

#### ADDRESSING HOOKAH (WATERPIPE) USE IN TORONTO

Presentation to Toronto Board of Health June 1, 2015

#### Michael Perley Director Ontario Campaign for Action on Tobacco

Mr. Chairman and Members of the Board of Health,

On behalf of the partners of the Ontario Campaign for Action on Tobacco, thank you for the opportunity to comment on the excellent staff report before you, "Hookah (Waterpipe) Use in Licensed Establishments," in Toronto.

Evidence of the physical and societal dangers of the use of both tobacco-based and nontobacco waterpipe smoking has been accumulating for several years. The report clearly demonstrates that that evidence has now reached a point where urgent action is required.

Our own research and that of our partners – in particular the Non-Smokers' Rights Association/Smoking and Health Action Foundation – confirms the report's conclusions:

- Any type of shisha combustion, whether herbal or non-herbal, creates serious health risks for users and for those exposed to second-hand emissions;
- Despite some claims that only herbal product is offered in many Toronto establishments, research has identified airborne nicotine in some of these establishments;
- Hookah use is linked to subsequent cigarette smoking in adolescents;
- Many young people believe hookah smoking is less harmful than cigarette smoking;
- Visible hookah use strengthens the apparent normalcy and acceptability of smoking;
  - And finally, use of flavoured shisha is widespread.

Taken together, these conclusions should be more than enough for the City to initiate immediate action. Some, however, may suggest that the Ontario government should be legislating in this area. Recent developments make this unlikely.

As you are no doubt aware, Bill 45, the Making Healthier Choices Act, which enacts various amendments to the Smoke-Free Ontario Act, received Royal Assent in the provincial Legislature on Thursday of last week.

As the report before you states, one section of Bill 45 will allow enforcement personnel to take samples of material being smoked in hookahs, in order to test for the presence of tobacco. This approach, however, while better than what we have had, is only a modest first step in preventing the broad range of impacts from all types of shisha on individuals in dozens of Toronto establishments.

At the Committee hearings on Bill 45, we raised the need to prohibit the smoking of <u>all</u> forms of shisha province-wide. An amendment was proposed by NDP MPP France Gelinas to include

#### Founding Agencies

Canadian Cancer Society Ontario Division

Heart and Stroke Foundation of Ontario

> Non-Smokers' Rights Association

Ontario Medical Association

#### Supporting Agencies

Association of Local Public Health Agencies

Cancer Care Ontario

Children's Aid Societies

Ontario Association of Naturopathic Doctors

Ontario Federation of Home and School Associations

Ontario Physical and Health Education Association

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Ontario Public Health Association

Physicians for a Smoke-Free Canada

Registered Nurses Association of Ontario

The Ontario College of Family Physicians

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t: 416.340.2992 f: 416.340.2995 email: ocat@oma.org www.ocat.org this prohibition in Bill 45. Unfortunately, Ms. Gelinas' amendment was ruled out of order because the Smoke-Free Ontario Act – which Bill 45 amends – can only regulate "tobacco" and "tobacco products". Testing for the presence of tobacco is as far as the provincial government can go under the present legislation.

Bill 45 also bans flavouring agents – such as fruit and candy flavours – in all tobacco products, whether combustible or smokeless. While this section of Bill 45 will prohibit the sale of flavoured tobacco-based shisha <u>in retail stores</u> <u>such as specialty tobacconists</u>, the same testing procedure I described earlier will have to be applied to any shisha being smoked in bars, cafes, night clubs or restaurants, in order to determine whether the shisha, if flavoured, contains tobacco. The Bill's flavourings ban will therefore be of limited usefulness in addressing the multiple impacts of hookah/shisha smoking in Toronto.

The Ontario Campaign endorses the approach recommended by Toronto Public Health. We look forward to working with the Licensing and Standards Committee later this month to ensure that the existing epidemic of disease and death caused by tobacco products is not worsened by the continued smoking of shisha in Toronto establishments.

Thank you.



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Visit tph.to/hookah for more information and resources on the health effects of smoking hookah PH14096B202

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### CLEARING THE SMOKE the truth about smoking hookah

- **Fact:** Youth who are first-time smokers are picking up a hookah pipe more often than a cigarette.
- Fact: Hookah is not a safe way to smoke tobacco.
- **Fact:** Herbal shisha is not healthier than tobacco shisha.
- Fact: Hookah, narghile, goza, hubble bubble; whatever you call it, if you are smoking shisha you are smoking.

### THE ↓ LUNG ASSOCIATION<sup>™</sup> When you can't breathe, nothing else matters.

Monday June 1 2015,

Good afternoon members of Toronto Board of Health,

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**Ontario Respiratory Care Society** orcs@on.lung.ca

**Ontario Thoracic Society** ots@on.lung.ca

Thank you for the opportunity to speak this afternoon. My name is Sarah Butson and this is my colleague Chris Yaccato. We are here today to represent the Ontario Lung Association, which supports the recommendations put forward by the Medical Officer of Health calling for the prohibition of hookah use in licensed establishments. I hope to use my opportunity today to emphasize that unregulated hookah establishments undermine our good work in supporting a smoke free Ontario. I'll also highlight waterpipe's rising popularity, direct and indirect health impacts, and what others are doing to address this.

While I'm here today to represent the Lung Association, as a citizen of Toronto I also have a vested interest in this issue. I went to university when you were allowed to smoke in doors. In fact to pay my tuition I worked as a waitress, often in the smoking section of a restaurant. We would take 'fresh air' breaks and I remember coming home smelling of smoke. I cringe to think about the potential impacts on my lungs from having worked in those conditions. When legislation was passed it was a relief – and the restaurant industry stayed strong. Fast forward a few years, I'm a mother and now live on the Danforth in where in a one block stretch there are, at last count, 3 places with smoking inside. I am appalled that waitresses in these establishments are facing the same hazardous working conditions today. We've faced these challenges before; seen the impact on workers of these establishments before – but yet this issue is creeping up again in another form.

Where we have done an incredible job regulating and protecting citizens from exposure related to cigarette smoke, hookah establishments remain a glaring gap. Ten years ago the World Health Organization identified waterpipe use as a serious potential health hazard. Waterpipe smoke contains nicotine, carbon monoxide, carcinogens, and may contain greater amounts of tar and heavy metals than cigarette smoke. This smoke is delivered in heavy doses. In a typical hookah session, a user consumes about 100 to 200 times the volume of smoke compared to a cigarette.

There is a real need, as indicated in the report, for widespread public education on this issue to dispel myths around health effects of hookah use. Most users believe hookah is safe, especially young people where it is rising in popularity. Enticing flavours like white gummy bear, pineapple, and double apple are a draw for this crowd. In fact a recent study by the Ontario Tobacco Research Unit (OTRU) found that there has been a rise in hookah use amongst young Canadians. In 2006, 6% of 15-19 year olds had used hookah and 11% of 20-24 year olds. As of 2013 these numbers have risen to 14 and 29% respectively. This means that almost 1/3 of young adults in Canada are using hookah.

Its popularity may be in part due to the fact that is often used as a social activity, which poses additional health concerns beyond inhaled smoke. A single mouthpiece is often used, which can increase the risk of transmitting communicable diseases such as herpes, mononucleosis, tuberculosis, and hepatitis amongst others.

The effects of hookah do not stop at the individual user but pose significant air quality concerns. Carbon Monoxide levels inside hookah cafes have been found to be 89 times higher than outdoors and spending 2 hours in a hookah café is equal to smoking 10 cigarettes. Additionally the exposure to fine particulate matter, which is inhaled deep into the lungs, is alarmingly high. Ontario's Air Quality Index indicates that measures over 91 ug/m<sup>3</sup> (Micrograms per Cubic Meter of Air) have possible serious respiratory effects – a forest fire for instance is 250 ug/m<sup>3</sup> and the indoor air of a hookah café is 1400 ug/m<sup>3</sup>.

In Toronto you can walk into a hookah establishment, pick your flavour, and smoke in-doors. This is one area where we are failing to protect workers, the general public, and youth from exposure to serious health hazards.

Significant progress has been made worldwide. Many Middle Eastern countries, including Jordan, Syria, Lebanon, Dubai, Saudi Arabia, and Turkey have enacted bans or restrictions on hookah. In Canada, 3 Provinces (Alberta, Quebec, and Nova Scotia) and over 10 municipalities regulate hookah use. Toronto, and the province of Ontario, have been leaders in taking progressive steps to ensure the next generation does not smoke, including the recent passage of Bill 45, the Making Healthy Choices Act. The absence of any regulation on hookah use, however, undermines this progress. It is critical that Toronto, a world class city, continues to assert itself as a leader in protecting the health of its citizens through supporting this call for a ban on hookahs.

Thank you

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Sarah Butson

#### Smoking and Health Action Foundation Fondation pour la lutte contre le tabac

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1 June 2015

#### Waterpipe Deputation: Toronto Board of Health

The Smoking and Health Action Foundation (SHAF) is a national, non-profit health organization that conducts evidence-based research on topical issues in tobacco control. SHAF is the sister organization of the Non-Smokers' Rights Association (NSRA), a national tobacco control advocacy organization.

Our organization has been monitoring the issue of waterpipe smoking since 2008. We note that the availability of peer-reviewed research on waterpipe smoking and its health effects has increased dramatically in recent years. We have created a number of resources and have also hosted 2 waterpipe meetings (one Ontario-specific in 2011 and a national one in 2012), bringing together tobacco control and public health organizations, tobacco enforcement officers, environmental health inspectors, Royal Canadian Mounted Police (RCMP), Ontario Ministry of Health and Long-Term Care & Ministry of Finance, universities and Health Canada.

Waterpipe smoking has a history that dates back four centuries. However, the past two decades have seen it grow from a dwindling activity practised predominantly by older Middle Eastern men to become a youth-focused global epidemic. Why and how? The introduction of manufactured flavoured tobacco (Maassel) in the mid-1990s is commonly cited by experts, but other factors include the evolution of the internet and the rise of social media, the intersection between waterpipe's social dimension and thriving café culture, as well as lack of specific regulation. A multitude of mouth-watering shisha flavours combined with YouTube videos featuring hookah tricks like blowing smoke rings, Facebook shisha pages, online forums for sharing flavour "recipes," apps that simulate hookah smoking—today's waterpipe smoking is a meme and a modern and trendy cousin of its original form of use that has been embraced by young people worldwide.

Epidemiological data from various jurisdictions confirm this: waterpipe smoking has become the most popular form of tobacco use among youth in all 17 countries of the Middle East and in other parts of the world is second only to cigarettes. Global surveillance of waterpipe smoking rates, youth and adults, indicates that young people of all cultural backgrounds are at the forefront of this epidemic. The social nature of hookah smoking appears to have found a niche in young people's need for connectivity and social inclusion.

As more becomes known about the dangers of waterpipe (also known as hookah) smoking, both tobacco as well as other "herbal" concoctions, jurisdictions worldwide are responding with prohibitions in public places and workplaces. In Canada, concerns regarding insensitivity to long-standing cultural practices have been voiced in public discussions about the possible explicit inclusion of waterpipes in new smoke-free laws. Vancouver's smoke-free bylaw was legally challenged under the *Canadian Charter of Rights* and Freedoms, with claims of violations of freedom of conscience and religion, among other things. However, given the toxicity of all second-hand smoke, protection of cultural practices is not a valid argument against public health protection.

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In October 2014 the Second International Conference on Waterpipe Smoking Research was held in Qatar, attended by delegates from many countries where hookah smoking is considered traditional. The conference's *Doha Declaration* includes a statement that "existing policies weakly address waterpipe smoking; if they are to be effective in confronting the waterpipe epidemic, policies must be adapted to account for the specificities of waterpipe smoking, and must be evaluated scientifically and regularly for their effectiveness."

The most recent Conference of the Parties to the WHO Framework Convention on Tobacco Control (FCTC) received a report by the Convention Secretariat on the control and prevention of waterpipe smoking. A decision was agreed upon for Parties to step up surveillance efforts and to strengthen their implementation of the FCTC in relation to waterpipe tobacco products through the integration of waterpipe prevention and control in tobacco control measures.

All countries where waterpipe smoking is considered traditional are Parties to the FCTC. Many of those countries have taken measures to prohibit or restrict waterpipe smoking in public places, including:

- United Arab Emirates (2013) Smoking tobacco, including in a waterpipe, is restricted in restaurants and other public places.
- Turkey (2013) Use of tobacco products is prohibited in restaurants owned by legal entities and entertainment establishments such as cafes, cafeterias and bars. In 2013 the law was amended such that any kind of hookah or cigarette that does not contain tobacco but imitates a tobacco product is considered a tobacco product.
- Lebanon (2012) Waterpipe smoking is prohibited in public places, including restaurants and cafés.
- Syria (2010) Waterpipe smoking is restricted in restaurants and cafés ("public stores").
- Jordan (2008) Smoking is restricted in public places, including restaurants, although a number of accounts indicate the law has not been well enforced. It has been reported that the government will not renew licenses in 2015 for venues serving waterpipe.
- Saudi Arabia (Mecca & Medina, 2001) By royal decree, Mecca and Medina were declared tobacco-free in 2001. Waterpipe smoking is prohibited in cafés and restaurants within residential areas and near mosques and schools. Note that Mecca and Medina are Islam's two most sacred places and are revered by more than one fifth of the world's population. The World Health Organization reports that "smoking waterpipes in open cafés is particularly frowned upon by the religious leaders. It is viewed as 'committing the sin in public', challenging good Muslim behaviour and, potentially, promoting smoking behaviour amongst non-smokers." It is reported that Saudi Arabia has since banned smoking, including hookahs, in all government offices and most public places, including restaurants, coffee shops, supermarkets and shopping malls."

In Canada, the loudest opponents to smoke-free waterpipe legislation are business people who have a financial stake in the issue, not religious or cultural organizations. A similar observation has been made in Lebanon. Alberta's *Tobacco and Smoking Reduction Act* prohibits the smoking of tobacco and tobacco-like products in public places and workplaces (this portion not yet proclaimed). A coalition of restaurant owners actively opposed the bill; however, opposition from the province's Middle Eastern/Islamic religious and cultural organizations was notably absent.

Vancouver's smoke-free bylaw was legally challenged under the *Canadian Charter of Rights and Freedoms* by two café owners who claimed, among other things, that the bylaw violated their fundamental freedoms of conscience and religion. They claimed that waterpipe smoking is an important cultural and religious activity in their community, and that the bylaw was an infringement on their religious rights and those of their Muslim and Middle Eastern patrons. The judge rejected their arguments, noting:

- Hookah smoking is not part of any religious ceremony and does not connect Muslims with the divine;
- There is no evidence to support the defendants' claim that their ability to operate their hookah cafés, that permit people to smoke for profit, is a function of their spiritual faith;
- The bylaw does not prevent people from buying waterpipes or shisha to smoke in their own homes, at another person's home, either alone or in a group setting; and
- A ban on hookah smoking in public places and workplaces does not interfere with people's ability to act in accordance with their religious beliefs.

Smoke-free laws that explicitly include waterpipes and the smoking of other weeds or substances are enacted for the health benefit of everyone, regardless of cultural or religious background. The creation of smoke-free spaces is a globally-recognized health promotion best practice. Laws that also prevent the smoking of other weeds or substances level the playing field for all businesses, as did the prevention of smoking cigarettes and other tobacco products.

Although hookah smoking is considered traditional in various parts of the world, public health authorities and researchers agree that it is now a full-fledged global pandemic with young people at the fore. Given the known dangers of smoking and exposure to second-hand smoke (with or without tobacco), arguments in favour of the protection of historical cultural practices, or the protection of business interests, must take a backseat to the more important goal of public health protection.

Based on the research evidence and consultations with stakeholders across Ontario, SHAF has concluded that there is sufficient evidence regarding the health effects of waterpipe smoking to justify a bylaw that prohibits waterpipe smoking in public places and workplaces. Culture is not static. Canada used to have a huge smoking culture and had one of the highest rates of cigarette smoking in the western world. This has been turned around through decades of education and legislation, to the point where we now have one of the lowest smoking rates in the world.

In conclusion, SHAF supports the Board of Health recommendations to prohibit waterpipe use in establishments licensed by the City of Toronto and that Toronto Public Health conduct a comprehensive public education campaign to accompany the implementation of any regulatory change.

#### Our specific recommendations are:

- 1. That the City of Toronto pass a bylaw prohibiting the smoking of tobacco or other weeds or substances in public places and workplaces, including outside on all bar and restaurant patios to protect health and to maintain a level playing field for all hospitality businesses in the City.
- 2. That the City of Toronto consider other options to minimize or eliminate youth access to waterpipe smoking, including a retail display ban for smoking-related apparatus and paraphernalia.
- 3. That Toronto Public Health undertake a public education campaign aimed especially at youth and young adults, using traditional and social media, to address the widespread misconceptions about the health risks of waterpipe smoking.
- 4. That the Toronto Board of Health urge the federal Minister of Health to amend the *Tobacco Act* and regulations to explicitly include tobacco shisha.

#### Indoors

**Outdoors** 

1.	Harrison Hot Springs, BC	(16/06/2014)
2.	Vancouver, BC (two bylaws)	(01/09/2010) and (01/10/2014)
3.	Williams Lake, BC	(24/02/2015)
4.	Red Deer, AB	(08/07/2013)
5.	Barrie, ON (two bylaws)	(15/08/2011) and (26/08/2013)
6.	Bradford West Gwillimbury, ON	(03/09/2013)
7.	Orillia, ON	(10/06/2013)
8.	Peterborough, ON	(10/12/2012)
9.	Quebec	(31/05/2008)
10.	Nova Scotia	(20/11/2014)
1.	Coquitlam, BC	(10/08/2010)
2.	Harrison Hot Springs, BC	(16/06/2014)
3.	Kelowna, BC	(23/03/2015)
4.	Langley, BC	(19/07/2010)
5.	Maple Ridge, BC	(26/08/2014)
6.	North Vancouver, District of, BC	(19/04/2010)
7.	Port Moody, BC	(28/10/2008)
8.	Powell River, BC	(20/08/2009)
9.	Reveistoke, BC	(12/03/2013)
10.	Richmond, BC	(14/12/2009)
11.	Surrey, BC	(11/03/2013)
12.	Tofino, BC	(27/04/2010)
13.	Vancouver, BC (two bylaws)	(01/09/2010) and (01/10/2014)
14.	West Vancouver, BC	(06/07/2009)
15.	Williams Lake, BC	(24/02/2015)
	Alberta	(27/11/2013)
	Okotoks, AB	(19/08/2013)
	Red Deer, AB	(08/07/2013)
19.	Strathcona County, AB	(22/09/2009)
20.	Barrie, ON	(26/08/2013)

<sup>&</sup>lt;sup>1</sup> This list is created from an advanced search of the online NSRA database of smoke-free laws, using "Waterpipe" as the search term under "Products Included." <u>http://www.nsra-adnf.ca/cms/smoke-free-laws-database.html</u> Bylaws/laws are only included in this list if they specifically mention hookah or waterpipe. Information is current to March 27, 2015.

<sup>&</sup>lt;sup>2</sup> Note that the list is counting jurisdictions, not bylaws/legislation. Some municipalities, like Ottawa and Vancouver, have more than one bylaw that prohibit waterpipe smoking in different spaces.

<sup>&</sup>lt;sup>3</sup> Dates listed reflect either date implemented or date last amended, whichever is most recent.

21. Bradford West Gwillimbury, ON	(03/09/2013)
22. Chatham-Kent, ON	(11/08/2014)
23. Englehart, ON	(23/04/2012)
24. Essex, Town of, ON	(06/10/2014)
25. Hamilton, ON <sup>4</sup>	(09/03/2011)
26. Mississauga, ON	(23/04/2014)
27. Niagara Region, ON	(13/10/2013)
28. Orillia, ON	(10/06/2013)
29. Ottawa, ON (two bylaws)	(27/06/2012)
30. Oxford, ON	(18/11/2013)
31. Peterborough, ON⁵	(10/12/2012)
32. Tecumseh, ON	(08/07/2014)
33. Quebec	(31/05/2008)
34. Nova Scotia	(20/11/2014)
35. Hantsport, NS	(05/11/2013)

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<sup>&</sup>lt;sup>4</sup> This bylaw is specific to tobacco.

<sup>&</sup>lt;sup>5</sup> Peterborough's is Ontario's first exemplary and comprehensive waterpipe bylaw - it includes prohibition against smoking in enclosed public and workplaces. Orillia, Barrie and Bradford West Gwillimbury have followed suit with the same definition of waterpipe and also prohibit smoking in enclosed public and workplaces. Most other Ontario waterpipe bylaws apply outdoors or in municipal workplaces only.

Deputation to Toronto Board of Health, June 1, 2015 1pm. Roberta Ferrence, Sr. Scientific Advisor, Ontario Tobacco Research Unit, University of Toronto

#### WHAT DO WE KNOW ABOUT WATERPIPE?

- Waterpipe smoke is toxic: it contains high levels of fine particulates, carbon monoxide, benzene, heavy metals and other contaminants.
- The water does not filter toxic materials from the smoke.
- Most of the smoke comes from the burning charcoal, but a significant amount also comes from the tobacco or herbal product.
- The tobacco or herbal product is not just warmed by the charcoal. It burns at a low temperature, which actually produces more toxic smoke from incomplete combustion.
- Except for nicotine, there is no difference in the toxicity of tobacco and herbal waterpipe smoke.
- Waterpipe use among Ontario students is now greater than cigarette use.
- Waterpipe use is associated with serious health effects, including cancer, coronary heart disease, chronic bronchitis, emphysema, high blood pressure, impaired lung function, CO intoxication, obstetrical complications, osteoporosis, gum disease, and several infectious diseases.

#### WHAT DID WE FIND IN THE TORONTO WATERPIPE STUDY?

- Most waterpipe cafes serve at least some tobacco products in contravention of the Smoke-Free Ontario Act.
- Levels of toxic waterpipe smoke found in waterpipe cafes may surpass occupational health and safety workplace regulations.
- Nonsmokers in waterpipe cafes are exposed to high levels of second hand waterpipe smoke.
- Use of waterpipe outdoors can also result in hazardous levels of exposure.

#### WHAT ARE OTHER JURISDICTIONS DOING ABOUT WATERPIPE?

- A dozen Ontario municipalities, three Canadian provinces and several Middle Eastern countries now ban or restrict the use of hookah, particularly indoors.
- Toronto now has an opportunity to protect patrons, nonsmokers, waitstaff and residents in the same building from this preventable toxic exposure.



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# Hookah in Toronto

# Why Study Hookah?







New science on exposure & hazards

### More Young Canadians Are Using Hookah (%)



### What Was Measured?

### **Air Quality Inside Hookah Cafés and on Patios**



Nicotine in tobacco smoke

Fine particulate matter (PM<sub>2.5</sub>) Very tiny particles inhaled deep into the lungs.

Particles are 30-40 times smaller than a grain of sand.

Compare these diameters 🦽



According to Ontario's Air Quality Index, a level of fine particulate matter over 91 µg/m<sup>3</sup> is very poor, with possible serious respiratory effects

Carbon monoxide (CO) A poisonous gas that you can't see, smell or taste

Human hair (about 70µm across)

Grain of sand (about 50µm across)

PM<sub>2.5</sub>

(less than 2.5µm across)

1400



2011

2013

## What Did the Study Find?



Average air nicotine in 'tobacco-free' hookah cafés is similar to levels of nicotine in smoky bars

2012



**4**x

69x

= 10 cigarettes smoked based on CO levels

Compared to Outdoor Air, Hookah Cafés Had: higher PM<sub>2.5</sub> on patios

higher PM<sub>2.5</sub> inside cafés

89x higher CO inside cafés

# The Bottom Line

Particulates and CO found in Toronto hookah cafes are hazardous to the health of smokers, nonsmokers and particularly to café staff who are exposed regularly for longer periods Fine Particulate Matter Exposure (PM<sub>25</sub>) in µg/m<sup>3</sup>



# What About Legislation?

Ontario municipalities ban or restrict hookah

- Prov
  - Provinces legislate hookah use: AB, QC, NS

Many Middle Eastern countries ban or restrict hookah, including Jordan, Syria, Lebanon, Dubai, Saudi Arabia, and Turkey

