



Lifestyle Behaviours and Health



Chapter 5

This chapter discusses lifestyle behaviours such as smoking, excessive consumption of alcohol and physical inactivity and their effect on health. These unhealthy behaviours are linked to adverse health outcomes such as heart disease, lung cancer, chronic lung disease and other chronic diseases as well as low birth weight and fetal alcohol syndrome for the unborn babies of women who smoke or abuse alcohol during their pregnancies. Preventing or modifying these unhealthy behaviours can improve health and stop or delay the onset of these chronic diseases.

Smoking

Smoking remains the leading cause of preventable death in Canada. It is linked with ischemic heart disease, lung cancer, chronic lung disease and other cancers. More than 45,000 people will die prematurely each year in Canada due to tobacco use and at least 1,000 of them will be non-smokers.⁴⁵

Cigarette smoking is the main cause of lung cancer, accounting for at least 80% of all new cases in women and 90% of those in men. The risk of lung cancer rises sharply as the number of cigarettes smoked daily increases, and rises even more sharply with length of time as a smoker.⁴⁶

Smoking Attributable Deaths

It is estimated that the number of deaths attributed to tobacco use among Ontario women will be 7,500 for the year 2002. Among men, almost 9,000 deaths will be directly attributed to tobacco.⁴⁷

In York Region, nearly 300 residents died in 1999 from diseases (ischemic heart disease (IHD), chronic obstructive pulmonary disease (COPD) and lung cancer) directly attributable to tobacco use. This is greater than the sum of deaths from motor vehicle collisions, falls, prostate cancer, female breast cancer and diabetes for the same time period.

At a Glance

In 2000/2001, 23% of York Region's population 12 years and older reported being current smokers.

84% of York Region residents reported they were strongly or somewhat supportive of a bylaw making restaurants smoke free.

95% of York Region males and 96% of females are low risk drinkers, according to the 2001/2002 Rapid Risk Factor Surveillance System (RRFSS).

About 40% of York Region residents (age 12 and over) do not engage in regular physical activity.

The obesity rate among York Region residents aged 20 to 64 years (11%) is lower than the provincial rate (15%).

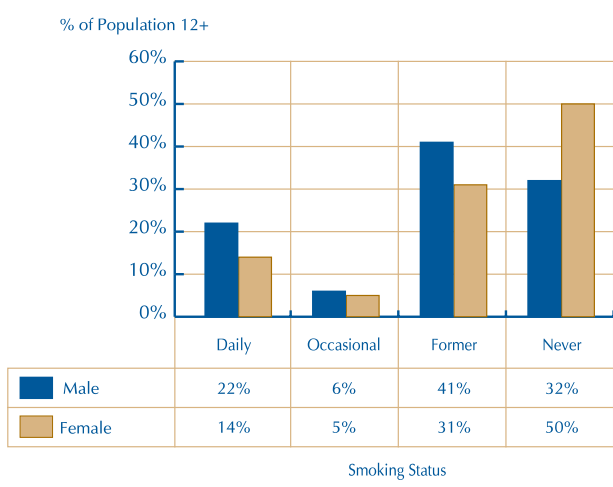
70% of York Region teens, ages 15 to 19, reported never having sex, compared to 63% for Ontario teens.



Smoking Status

In 2000/01, the overall current smoking rate (daily and occasional smokers) among York Region residents aged 12 and over was 23% with the majority (18%) being daily smokers. The comparable provincial rate for current smokers was slightly higher, at 24.5%. As outlined in Figure 5.1, more York Region males (22%) than females (14%) are daily smokers.

Figure 5.1 Smoking Status by Gender
York Region Ages 12 and over, 2000/01



Source: Canadian Community Health Survey Cycle 1.1, 2000/01, Statistics Canada, 2002.

For several years now, there have been more former smokers than current smokers. For example, in 2000/01, 36% of the York Region population 12 years and older, or about 230,000 people, reported that they were former smokers. This phenomenon reinforces the observation that tobacco control measures have been instrumental in reducing tobacco consumption. These measures include:

- increasing the awareness of health risks faced by smokers through targeted media campaigns,
- decreasing access by minors to cigarettes,
- increasing restrictions on smoking in public places, and
- expanding efforts to educate and inform youth and adults about the risks of exposure to environmental tobacco smoke.



Working for You

In June 2002, a campaign entitled Not To Kids! expanded to eleven communities in Ontario including York Region. The aim of this program is to decrease the selling and supplying of tobacco to youth through education to tobacco retailers, parents, students and school administrators.

Smoking Among Youth

In Canada, the current smoking prevalence for teens aged 15 to 19 rose in the early 1990s but levelled off after 1994 at close to the 1985 rate (27%). Encouragingly, smoking rates for this age group have begun to decrease in recent years, from 28% in 1999 to 22.5% in 2001, with 24% of teen girls smoking compared to 21% of teen boys. Young adults aged 20-24 have the highest smoking rate of any age group in Canada at 32% (35% males, 29% females).⁴⁸

In York Region, the 2000/2001 current daily smoking rate among residents aged 12 to 24 was 15%, slightly lower than the Ontario average (17%). The ages at which both current smokers and former smokers started smoking are shown in Table 5.1. The majority (83%) of York Region's smokers and former smokers started their habit before the age of 20. Therefore, emphasis must continue to be placed on intervention programs that target teenagers in order to prevent them from starting to smoke.

Table 5.1 Initiation of Smoking by Age Group
York Region, 2000/01

When Started Smoking, by Age Group	% of Current & Former Smokers
5 to 11 years	5.3%
Age 12 to 14	25.1%
Age 15 to 19	52.9%
20 years and over	14.5%

Source: Canadian Community Health Survey 2000/01, Cycle 1.1, Statistics Canada, 2002.

Access to Tobacco Products by Minors

The *Tobacco Control Act* (TCA) was enacted in November 1994 in an attempt to prevent young persons from starting to smoke by making it illegal for tobacco vendors to sell or supply tobacco products to minors under the age of 19. In addition, the TCA also makes it illegal for anyone to give tobacco products to a minor.



Working for You

The York Region Health Protection Division implements a program directed at tobacco vendors to prevent the sale or supply of tobacco to minors. There are approximately 980 tobacco vendors, 39 Secondary schools and 212 Elementary schools in York Region, and checks are done every year to ensure compliance. We have seen progress in the area of sales/supply to minors as the number of *Tobacco Control Act* charges has dropped from 230 in 1999 to 211 in 2001.

In 2001, York Region Health Services Department By-law Enforcement Officers made 2,358 visits to establishments and issued 69 smoking by-law infraction tickets.

A Dental Clinical Tobacco Intervention program was introduced to York Region dentists in September 2000. The response from dentists has been encouraging, with 50% of the offices contacted requesting training on tobacco cessation for their patients.

York Region adults 18 years of age and over were asked how old a person had to be before he/she could be sold tobacco in Ontario, as part of the 2001/02 Rapid Risk Factor Surveillance System (RRFSS). Only 44% of those surveyed could correctly identify the legal age as 19 years. However, 82% supported the TCA and felt that stores that sold to minors should lose the right to sell tobacco products.

Environmental Tobacco Smoke

Exposure to environmental tobacco smoke (ETS) or "second hand smoke" is associated with a number of illnesses including lung cancer, heart disease and respiratory problems. Second-hand smoke ranks third as a major preventable cause of death after active smoking and alcohol.⁴⁹

Twelve per cent of York Region adults 18 years of age and over indicated that a household member regularly smokes inside their home, according to the 2001/02 RRFSS. But it is noteworthy that 30% of respondents stated that visitors to their homes are allowed to smoke inside their home. Emphasis must continue to be placed on the significant health risk of ETS.

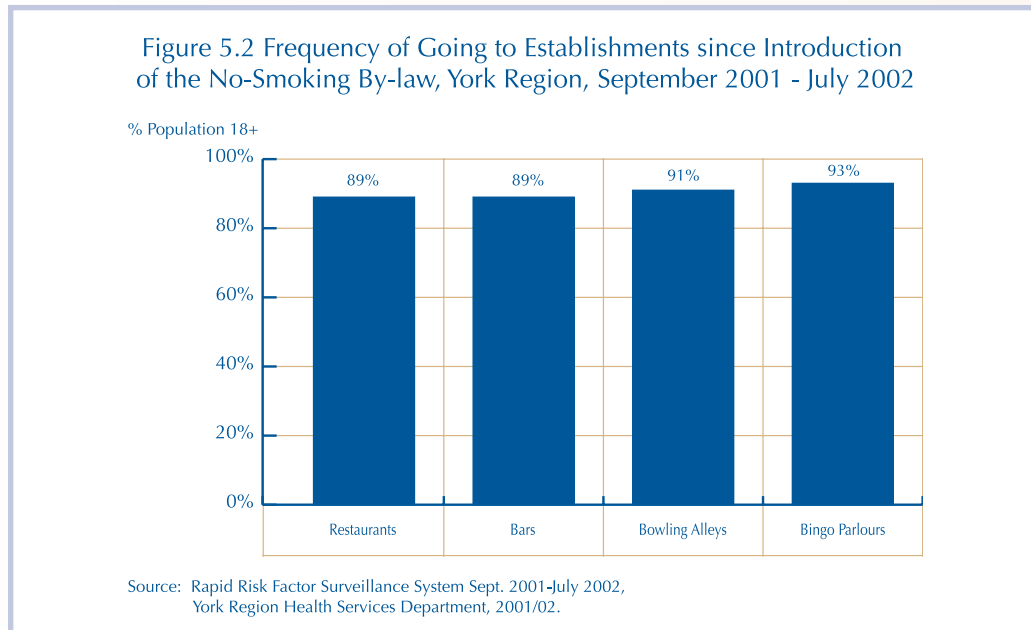
No Smoking By-law

The York Region No-Smoking By-law came into effect on January 26, 2001. As of that date, no smoking is permitted in any workplace in York Region. When the second phase of the By-law came into effect on June 1, 2001, public places such as restaurants, food courts, theatres, recreation facilities, bowling alleys, retail stores and shopping malls became smoke free. The third and final phase of the By-law will take effect on June 1, 2004 when public places such as bars, billiard halls, casinos and bingo halls become smoke free. All public places may choose to construct an enclosed and separately ventilated Designated Smoking Room (DSR), provided the DSR meets the criteria outlined in the York Region No-Smoking By-law.

The Rapid Risk Factor Surveillance System 2001/02 asked York Region adults questions about their support for York Region's No-Smoking By-law. Eighty-four per cent stated they were strongly or somewhat supportive of a By-law making restaurants smoke-free and 64% felt strongly or somewhat supportive of a no-smoking By-law for bars.



The survey also asked whether or not the introduction of the No-Smoking By-law in June 2001 had any impact on the frequency of going to these establishments. The majority of respondents who went to these establishments before and after the implementation of the By-law stated that since June 2001, they have gone to these places the same amount or even more often (Figure 5.2).



Alcohol

Excessive consumption of alcohol is associated with conditions such as death from acute intoxication, injuries and deaths from drinking and driving, and chronic conditions such as cirrhosis of the liver and brain disorders. It is also linked to many social problems including unemployment, domestic violence and to mental health problems. The health problems associated with excessive consumption of alcohol are often exacerbated by other risk factors such as smoking, obesity, or lack of physical activity.

Low Risk Drinking

More than two drinks a day can be harmful. Women (non-pregnant) who have fewer than nine drinks a week and men who have fewer than fourteen drinks a week are considered to be low risk drinkers and generally have lower rates of cancer and other alcohol-related problems.⁵⁰ Based on 2001/2002 data from the Rapid Risk Factor Surveillance System, 95% of males (ages 20 and over) and 96% of female drinkers in York Region were low risk drinkers.





Drinking and Driving

Every year, dozens of York Region residents lose their lives in motor vehicle crashes and hundreds more are injured. Many of these collisions are the result of driving after drinking.

Approximately 423,000 York Region residents age 16 years and older had a driver's license and were considered to be current drinkers, according to the Canadian Community Health Survey 2000/2001 results. Overall, two-thirds of motorists have gone out with friends or family to a place where alcohol would be consumed. About 71% of them always made arrangements for a designated driver, which is the same as the Ontario average.

In 2001/2002, about 4% of York Region adults 20 and over reported driving a motor vehicle in the last year after having two or more drinks in the hour before they drove. This estimate, based on the results of York Region's Rapid Risk Factor Surveillance System, suggests that approximately 20,000 residents were driving after drinking during that period.

Host liability for driving after drinking may arise when a guest has too much to drink at another person's home and then drives away and is involved in a collision. Based on recent RRFSS results, about two-thirds of York Region respondents were aware that a guest can sue the person he/she was visiting in such a situation given the current laws.

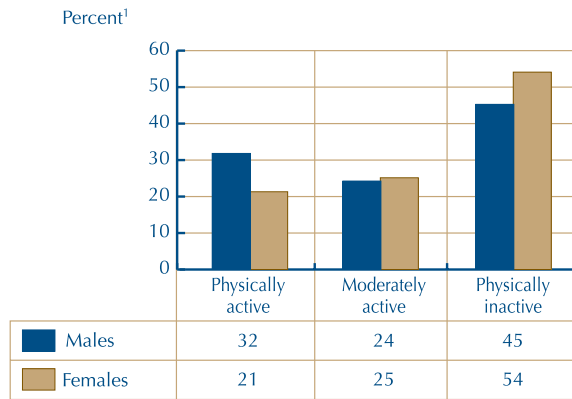
Physical Activity

Regular physical activity at moderate or vigorous levels has been shown to benefit one's health at all ages. Physical activity has been linked to the prevention of several diseases such as heart disease and osteoporosis. In addition, it allows people to maintain a healthy body weight, and is reported to improve mental health.

As part of the Canadian Community Health Survey 2000/01, York Region residents aged 12 and over were asked about the frequency, duration and intensity of their participation in leisure-time physical activity. Based on their responses, only 32% of males and 21% of females in York Region were reported to be physically active (Figure 5.3). In comparison, the percent of respondents who were physically active in Ontario was lower - 27% of males and 20% of females.



Figure 5.3 Leisure-time Physical Activity
York Region, 2000-2001

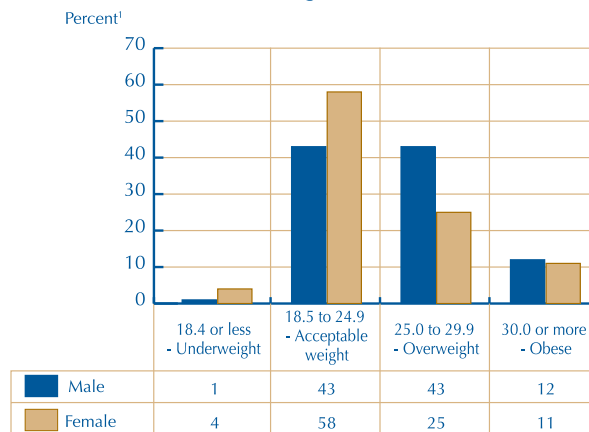


Source: Canadian Community Health Survey, 2000/01, Cycle 1.1, Statistics Canada, 2002.
1. Percent of household population aged 12 and over.

Body Mass Index

Overweight and obesity are generally caused by lack of physical activity, unhealthy eating patterns, or a combination of the two. Lifestyle and genetics both play an important role in determining a person's weight. The body mass index (BMI)-international standard, which relates weight to height, is a common method of determining if an individual's weight is in a healthy range based on their height.⁵¹ BMI is calculated by dividing an individual's weight in kilograms by the square of his/her height in metres. Forty-three per cent of York Region males and 58% of females had a healthy weight (Figure 5.4).

Figure 5.4 Body Mass Index, Ages 20 to 64
York Region, 2000-2001



Source: Canadian Community Health Survey, 2000/01, Cycle 1.1, Statistics Canada, 2002.
1. Percent of household population aged 20 to 64 excluding pregnant women.





Working for You

Eat Smart! Ontario's Healthy Restaurant Program is a provincial program that annually awards restaurants for excellence in Food Safety, Smoke-free Dining, and Nutrition. York Region Health Services Department's Dental and Nutrition Services staff work with the York Region Eat Smart! Committee to implement this program on an ongoing basis. The Nutritionist reviews restaurant applications to ensure the Nutrition Standard has been met.

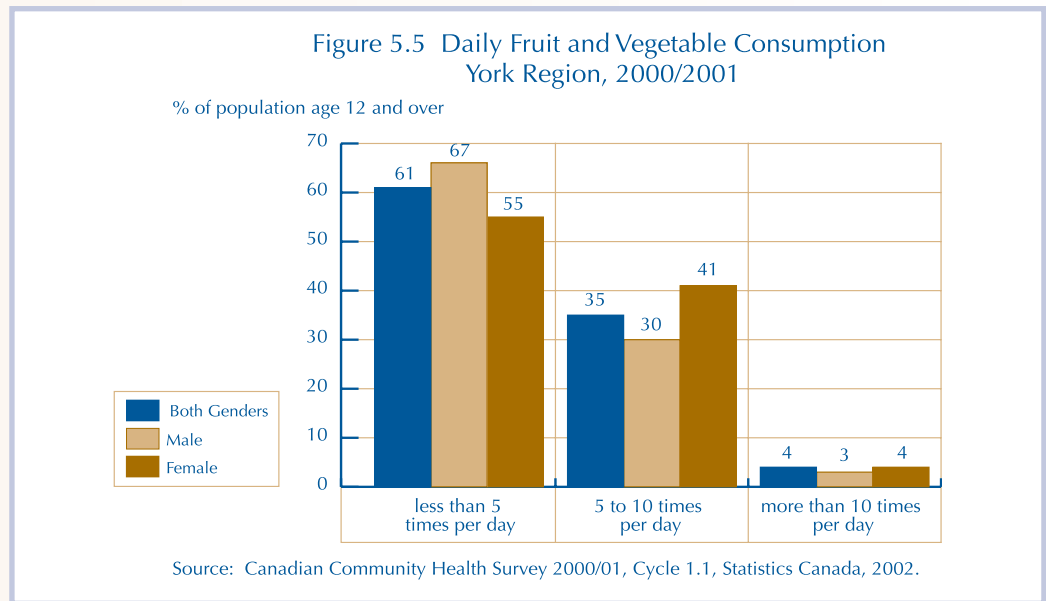
The obesity rate among York Region adults age 20 to 64 years (12%) is lower than Ontario's rate (15%). Overweight and obesity has been linked to a higher risk of developing a range of health problems such as heart disease and diabetes.

In recent years, childhood obesity and lower levels of activity have become an important issue facing Canadian children.⁵² More Canadian children are becoming overweight.⁵³ According to a snapshot of childhood obesity from the National Longitudinal Survey of Children and Youth, more than one third (37%) of Canadian children age 2 to 11 years old were overweight in 1998/1999, and of those approximately half could be considered obese.⁵⁴ Like adults, obese children are at risk for developing health problems, such as type 2 diabetes, high blood pressure, and psychosocial difficulties.⁵⁵

A 1999 study published in the Canadian Medical Association Journal estimated that in 1997, the total direct cost of obesity in Canada was more than \$1.8 billion.⁵⁶ The World Health Organization has predicted that obesity could have as great an impact on health as smoking.⁵⁷ Public health units and other agencies are beginning to target more of their efforts on this condition.

Fruit and Vegetable Consumption

Research has shown that a high intake of fruit and vegetables may decrease the risk of major chronic diseases such as heart disease, hypertension, stroke, type 2 diabetes and certain types of cancer. Among York Region residents age 12 and over, 67% of males and 55% of females reported consuming fruits and vegetables less than five times a day, which is the same as the Ontario average (Figure 5.5). As a result, these people may be at increased risk for developing chronic diseases and therefore for premature illness and death.





Sexual Health Practices

Healthy sexuality is a positive and life-affirming part of the human experience. Attitudes about sexuality, the ability to understand and accept one's own sexuality, to make healthy choices and respect the choices of others, are essential parts of everyone's life.⁵⁸

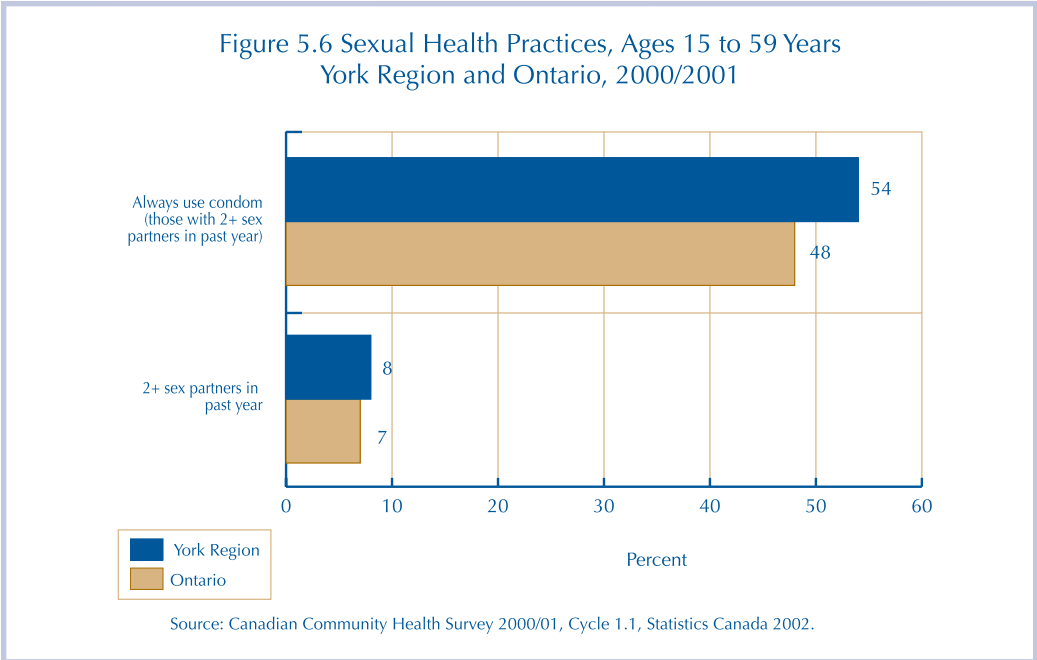
Healthy sexual practices are becoming increasingly important as unsafe sexual behaviours (such as not wearing a condom) may lead to infertility, unplanned pregnancy, Acquired Immunodeficiency Syndrome (AIDS) or other sexually transmitted diseases.

The Canadian Community Health Survey 2000/2001 asked questions about sexual health and behaviours, including the age of first sexual intercourse, number of sexual partners, and condom use.

According to the survey, 70% of York Region teens aged 15 to 19 reported never having sexual intercourse, compared to 63% for Ontario teens.

Seven percent of York Region residents age 15 to 59, reported having more than one sexual partner in the previous year.

Among York Region residents who had a new partner in a relationship lasting less than 12 months, 8.4% indicated they never used a condom, compared to 15 % for Ontario. Of those who reported using a condom usually or occasionally, 44% indicated they did not use a condom the last time they had sexual intercourse (Figure 5.6).





This chapter has considered some key lifestyle behaviours that affect health. Since the behaviour of individuals is closely linked to their social environment, this chapter has strong ties with Chapter 2 (Our Social Environment). As well, the consequences of some unhealthy behaviours are outlined in subsequent chapters. For example, smoking and physical inactivity can lead to the development of some chronic diseases such as lung cancer and diabetes (Chapter 8), and drinking and driving, as discussed in this chapter, is linked to motor vehicle collision injuries and deaths (Chapters 7 and 9). As well, there are associations between some lifestyle behaviours and mental health (Chapter 11).

Working for You

York Region Health Services Department's Infectious Diseases Control Division offers free sexual health clinics to all age groups in five locations across York Region. In 2001, 5,467 visits were made by York Region residents to these clinics for services such as sexual health counselling, birth control methods, pregnancy testing, HIV/AIDS testing and STD diagnosis and treatment.

York Region Health Services Department also provides a Sexual Health Information Hotline, offering confidential phone counselling, referral to one of the sexual health clinics, and education. The Hotline number is 1-800-461-2135.