

From: [Hillary Buchan-Terrell](#)
To: [Board of Health](#)
Subject: [External Sender] The Canadian Cancer Society's comments for 2024.HL17.1 on October 21, 2024 Board of Health (City of Toronto)
Date: October 18, 2024 6:34:31 PM

To the City Clerk:

Please add my comments to the agenda for the October 21, 2024 Board of Health meeting on item 2024.HL17.1, Toronto Public Health Initiatives to Prevent Cancer

I understand that my comments and the personal information in this email will form part of the public record and that my name will be listed as a correspondent on agendas and minutes of City Council or its committees. Also, I understand that agendas and minutes are posted online and my name may be indexed by search engines like Google.

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Canadian Cancer Society comments:

About **4 in 10 cancer cases can be prevented** through healthy living and policies that protect the health of Canadians. It's true. There are things we eat, drink, breathe and do that affect our cancer risk. The ComPARE ([Canadian Population Attributable Risk of Cancer](#)) study found how many cancer cases we can prevent in the future by changing the world around us. This includes making healthy choices and protecting ourselves where we live, work and play.

If we act now, we can prevent thousands of cancer cases by the year 2042. It's all about understanding what the risks are and taking action to protect ourselves in our everyday lives. We can reduce our exposure to cancer risk factors by changing the world around us.

- **Live smoke-free** – Living smoke-free is the best thing you can do to reduce your risk of cancer. For free advice and information regarding quitting, call the toll-free number found on every cigarette package – 1-866-366-3667 or visit

www.smokershelpline.ca. In addition to numerous health benefits, quitting smoking can also save a lot of money -- to calculate how much can be saved each month/year, visit this website.

- **Adopt a healthy diet** - Eating more vegetables, fruit and fibre helps with healthy digestion, makes you feel full longer, and protects against many chronic diseases. To get the right amount of vegetables and fruit each day, make them half your plate at every meal and snack. Check out <https://food-guide.canada.ca/>, <https://www.halfyourplate.ca/> and <https://www.unlockfood.ca/en/Articles/Fibre.aspx> for examples, tips and tricks to achieving this goal.
- **Be physically active** - Not enough physical activity and too much sitting increases your risk of chronic disease. Aim for 30 minutes of activity every day and take frequent, short breaks from sitting. For Canadian Physical Activity Guidelines, visit the Canadian Society for Exercise Physiology at <http://csepguidelines.ca/>.
- **Reduce alcohol consumption** - Drinking any type or amount of alcohol increases your risk of developing numerous chronic diseases, including at least 9 different types of cancers. Canada's Guidance on Alcohol and Health <https://ccsa.ca/canadas-guidance-alcohol-and-health> outlines the health risks of alcohol and can help you make informed decision on whether you drink and how much.
- **Enjoy the sun safely** – protect your skin and protect your eyes.

Follow these recommendations and help reduce your cancer risk:

- [Get vaccinated](#) – Some viruses cause cancer. Check with your healthcare provider about whether a hepatitis B or HPV vaccine is a good idea for you.
- [Check your family history](#) – Tell your healthcare provider if any of your close relatives have ever been diagnosed with cancer.
- [Know your environment](#) – Learn how to reduce your exposure to cancer-causing substances (carcinogens).
- [Be safe at work](#) – Cancer-causing substances at work are responsible for a small percentage of cancers. Know your risk and protect yourself.
- [Understand hormones](#) – The birth control pill and hormone replacement therapy may increase your risk of cancer. Understand the risks and benefits.
- [Myths and controversies](#) – Be cautious of any information obtained from unmonitored sources.

We recognize that making healthy behaviour changes can be difficult to achieve alone, that's why we're here to help. We have smoking cessation and health

promotion [programs](#) for individuals, schools and workplaces.

[It's My Life!](#) is an interactive, evidence-based tool. It teaches you how 16 factors affect your risk of getting cancer and how you can reduce your risk by making simple changes.

Equity in Cancer Prevention

Communities that are underserved in the context of health services are populations that face inadequate and disadvantaged access to healthcare due to various factors such as race, age, language, geography, gender identity, sexual orientation and socio-economic status. A person who is part of an underserved community may be more likely to be exposed to cancer risks. Everyone needs and deserves to live, work and play in health-enhancing environments. [\[1\]](#)

Regarding the Board of Health proposed recommendations in [blue](#) below:

The Board of Health request the Ministry of Health to:

a. Improve access for local public health units, including Toronto Public Health, to sociodemographic data to monitor and address disparities in cancer risk factors, screening rates and treatment outcomes.

[CCS](#) and the Partnership have launched the [pan-Canadian Cancer Data Strategy](#) – the country's first cancer data strategy that focuses on cancer-specific data challenges.

With the goal of improving cancer outcomes and making cancer care in Canada better and more equitable, the pan-Canadian Cancer Data Strategy outlines a framework to guide efforts to enhance the collection, integration and use of cancer data. It also identifies 3 priorities for action and investment:

- Improve the efficiency, timeliness and quality of data capture and access
- Enhance linkages to current data
- Fill gaps in current data collection and availability

The Canadian Cancer Society is calling on health administrators, researchers and academic institutions, as well as federal, provincial and territorial policymakers to engage with the strategy's priorities to help build a more cohesive cancer data ecosystem that will benefit all people in Canada and respond to future challenges.

b. Work across the health care system to expand hepatitis B vaccination coverage, sterile needle distribution to reduce transmission of hepatitis C, testing of hepatitis B and C for greater detection, and treatment to decrease the transmission of these infectious diseases linked to cancer.

Get vaccinated

There is a vaccine that can protect you against hepatitis B. The vaccine is recommended for all children and for adults who are at increased risk for infection, such as healthcare workers, injection drug users or those travelling to a high-risk country (like Africa or parts of Asia). There is currently no vaccine for hepatitis C.

All provinces and territories offer publicly funded vaccine programs for children and teens. The age when children and teens are offered the hepatitis B vaccine varies by province or territory.

Practise safer sex

If you are sexually active, use a condom and other barriers safely to help protect against hepatitis B and hepatitis C, as well as other sexually transmitted infections.

Protect yourself from infected blood or body fluids

- Don't share needles or other drug-use equipment. If you use intravenous drugs, take part in a needle exchange program.
- Don't share personal care articles, such as razors, scissors, nail clippers or toothbrushes, with an infected person.
- If you get a tattoo, body piercing or acupuncture, make sure all equipment is clean and sterile. Needles should always be new, not used, and never homemade.
- Wear latex gloves whenever you might come into contact with someone else's blood or body fluids^[ii].

c. Strengthen and expand the Smoke Free Ontario Act and related regulations to ensure the regulations and enforcement mechanisms for tobacco use, retail and promotions are also applied to vapour products, newer and emerging nicotine products like nicotine pouches, and waterpipe and hookah smoking.

The Canadian Cancer Society (CCS) is advocating for measures to protect Canada's youth from the harms of e-cigarettes. E-cigarettes are less harmful than tobacco cigarettes if you don't use both (dual use). But e-cigarettes alone

can still cause harm. Because e-cigarettes are still quite new, more research is needed to know their long-term effects on your health. CCS is troubled by the alarming rise in youth vaping in Canada. According to 2021-22 Canadian Student Tobacco, Alcohol and Drugs Survey (CSTADS), 24% of students in grades 10-12 and 10% of students in grades 7-9 had used an e-cigarette in the past 30-days. Although these were both decreases from the 2018-19 survey, rates of youth e-cigarette use remain unacceptably high. We advocate for measures to protect young people from the harms of e-cigarettes so we don't see a new generation of young people addicted to nicotine through e-cigarettes.

We need regulations to prevent young people from using e-cigarettes and to help prevent the marketing of e-cigarettes from undermining tobacco control efforts.

Federal, provincial and territorial governments should adopt regulatory measures, such as:

- introducing a minimum legal sales **age of 21**;
- prohibiting use in places where smoking is banned with the SFOA;
 - i.e. outdoor places and within certain distances such as patios, parks, sports fields, community facilities, transit shelters, as well as spectator seating, beaches, provincial parks, all entrances/exits/air intakes for all workplaces/public places as recommended by the Chief Medical Officer of Health for Ontario and consider other areas such as concerts, fairs, parades, lineups, sidewalks, outdoor workplaces, construction sites, government properties,
- increasing advertising and promotion restrictions;
- limiting sales to specialty vape stores only;
- improving health warning labels;
- regulating nicotine levels;
- restricting addition of flavours and other ingredients ^[iii]

In March 2024, the Chief Medical Officer of Health (CMOH) for Ontario released an [extensive report](#) focused on substance use and its detrimental effects. The report presents a strong strategic plan aimed at addressing tobacco and vape use and its repercussions. The Canadian Cancer Society, alongside numerous other health stakeholders applauded the Government of Ontario's recent leadership in addressing

the youth vaping crisis by implementing a vape tax and encourages the ongoing prioritization of such upstream and effective measures.

Accordingly, we urge Ontario to take a closer examination of the CMOH report and adopt its recommendations for the Smoke-Free Ontario Strategy. A comprehensive approach and a strategic road map such as the one outlined in the CMOH report is fundamental to reducing tobacco and vape use among individuals and youth in Ontario.

This approach should include adopting the following measures as recommended in the CMOH report:

- Raising the minimum legal age for purchasing both tobacco and vaping products to 21 years old;
- Increasing the provincial sales tax on tobacco products and incrementally raising the tax annually to keep up with inflation;
- Maintaining the provincial sales tax on vaping and increasing it annually to keep pace with inflation;
- Restricting the online and social media advertising of tobacco and vaping products, the type of branding and design for e-cigarettes, as well as banning online sales;
- Capping the number of tobacco and e-cigarette stores in a municipality/region, and prohibit new stores from being located within 200 metres of a school or an existing store;
- Prohibiting manufacturers from giving promotional incentives to retailers (e.g. discounts, sales volume bonuses);
- Imposing a retailer licensing fee for retailers of tobacco and vaping products;
- Banning disposable vaping products; and
- Adopting regulatory framework to include new non-tobacco nicotine products such as nicotine pouches and ensure these products are not sold to youth and non-smokers. [\[iv\]](#)

As the report outlines, the serious harms associated with smoking tobacco were identified almost 60 years ago. Since then, Ontario has introduced a range of initiatives, such as the Smoke-Free Ontario Strategy. As a result, between 1999 and 2020, the province saw a significant and steady decline in the number of people who smoke tobacco, and in smoking rates across all age groups.

However, despite progress, Ontario has fallen behind other provinces in its use of taxation policy to reduce smoking. It also falls short of covering the health care and other costs associated with tobacco use. In order to cover these costs, ATFO encourages the government of Ontario to adopt a tobacco cost recovery fee. Each

year, the government spends approximately \$44M to fund the Smoke Free Ontario strategy, with prevention, cessation, compliance and enforcement programs, a cost that is ultimately borne by the taxpayer.

A cost recovery fee on tobacco companies will hold Big Tobacco accountable for the ongoing harm inflicted on society, reposition the cost to industry while removing the current burden from the government and taxpayers. A cost recovery fee could generate at least \$44 million per year at a time when public finances are under pressure.

While we are pleased with the recent vape tax, we hope that measures as suggested by Ontario's top doctor in his 2024 report, as well as ATFO's recommendations are given due consideration. We look forward to working with the Ministries of Finance and Health to continue to work towards Canada's goal of reducing tobacco use to less than 5% of the population by 2035. ^[v]

d. Strengthen and expand the Smoke Free Ontario Act and related regulations to reduce tobacco and vapour product retail density and proximity to schools.

Tobacco use is the leading modifiable risk factor for disease and death in Canada. In 2020, more than 46,000 deaths in Canada were due to tobacco use. Smoking tobacco increases the risk for lung cancer and at least 15 other cancers.

Smoking starts early. The overwhelming majority of people who smoke begin as teenagers or pre-teens. That's why tobacco control policies that protect young people are so important. According to the 2023 Canadian Community Health Survey (CCHS), 11.4% of people in Canada aged 18+ currently smoke tobacco and 8.7% smoke daily. This is a decrease from 12.5% and 9.8% in 2022, respectively.

Living smoke-free is the best thing you can do to reduce your risk of cancer. That's why we advocate strongly to government to:

- ensure that measures to reduce tobacco use are the priority in ongoing negotiations between provinces and tobacco companies to settle lawsuits for health care costs;
- increase tobacco taxes to reduce smoking rates;
- require the tobacco industry to reimburse federal and provincial governments for the annual cost of tobacco control strategies, which for the federal government is \$66 million per year;
- increase funding for government tobacco control strategies, including

cessation programs;

- establish a minimum age of 21 for tobacco products;
- ensure effective implementation of plain packaging;
- renew the required health warnings for all tobacco products;
- ban all flavoured tobacco products;
- expand smoke-free places to other locations;
- reduce the number and type of retail locations;

e. Monitor the health impacts of recent alcohol policy amendments related to use, sales, and promotion including expanded retail availability, retail density, pricing, and marketing, and adjust policy accordingly to advance the overall health of the population.

Alcohol is classified as a Group 1 carcinogen (cancer-causing substance) by the International Agency for Research on Cancer^[vi]. Drinking any type of alcohol increases your risk for at least 9 different types of cancer. Evidence shows that regular alcohol consumption over time – even at low levels – increases the risk of developing alcohol-associated cancer. The less alcohol you drink, the lower your cancer risk.^[vii]

The Canadian Cancer Society recognizes that certain populations are more likely to experience negative effects from alcohol consumption, such as greater physical harms, negative emotional impact, social stigma or discrimination around alcohol use. The Canadian Cancer Society calls on governments at all levels to develop and implement effective, equitable and culturally appropriate policies and initiatives to reduce the risk for cancer related to alcohol.

The Canadian Population Attributable Risk of Cancer (ComPARE) study found that in 2015, about 3,300 new cancer cases in Canada were due to drinking alcohol.^[1] In Ontario, that number was 1,200 and the highest across all the provinces and territories. Evidence shows that in Ontario, the cost of alcohol runs on a deficit. In 2020/2021, the revenue from alcohol was about \$5.2 billion, while the alcohol harm costs were about \$7.1 billion, resulting in over \$1.9 billion total alcohol deficit. Enacting evidence-based alcohol policies are the most effective way to reduce harm from alcohol.^[viii]

In May 2023, the findings from the third edition of the [Canadian Alcohol Policy Evaluation \(CAPE\) project](#) were released. This project systematically assesses how well the federal government and provincial and territorial governments are

implementing alcohol policies with strong evidence for protection of public health and safety. Overall, Ontario is [averaging 40%](#) of its potential to reduce alcohol harms with evidence-based policies. Ontario, in [comparison to other provinces and territories](#), is scoring slightly higher, however there is still lots of room for improvement. The CAPE project provides [Ontario-specific recommended evidence-informed policies](#) to reduce harm from alcohol. CCS supports the evidence-informed alcohol policies recommended in the CAPE project.

The Canadian Cancer Society calls on the provincial and territorial governments to:

- Endorse [Canada's Guidance on Alcohol and Health](#);
- Implement minimum prices per standard drink at all outlets where alcohol is sold;
- Set upper limits on the density of outlets selling alcohol moving forward based on population;
- Set regulations for the maximum hours that alcohol can be sold with no extensions permitted;
- Create or update an alcohol-specific strategy that includes a full range of evidence-based interventions and policies. This strategy should be developed independently from the alcohol industry. The government should endorse it using a health equity framework with adequate funding to implement and sustain the strategy;
- Implement mandatory health and safety messaging requirements, including the risk for cancer and other chronic diseases related to alcohol consumption, at any outlet where alcohol is sold.

[f. Develop and implement a comprehensive cancer prevention awareness and education campaign in Ontario to increase action to reduce modifiable cancer risks; for example, promote the Canadian Centre on Substance Use and Addiction Canada's Guidance on Alcohol and Health to reduce cancer risk factors associated with alcohol consumption.](#)

[Cancer.ca](#) has many cancer prevention resources including tips and recommendations, prevention programs (i.e. SunSense, Smokers Helpline) and our advocacy work on these issues.

Over 40% of people in Canada are not aware that alcohol consumption increases the risk of cancer, and many don't realize they're drinking unsafe amounts. An alcohol strategy is integral to reducing alcohol-related harm, particularly the risk of cancer, and improving health outcomes in Ontario. Ontario has the opportunity to

ensure more vibrant and healthy communities by preventing cancer through evidence-informed policies suggested here. Ontario can commit to improving evidence-informed policies through an alcohol strategy and update the Alcohol use and safe drinking page on the Government of Ontario website to include the new Canada's Guidance on Alcohol and Health.

Missing recommendation from

The Canadian Cancer Society recommends that **children and adults between the ages of 9 and 45 are vaccinated against HPV to help reduce the risk of HPV-related cancers**. These include cervical, head and neck, vaginal, vulvar and anal cancers and precancerous conditions linked to these cancers. HPV vaccination should be used along with, not instead of, cervical cancer screening for people with a cervix.

A robust vaccination program is essential for early prevention and reducing the incidence rates of cancer. In Canada, about two-thirds of HPV-related cancers happen in areas other than the cervix, including the mouth and throat, vulva and vagina, anus, and penis. ^[ix] That is why vaccinations of all genders are vital. The National Advisory Committee on Immunization has set a target of achieving 90 percent HPV vaccination coverage by 2025. ^[x] Since the 2007-2008 school year, Ontario has been offering school-based vaccinations to girls in grade 7, providing a baseline level of protection to individuals before they become sexually active. ^[xi] However, individuals who missed out on vaccinations due to an absence from school, lacked parental consent to be vaccinated, or were ineligible to be vaccinated remain unprotected.

Catch-up programs provide an opportunity for provinces to immunize those who were not able to be vaccinated through their school-based program. At this time, Ontario does not have a program and the City of Toronto's Public Health Unit is limited to those individuals who missed and/or did not complete their vaccine series in grade 7 up to grade 12 and males up to the age of 26 who self identify as having sex with men. ^[xii] This means any Ontarian who wishes to be vaccinated to prevent HPV, but do not meet these criteria must pay out-of-pocket. This is a significant barrier, especially for newcomers, low-income Ontarians, and post-secondary students from out-of-province who may not have adequate drug coverage.

To increase uptake, we are calling on Ontario to make HPV vaccines publicly

funded. In addition to making vaccination free to eliminate the financial barrier, we must also expand vaccination locations, so that more Ontarians – especially in rural and underserved communities – have equal opportunities to prevention.

According to the Canadian Partnership Against Cancer, it is “important to expand the range of healthcare professionals that are permitted to administer a vaccine – for example, pharmacists, who are the most accessible of healthcare professionals in Canada.”^[xiii] Currently in Ontario, if you are prescribed a vaccination, that vaccine can be injected at the pharmacy or can be picked up and brought back to a primary care provider for injection, however a pharmacy may charge prescription and/or injection fees in addition to the cost of the vaccine (which can be as high as \$630 for 3 doses).^[xiv] **This is too high of a price for preventable cancers.**

By ensuring equitable access to both HPV testing and vaccinations, Ontario can make significant strides toward achieving the national goal of cervical cancer elimination. Publicly funded HPV vaccines and comprehensive screening programs will ensure that all eligible Ontarians are protected, regardless of socioeconomic or geographic barriers.

For more information or any questions, please contact:

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^[1] [ibid](#)

^[i] [Our Health Equity Work | cancer.ca](#)

^[ii] [Hepatitis B and C \(cancer.ca\)](#)

^[iii] [Tobacco Control - what we are doing | cancer.ca](#)

^[iv] [Balancing Act - An All-of-Society Approach to Substance Use and Harms | 2023 Ontario CMOH Annual Report](#)

^[v] [ATFO applauds CMOH for a comprehensive 2023 Annual Report addressing tobacco and vape use](#)

^[vi] IARC: <http://monographs.iarc.fr/ENG/Monographs/vol44/volume44.pdf>.

^[vii]

[Alcohol policy - what we are are doing | cancer.ca](#)

[viii] [Grevers, X., Ruan, Y., Poirier, A. E., Walter, S. D., Villeneuve, P. J., Friedenreich, C. M., ... & ComPARE Study Team. \(2019\). Estimates of the current and future burden of cancer attributable to alcohol consumption in Canada. Preventive medicine, 122, 40-48.](#)

[ix] [Human papillomavirus | Canadian Cancer Society](#)

[x] [Summary: Updated recommendations on human papillomavirus vaccines | Canada.ca](#)

[xi] [Ontario Agency for Health Protection and Promotion, Provincial Infectious Diseases Advisory Committee. Recommendations for human papillomavirus \(HPV\) vaccine schedule | Public Health Ontario](#)

[xii] [Human Papillomavirus \(HPV\) Vaccine Fact Sheet | City of Toronto](#)

[xiii] [HPV IMMUNIZATION FOR THE PREVENTION OF CERVICAL CANCER | pcdn.co](#)

[xiv] [Human Papillomavirus \(HPV\) vaccine access in Ontario 2022 | CPAC](#)