cigarettes.

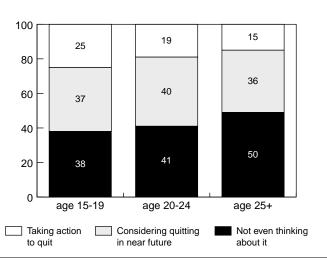
Only 3% of Canadians smoked a cigar or cigarillo in the 30 days before the survey, and 1% used chewing tobacco. These patterns have changed little over the years.

Nicotine Dependence and Readiness to Quit

CTUMS 2000 indicated that the average smoker in Canada has been smoking cigarettes for 24 years; smokes an average of 16.8 cigarettes every day; lights up the first cigarette within 30 minutes of waking; and is not even thinking about quitting (48% were in "precontemplation"). However, more than a third of current smokers (36%) were contemplating quitting, and 16% of smokers reported taking concrete steps to do so. Teen smokers were most likely to be taking action to quit (25%) while half of adult smokers were most likely to not even be contemplating it (Figure 5).

—Figure 5— Readiness to Quit Smoking

Current smokers,* by age group, Canada, 2000



Source: 2000 Canadian Tobacco Use Monitoring Survey

^{*} Current smokers – daily, non-daily

^{*} Current smokers - daily, non-daily

There appears to be an association between thinking about quitting and amount smoked. Daily smokers in the precontemplation phase of quitting smoked an average of 16.6 cigarettes per day, while those in the preparation phase consumed 12 per day. Reducing the amount smoked may be an indication of readiness to quit and may also be an important step in the quitting process.

Survey Methods

Objectives. The Canadian Tobacco Use Monitoring Survey (CTUMS) was initiated in 1999 to provide Health Canada and its partners with reliable data on tobacco use and related issues. The primary objective is to track changes in smoking status and amount smoked, especially for populations most at risk for taking up smoking, such as 15-24 year olds. For example, CTUMS will allow Health Canada to estimate smoking prevalence for age groups 15-24 and 25 years and older by province and by sex on a semi-annual basis.

Population Coverage. The target population for CTUMS is all persons 15 years of age and older living in Canada, excluding residents of Yukon, Nunavut, and the Northwest Territories, and full-time residents of institutions. In addition, because this was a telephone survey, the 3% of Canadians without telephones were not included.

Data Collection. The results in this fact sheet are based on data collection that took place between February and December 2000. Statistics Canada conducted computer-assisted interviews by telephone; only direct reports (i.e., not third-party) with the selected person were accepted.

Survey Design. In approximately 44,400 households, information about household composition, ETS in the home, and restrictions was collected. In half of those households, one person was selected to obtain information on smoking habits. This amounted to 20,415 individuals, about half of whom were aged 15-24. This oversampling means that it is possible to estimate the smoking prevalence of Canadians aged 15-19 and 20-24 within about $\pm 3\%$ each year. Further, to allow provincial comparisons of approximately equal reliability, the overall sample size for the survey is divided equally across all 10 Canadian provinces.

The overall response rate for CTUMS, which takes into consideration the participation of both households and individuals within households, was 81%. Unlike telephone surveys that use a quota approach to sampling, every telephone number called by Statistics Canada was fully accounted for, in order to calculate the survey's response rate accurately and properly weight the data to represent the Canadian population. For those telephone numbers with no answer after a minimum of 17 callbacks, the telephone companies were contacted to determine whether the number was valid and, if it was, whether it was a business or residential number. Statistics Canada's administrative records were used to adjust for any other outstanding telephone numbers.

Microdata. A public use microdata set containing the results of the survey is available for purchase from Statistics Canada. The public release of the data was announced on May 29, 2001 in Statistics Canada's *The Daily*.

References

- 1. Health Canada. *Canadian Tobacco Use Monitoring Survey, Wave 1.* 1. Summary of Results. January 2000.
- 2. Health Canada. *Canadian Tobacco Use Monitoring Survey, Wave 2/Annual.* 1. Trends in Smoking, 1999. January 2001.
- 3. Health Canada. *National Population Health Survey Highlights*. 1.9 Exposure to Environmental Tobacco Smoke. January 1999, No. 1. (*Note that while the questions asked in the two surveys are similar, they are not identical.*)
- 4. Multiple responses possible.

Terminology

Smoking status has been defined, wherever possible, to be consistent with the definitions used in other recent national surveys.

Smoking prevalence - the percentage of smokers in a particular group who smoke either daily or occasionally.

Cigarette consumption - the amount reported smoked by either daily or occasional smokers over a period of time.

Current smoker – was smoking at the time of the interview, and included daily smokers and non-daily smokers (also known as occasional smokers). Smoking status was determined from the response to the question: "At the present time do you smoke cigarettes every day, occasionally, or not at all?"

Former smoker – was not smoking at the time of the interview, however, answered "YES" to the question: "Have you smoked at least 100 cigarettes in your life?" Long-term former smokers (successful quitters, 1+ year ago) and short-term former smokers (recent quitters, <1 year ago) were then determined by their response to the question: "When did you stop smoking? Was it less than one year ago, 1 to 5 years ago, or more than 5 years ago?"

Never smoker – was not smoking at the time of the interview and answered "NO" to the question: "Have you smoked at least 100 cigarettes in your life?"

Nonsmoker – former smokers and never smokers combined.

Precontemplation - current smokers who answered "NO" to the question, "Are you seriously considering quitting within the next 6 months?"

Contemplation - current smokers who were either seriously considering quitting within the next 6 months, but answered "NO" to the question, "Are you seriously considering quitting within the next 30 days?" OR were seriously considering quitting within the next 30 days, but did not try to quit for at least 24 hours during the past year (i.e., answered "NONE" to the question, "In the last year, how many times have you quit for at least 24 hours?"

Preparation - current smokers who were seriously considering quitting within the next 30 days and had quit smoking at least once, for at least 24 hours, during the past year.

Action - former smokers (i.e., did not currently smoke) who had quit smoking within the past 5 months (inclusive).

Maintenance - former smokers who, at the time of the interview, had quit smoking at least 6 months ago.

This Fact Sheet summarizes results for the second year of data collection for the Canadian Tobacco Use Monitoring Survey (CTUMS), a new ongoing Health Canada survey designed to provide periodic national and provincial cross-sectional estimates on tobacco use.

For more information about the survey and/or its results, please write the Tobacco Control Programme, Research, Evaluation and Surveillance, 123 Slater Street, Health Canada, Address Locator 3507B, Ottawa, ON, K1A 0K9 or visit our website at: http://www.hc-sc.gc.ca/hppb/tobacco/ctums_splash.html

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