Attachment 1

September 30, 2016

Smokeless Tobacco

This position statement on smokeless tobacco is issued in the context of the following concerns about the health and social impacts of smokeless tobacco use:

- Smokeless tobacco products contain at least 28 known carcinogens and are associated with nicotine addiction, oral cancers, pancreatic cancer, sores in the mouth, dental cavities, tooth decay, gum disease, and bacterial infections;^{1,2,3,4,5,6,7}
- The regulatory landscape regarding the availability and use of smokeless tobacco is complicated and covered by varying legislation and policy at federal, provincial and municipal levels of government, and from local organizations;
- Use of smokeless tobacco products is higher among young people, especially male athletes. There is a culture of smokeless tobacco use among some professional athletes who, as role models, influence this behavior in young people;^{2,8,9,10}
- Smokeless tobacco products are increasingly targeted to youth. Up to 6.3% of Grade 7 to 12 Ontarians students over 58,000 youth and 3% of students in Toronto have tried smokeless tobacco in the last year;^{2,11,12, 13,14}
- While several local and provincial amateur sports organizations have implemented policies and report no significant concerns with smokeless tobacco use, Baseball Ontario reports that smokeless tobacco continues to be problematics, in spite of their policy.
- Although laws prohibiting smokeless tobacco use at sports facilities in Ontario are not common, and it is not regulated in Toronto, a number of cities in the U.S. enacted laws prohibiting the use of smokeless tobacco at sports venues in 2016.

To minimize the health impacts of smokeless tobacco use in Ontario, Toronto Public Health recommends that the provincial government enact the following legislation:

• Prohibit the use of all tobacco products, explicitly including smokeless tobacco, wherever smoking is prohibited, including at all Ontario sports fields and recreational facilities.

In the absence of provincial legislation, Toronto Public Health recommends the following actions:

- Amateur, semi-professional, and professional sports organizations should develop, implement, and enforce policies that prohibit the use of smokeless tobacco by their players, coaches, officials, and other staff while engaged in activities associated with the organization. Amateur organizations that have existing policies should maintain and enforce those policies;
- Privately owned sport and recreation facilities, including venues that host Major League Baseball (MLB) and other professional sports leagues, should develop, implement, and enforce policies that prohibit all use of smokeless tobacco on the premises;

• Organizations engaged in tobacco use prevention and cessation efforts should explicitly include information about the harms of smokeless tobacco as part of their programming.

Sport and recreation organizations and owners and/or operators of sport and recreation venues are invited to contact Toronto Public Health for assistance in developing and implementing policies that prohibit the use of smokeless tobacco at activities associated with their organization or venue.

WHAT IS SMOKELESS TOBACCO?

Smokeless tobacco includes a variety of products, such as chewing tobacco or snuff, which are typically placed between the gum and the cheek, to be chewed or sucked, but may also be inhaled through the nose or dissolved in the mouth (see Table 1).¹⁵ Sweeteners and flavouring agents have been popular additives to smokeless tobacco products, but recent legislation has restricted the sale of flavoured tobacco products in Ontario.^{1,16} When these products are chewed or sucked, tobacco juices and excess saliva are produced.¹ These juices are usually spit out, but may be swallowed for an enhanced 'nicotine high'*.^{4,17} Even when the juices are spit out, the use of smokeless tobacco results in rapid absorption of nicotine into the bloodstream.⁴

Other forms of smokeless tobacco that are popular with various ethnocultural groups are sold in specialty stores in Toronto. Paan, pan masala and gutka are used primarily by people from South and South East Asia and many include mixtures of tobacco with betel nut palm (also known as areca nut), calcium hydroxide and spices, wrapped together in a leaf and chewed as a large wad.^{18,19}

WHY DOES TORONTO PUBLIC HEALTH HAVE CONCERNS?

Smokeless tobacco is often overlooked in the broader dialogue on tobacco policy. Although it is not used as widely as other forms of tobacco, the unique context in which it is typically used calls for special attention to be paid to the following concerns:

• Smokeless tobacco poses serious health risks that may be unrecognized Smokeless tobacco products are carcinogenic, highly addictive, and significantly increase risk for oral cancers, pancreatic cancer, sores in the mouth, dental cavities, tooth decay, gum disease, and bacterial infections.^{1,2,3,4,5,7} The International Agency for Research on Cancer has identified at least 28 known carcinogens in smokeless tobacco products, including the tobacco-specific nitrosamines that are the key cancer-causing agents in cigarettes.^{6,20} A typical piece of smokeless tobacco left in the mouth for 30 minutes will allow the body to absorb the same amount of nicotine contained in 4 cigarettes.⁴ People who use smokeless tobacco regularly may keep a piece of tobacco in their mouth for several hours in order to achieve a sustained high.⁴ More than half of people who use smokeless tobacco on a daily basis have

^{*} Nicotine causes a surge of adrenaline to be released in the brain, resulting in feelings of energy and pleasure.

mouth lesions that may become cancerous.²¹ People who use smokeless tobacco are four times more likely to have serious dental problems.²² Smokeless tobacco use does not carry the same risk of lung cancer and vascular diseases as smoking, and is sometimes promoted as a harm reduction tool, which may lead new tobacco users or those who are trying to quit smoking to believe that smokeless tobacco is a safe alternative.^{11,23}

Smokeless tobacco products are most popular among youth

There are limited data available on the use of smokeless tobacco products in Ontario, but the evidence suggests that young people are most likely to try these products.^{2,13} Recent studies show that up to 6.3% of students in grades 7-12 in Ontario, over 58,000 youth, have used smokeless tobacco in the last year.¹⁴ The number of students in grades 7-12 using smokeless tobacco in the last year in Toronto is 3.0%.¹⁴ National and provincial data show that rates of smokeless tobacco use vary between provinces but are among the lowest in Ontario.¹³

• Smokeless tobacco products are designed to appeal to youth

Flavoured and other novelty tobacco products are particularly attractive to young people and at least 20 new smokeless tobacco products have been introduced into the Canadian market since 2009.³ According to a 2015 report, about 85% of Canadians aged 15-19 who had used smokeless tobacco in the last 30 days had used a flavoured product.¹³ Spit-free snus and dissolvable tobacco are primary examples of new products that increase the appeal of smokeless tobacco use among youth.¹² Additionally, some tobacco companies manufacture brands of smokeless tobacco that have lower nicotine levels and are designed for use by people who are not yet accustomed to the high levels of nicotine found in most smokeless tobacco products.^{12,24}

Tobacco prevention and cessation efforts may not be reaching people who use smokeless tobacco

The number of adolescents in Ontario who have tried smokeless products has remained unchanged since the introduction of the provincial *Tobacco Control Act* in 1994, whereas the number who smoke has decreased sharply.¹³ Similar trends have been observed in other jurisdictions.¹³ There has been an 18.3% increase in the sale of smokeless tobacco products in Ontario since 2007.²⁵

• Smokeless tobacco use may be part of the continuum of tobacco product use Young people who develop nicotine addiction by using smokeless tobacco may be more likely to try cigarette smoking or to use novel nicotine delivery systems like ecigarettes.^{12,26} Conversely, smokers who want to avoid the stigma associated with smoking, inconspicuously use tobacco products indoors, hide their tobacco use from parents or friends, or who are looking for harm reduction measures may switch to smokeless tobacco.^{12,27}

- Smokeless tobacco products are most commonly used among young athletes There are no data on the prevalence of smokeless tobacco use among athletes in Canada, but American jurisdictions report that more than 11% of high school athletes currently use smokeless tobacco, compared to 6% of their non-athlete peers.^{9, 10} Approximately half of all male hockey players, baseball players, and wrestlers at the level of the National Collegiate Athletic Association in the U.S. engage in smokeless tobacco use.²⁸ Smokeless tobacco is also reportedly popular in sailing, lacrosse, rodeo, and stock car racing. Some athletes report that they use smokeless tobacco to enhance their athletic performance, but there is no evidence that nicotine has any such effects.^{29,30}
- There is a culture of smokeless tobacco use among some professional athletes who, as role models, influence this behavior in young people There are reports that smokeless tobacco is used by players and coaches in several professional sports that are played in Toronto.³¹ Since 2011, MLB players have been prohibited from using smokeless tobacco during league-affiliated activities unless it is concealed, however it is evident in the media that some players continue to contravene this policy.^{31,32,33,34,35,36} The penalties for violating these regulations are minor and various sources estimate that 25-37% of MLB players still use smokeless tobacco.^{36,37} In 1993, the Commissioner of Baseball, who oversees Minor League Baseball (MiLB) and MLB, imposed a ban on smokeless tobacco on MiLB. Unlike MLB, MiLB players do not belong to a players' union. The Commissioner of Baseball has faced resistance to imposing a strict ban on major league players during collective bargaining.³⁸ This is concerning because the public and visible use of smokeless tobacco products by professional athletes may normalize and glamorize the habit in the eyes of young fans.¹¹

THE REGULATORY CONTEXT FOR SMOKELESS TOBACCO PRODUCTS

Smokeless tobacco products are regulated by legislation enacted by each level of government:

- The federal *Tobacco Act* (1997) regulates the availability of all tobacco products in Canada and includes laws about sale of tobacco products to minors, restrictions on advertising and promotion, and the health warnings that must be included on packaging.^{39,40} Amendments to the Tobacco Act in 2009 and 2010 restricted the availability of flavoured tobacco products in Canada, but were not applicable to smokeless tobacco.
- The *Smoke-Free Ontario Act (SFOA)* (2006) replaced the provincial *Tobacco Control Act (1994)* and restricts where tobacco products can be used in Ontario.⁴¹ On January 1, 2015, amendments to the SFOA prohibited smoking within 20 meters of any publicly owned sports fields and surfaces, but this prohibition is not applicable to smokeless tobacco.⁴¹ On January 1, 2016, additional amendments were made to the Act to prohibit the sale of most flavoured tobacco products, including all flavoured smokeless tobacco.¹⁶

- The provincial *Tobacco Tax Act* (1990) collects taxes on tobacco products by ensuring that all tobacco retailers are registered and licensed with the province of Ontario.⁴² There are 2,384 licensed tobacco retailers in the City of Toronto alone, but the number selling smokeless tobacco products is not known.
- Major American cities, including Boston, Chicago, San Francisco, Los Angeles, and New York City, began implementing laws prohibiting the use of smokeless tobacco at sports and recreation venues in the first half of 2016.^{43,44,45,46,47} Sixteen Ontario municipalities have enacted tobacco-free bylaws that include prohibitions on smokeless tobacco at sports fields and recreational facilities. Neither the *SFOA* nor local by-laws protect youth in Toronto from the harms of smokeless tobacco.

ACTION TO ADDRESS THE CONCERNS

Several local and provincial amateur sports organizations have responded to these concerns by implementing their own policies prohibiting the use of smokeless tobacco. These organizations include the Greater Toronto Hockey League, the Ontario Hockey Federation, Baseball Ontario, the Toronto Baseball Association and the Ontario Soccer Association.^{48,49,50} Their policies stipulate that any coach, player, or official using smokeless tobacco will be ejected from the game or event.^{48,49,50} Further, in 2010, 16 local sport and recreation organizations were funded through Play, Live, Be Tobacco-Free provincial seed grants to develop and implement tobacco-free policies, which included prohibitions on the use of smokeless tobacco. ⁵¹ These organizations were re-engaged in the lead up to the TORONTO 2015 Pan American / Parapan American Games, which were tobacco-free. These policies set a clear example that the use of smokeless tobacco is not acceptable, and the City of Toronto should play a role in ensuring that amateur sports organizations and associations that have policies are vigilant about enforcement.

The City of Toronto must take further action in order to protect youth from the health harms associated with smokeless tobacco and to limit social exposure. Provincial action in the form of legislation prohibiting the use of smokeless tobacco products at all locations that currently prohibit smoking is a strong approach. In the absence of provincial action, a municipal by-law would signal commitment to the issue of ensuring greater protection of youth, but provincial action would offer the additional benefit of standardizing the current patchwork legislation across the province. At minimum, amateur, semi-professional, and professional sports and recreation organizations and the venues that host them should be encouraged to develop, implement and enforce their own policies to restrict smokeless tobacco use.

TABLE 1: TYPES OF SMOKELESS TOBACCO

Chewing Tobacco		
Form	Description	Use
Loose leaf	Cured tobacco, typically sweetened and packaged into a foil pouch	Piece removed from pouch and placed between cheek and gums
Plug	Cured tobacco pressed together and wrapped in a tobacco leaf	Piece removed from pouch and placed between cheek and gums
Twist	Cured tobacco, twisted together like a rope	Piece cut off and placed between cheek and gums
Snuff		
Form	Description	Use
Moist	Cured and fermented tobacco processed into fine particles and packaged in round tins	Pinch, or 'dip', is placed between the cheek and gums; typically requires spitting
Dry	Fire-cured tobacco in powder form	Pinch placed in the mouth or inhaled nasally; may require spitting when taken orally
Snus	Moist snuff packaged into single- use pouches resembling small tea bags	Pouch is placed between cheek and gums; does not require spitting
Dissolvable Tobacco		
Form	Description	Use
Lozenges	Pellets or tablets	Dissolves slowly in the mouth
Orbs	Resembles small mints	Dissolves slowly in the mouth
Sticks	Toothpick-like	Dissolves slowly in the mouth
Strips	Thin sheets, like breath freshening strips	Dissolves slowly in the mouth

Table adapted from U.S. Centers for Disease Control and Prevention¹⁵

REFERENCES

- ¹ Centers for Disease Control and Prevention. (2014). *Smokeless Tobacco: Health Effects.*
- http://www.cdc.gov/tobacco/data statistics/fact sheets/smokeless/health effects/index.htm
- ² Middlesex-London Health Unit (2013). *Chew and Snus (Smokeless Tobacco)*. <u>https://www.healthunit.com/chew-and-snus#</u> ³ Convention Secretariat, WHO Framework Convention on Tobacco Control. (2012). *Control and prevention of smokeless*
- tobacco products. http://apps.who.int/gb/fctc/PDF/cop5/FCTC_COP5_12-en.pdf
- ⁴ American Academy of Otolaryngology Head and Neck Surgery. *Smokeless Tobacco*. <u>http://www.entnet.org/content/smokeless-tobacco</u>
- ⁵ World Health Organization Tobacco Free Initiative. *Recommendation on Smokeless Tobacco Products*. http://apps.who.int/iris/bitstream/10665/42658/1/9241590556.pdf
- ⁶ International Agency for Research on Cancer. (2007). *Smokeless tobacco and some tobacco-specific N-nitrosamines*. <u>http://monographs.iarc.fr/ENG/Monographs/vol89/</u>
- ⁷ Han, J., Sanad, Y., Deck, J., Sutherland, J.B., Li, Z., Walters, W.J., Duran, N., Holman, M.R., & Foley, S.L. (2016). *Bacterial Populations Associated with Smokeless Tobacco Products*. Applied and Environmental Microbiology. [Epub ahead of print]
- ⁸ Rolandsson, M., Hallberg, L.R., & Hugoson, A. (2006). *Influence of the ice-hockey environment on taking up snuff: an interview study among young male athletes*. Acta Odontologica Scandinavia. 64(1):47-54.
- ⁹ Centres for Disease Control and Prevention. (2015). *High school athletes using smokeless tobacco more than non-athletes*. <u>http://www.cdc.gov/media/releases/2015/p0903-athlete-tobacco.html</u>
- ¹⁰ Chaffee, B.W., Couch, E.T., & Walsh, M.M. (2015). *Smokeless Tobacco in Sport and Use Among Adolescents*. University of California, San Francisco Center for Tobacco Control Research and Education.
- ¹¹ Kennedy, R. D., Leatherdale, S. D., Burkhalter, R., & Ahmed, R. (2011). *Prevalence of Smokeless Tobacco Use Among Canadian Youth Between 2004 and 2008: Findings From the Youth Smoking Survey*. Canadian Journal of Public Health, 102(5): 358-63.
- ¹² Boonn, A. (2016). *Smokeless Tobacco and Kids*. Campaign for Tobacco-Free Kids.
- https://www.tobaccofreekids.org/research/factsheets/pdf/0003.pdf
- ¹³ Reid J.L., Hammond D., Rynard V.L., & Burkhalter R. (2015). *Tobacco Use in Canada: Patterns and Trends, 2015 Edition*. Waterloo, ON: Propel Centre for Population Health Impact, University of Waterloo.
- ¹⁴ Boak, A., Hamilton, H. A., Adlaf, E. M., & Mann, R. E., (2015). *Drug use among Ontario students, 1977-2015: Detailed OSDUHS findings (CAMH Research Document Series No. 41).* Toronto, ON: Centre for Addiction and Mental Health.
- ¹⁵ Centres for Disease Control and Prevention (2014). *Types of Smokeless Tobacco*.
- https://www.cdc.gov/tobacco/data_statistics/fact_sheets/smokeless/use_us/types/index.htm
- ¹⁶ Ontario Ministry of Health and Long-Term Care. (2016). *How the Act Affects You: Flavoured Tobacco Products*. http://www.mhp.gov.on.ca/en/smoke-free/factsheets/flavoured_tobacco.asp
- ¹⁷ U.S. Department of Health and Human Services BeTobaccoFree.gov. *Nicotine Addiction and Your Health*. http://betobaccofree.hhs.gov/health-effects/nicotine-health/
- ¹⁸ Mouth Cancer Foundation. Areca nut, betel nut, paan and gutka. <u>http://www.mouthcancerfoundation.org/patients-guide/areca-betel-nut</u>
- ¹⁹ Centers for Disease Control and Prevention. (2015). *Betel Quid with Tobacco (Gutka)*. http://www.cdc.gov/tobacco/data_statistics/fact_sheets/smokeless/betel_quid/
- ²⁰ Health Canada. (2010). Smokeless Tobacco Products: A Chemical and Toxicity Analysis. <u>http://www.hc-sc.gc.ca/hc-ps/pubs/tobac-tabac/smokeless-sansfumee/index-eng.php</u>
 ²¹ Hatsukami, D. & Severson, H. (1999). Oral Spit Tobacco: Addiction, Prevention, and Treatment. Nicotine & Tobacco
- ²¹ Hatsukami, D. & Severson, H. (1999). *Oral Spit Tobacco: Addiction, Prevention, and Treatment*. Nicotine & Tobacco Research. 1:21-44.
- ²² Tomar, S.L. (1999). *Chewing Tobacco Use and Dental Caries Among U.S. Men.* Journal of the American Dental Association. 130:160.
- ²³ Boonn, A. (2016). *Smokeless Tobacco and Kids*. Campaign for Tobacco-Free Kids. https://www.tobaccofreekids.org/research/factsheets/pdf/0003.pdf
- ²⁴ Hatsukami DK, Ebbert JO, Feuer RM, Stepanov I, Hecht SS. (2007) *Changing smokeless tobacco products new tobaccodelivery systems*. Am J Prev Med. 33(6 Suppl):S368-78.
- ²⁵ Ontario Tobacco Research Unit. Smoke-Free Ontario Strategy Monitoring Report. Toronto: Ontario Tobacco Research Unit, Special Report, January, 2015. http://otru.org/wp-content/uploads/2015/04/MR-2014-Final.pdf

²⁶ Tomar, S. (2002). *Snuff use and smoking in U.S. men: Implications for harm reduction*. American Journal of Public Health. 23(2)

²⁷ Gartner C.E., Hall W.D., Chapman S., Freeman B. (2007). *Should the health community promote smokeless tobacco* (*Snus*) *as a harm reduction measure*? PLoS Med 4:7.

²⁸ National Collegiate Athletic Association. (2012) *National Study of Substance Use Trends Among NCAA College Student-Athletes*. <u>http://www.ncaapublications.com/productdownloads/SAHS09.pdf</u>

²⁹ Chague, F., Guenancia, C., Gudjoncik, A., Moreau, D., Cottin, Y., & Zeller, M. (2015). *Smokeless tobacco, sport and the heart*. Archives of Cardiovascular Diseases. 108(1):75-83.

³⁰ Robertson, P.B., DeRouen, T.A., Ernster, V., Grady, D., Greene, J., Mancl, L., McDonald, D., & Walsh, M.M. (1995). *Smokeless tobacco use: how it affects the performance of major league baseball players.* Journal of the American Dental Association. 126(8):1115-1124.

³¹ Kennedy, B. (2015). Blue Jays manager John Gibbons opens up about quitting tobacco. Toronto Star.

https://www.thestar.com/sports/bluejays/2015/06/07/blue-jays-manager-john-gibbons-opens-up-about-quitting-tobacco.html

- ³² Birenbaum, J. (2016). Osuna gets bullpen dip from generous fan. The Score. <u>http://www.thescore.com/news/1042306</u>
- ³³ Major League Baseball Players Association. Basic Agreement (2012-2016). <u>http://mlb.mlb.com/pa/pdf/cba_english.pdf</u>
- ³⁴ Reddit. (2015). https://www.reddit.com/r/baseball/comments/383ed7/who_uses_dipchew/

³⁵ Starkman, R. (2010). *NHL can't snuff out tobacco use among players*. Toronto Star.

https://www.thestar.com/sports/2010/11/24/nhl cant snuff out tobacco use among players.html

³⁶ DeLessio, J. (2016). A Surprisingly High Number of Major League Baseball Players Still Chew Tobacco. http://nymag.com/daily/intelligencer/2016/04/how-many-major-leaguers-use-smokeless-tobacco.html

³⁷ Conrad, A.K., Hutton, S.B., Munnelly, M., & Bay. R.C. (2015) *Screening for smokeless tobacco use and presence of oral lesions in major league baseball athletes.* Journal of the California Dental Association. 43(1):14-20.

³⁸ Doyel, G. (2016). *Time to spit out chewing tobacco for good in Major League Baseball*. CBS Sports.

http://www.cbssports.com/general/news/time-to-spit-out-chewing-tobacco-for-good-in-major-league-baseball/

³⁹ Health Canada. (2011). *Tobacco Products Information Regulations*. <u>http://www.hc-sc.gc.ca/hc-ps/tobac-tabac/legislation/reg/prod/index-eng.php</u>

⁴⁰ Reid, J.L., & Hammond, D. (2012). *Tobacco Use in Canada: Patterns and Trends, 2012 Edition (Supplement: Tobacco Control Policies in Canada)*. Waterloo, ON: Propel Centre for Population Health Impact, University of Waterloo
 ⁴¹ Ontario Ministry of Health and Long-Term Care. (2015). *Smoke Free Ontario Act. How the Act Affects: Sporting Areas.*

http://www.mhp.gov.on.ca/en/smoke-free/factsheets/sporting 01052015.pdf

⁴² Ontario Ministry of Finance. (2016). *Tobacco tax*. <u>http://www.fin.gov.on.ca/en/tax/tt/</u>

⁴³ City of Boston. (2015). Mayor Walsh to File Ordinance to Ban Smokeless Tobacco at Professional and Amateur Sports Venues in Boston. <u>http://www.cityofboston.gov/news/Default.aspx?id=20275</u>

⁴⁴ Chicago Department of Public Health. (2016). *Smokeless Tobacco Use Prohibits at Sports Event Sites*. <u>http://www.cityofchicago.org/city/en/depts/cdph/supp_info/tabacco_alcohol_drug_abuse/smokeless-tobacco-use-prohibited-at-sports-event-sites.html</u>

⁴⁵ City and County of San Francisco. (2015). *Supervisor Farrell to Formally Introduce Anti-Chewing Tobacco Legislation*. <u>http://www.sfbos.org/index.aspx?page=17486</u>

⁴⁶ City of Los Angeles. Smokeless Tobacco Ordinance. http://clkrep.lacity.org/onlinedocs/2015/15-0711_misc_12-09-2015.pdf

⁴⁷ City of New York. (2016). *Smokeless Tobacco Law*. <u>http://www1.nyc.gov/nyc-resources/service/5805/smokeless-tobacco-law</u>

⁴⁸ Ontario Hockey Federation. *Tobacco Policy*.

http://www.ohf.on.ca/sites/default/files/docs/OHF%20TOBACCO%20POLICY%20.pdf

⁴⁹ Baseball Ontario – Umpire Development. Prohibition on the Use of Tobacco Products, Alcohol & Drugs.

http://www.baseballontario.com/Umpires/Admin/SideMenu/DispSideMenuContentMain.aspx?TopMenuID=10002&menuID=256&dipIds=undefined

⁵⁰ Ontario Soccer Association. Ontario Soccer Association Club Development Booklet.

https://www.google.ca/url?sa=t&rct=j&q=&esrc=s&source=web&cd=1&cad=rja&uact=8&ved=0ahUKEwjfkunXgfHNAh Wq5IMKHWs5BvMQFggeMAA&url=http%3A%2F%2Fwww.ontariosoccer.net%2Fimages%2Fpublications%2F2015%2F clubs-districts%2FTemplate-Booklet-(7x11)-Feb-24-

2013.docx&usg=AFQjCNHVfrN32pz7emjV7J9_vRgxM7WlbA&sig2=iuOSUK8JxGsVsXq2m-dFwQ

⁵¹ Play, Live, Be Tobacco-Free. <u>http://www.playlivebetobaccofree.ca/Home.aspx</u>

FOR MORE INFORMATION

Monica Campbell Director Healthy Public Policy Toronto Public Health Tel: 416-338-0661 Email: <u>mcampbe2@toronto.ca</u> Loren Vanderlinden Manager Healthy Public Policy Toronto Public Health Tel: 416-338-8094 E-mail: <u>lvander@toronto.ca</u>