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## Message from the Ministers



Hon. Fred Horne Minister of Health



Hon. Dave Rodney
Associate Minister of Wellness

Since the introduction of the Alberta Tobacco Reduction Strategy in 2002, tobacco use in Alberta has declined significantly. While that's very good news, there's a worrisome upswing in youth smoking rates after years of reductions and nearly one in five Albertans continue to use tobacco. Every year, about 3,000 Albertans die as a result of tobacco use and many more suffer from tobacco-related illnesses. What's even more tragic is that all of this can be prevented.

Alberta's new tobacco reduction strategy, Creating Tobacco-free Futures: Alberta's Strategy to Prevent and Reduce Tobacco Use, 2012 – 2022, builds on the momentum of the last ten years and sets out a framework for tackling the challenges still in front of us. It's a commitment to taking steps to help people quit using tobacco, reducing harmful second-hand smoke exposure and making tobacco products less enticing for youth.

This strategy is about practical and effective initiatives. Some of them are directions to look at in the future. Others will be implemented in the short term. This strategy targets young Albertans, pregnant women and at-risk populations. It calls for and supports action by government, healthcare providers, stakeholders, educators and communities because we all need to work towards creating a tobacco-free future.

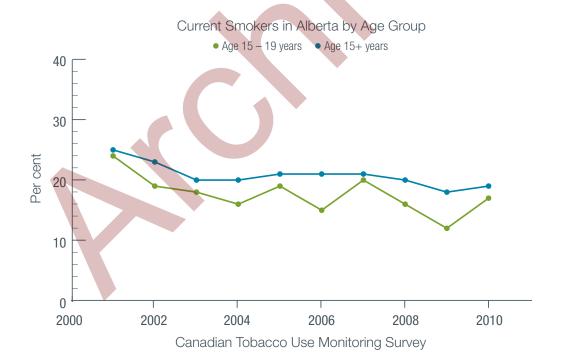
We are confident that by taking these steps, we will reduce tobacco use and give Albertans the knowledge, incentives and tools to live healthier lives.

# Creating Tobacco-free Futures: Alberta's Strategy to Prevent and Reduce Tobacco Use

#### **Provincial Gains in Reducing Tobacco Use**

Since the Alberta Tobacco Reduction Strategy was introduced in 2002 Alberta has achieved significant reductions in tobacco use: smoking rates for Albertans 15 and over have fallen from 25 per cent to 19 per cent (Health Canada, 2011).

The reduction in youth smoking was particularly encouraging: The smoking rate for youth aged 15 to 19 dropped from 24 per cent to 17 per cent. However, despite this decrease the 17 per cent marks an increase in youth smoking compared to the previous year where the smoking rate was only 12 per cent (Health Canada, 2011). This increase illustrates that we must focus on youth going forward.



Alberta has implemented comprehensive legislation to protect Albertans from the harmful effects of tobacco use. The *Tobacco Reduction Act* has helped protect Albertans from second-hand smoke, prohibited the display of tobacco products in retail outlets and restricted the sale of tobacco products in certain establishments. In addition, Alberta's *Prevention of Youth Tobacco Use Act* prohibits youth from possessing, smoking or consuming tobacco products in public places. Alberta also has introduced strong anticontraband legislation and enforcement measures.

Over the past 10 years Alberta has made significant tax increases to make tobacco products less affordable and has also implemented a tobacco reduction school strategy.

Other successes have occurred at the community level, where bylaws have been implemented to further protect Albertans from second-hand smoke. In addition, community grants have made it possible for local communities to develop and implement tobacco control initiatives.

Alberta has also implemented comprehensive tobacco cessation services including a telephone counselling line, a web-based service and group cessation counselling.

#### **Tobacco Reduction is Still a Priority**

Despite our successes, tobacco use remains unacceptably high in Alberta. It is still the leading cause of preventable disease and death in Canada (Alberta Alcohol and Drug Abuse Commission [AADAC], 2008).

The toll on people's health is enormous. In Alberta, tobacco use is responsible for about 3,000 deaths each year (AADAC, 2008) and smoking causes approximately 30 per cent of cancer deaths in Canada and more than 85 per cent of lung cancers (Canadian Cancer Society, 2011). A smoker's likelihood of having a heart attack is

two to four times higher than a non-smoker (AADAC, 2008) and it is predicted that chronic obstructive pulmonary disease will become the third leading cause of death by 2030 (World Health Organization, 2011). Smokeless tobacco increases the risk of cancers of the throat, mouth and esophagus and is associated with coronary and peripheral vascular disease, stroke and high blood pressure (AADAC, 2008).

Smoking during pregnancy significantly increases the risk to both mothers and newborns. It contributes to low birth weight babies, which can result in severe health problems and newborn death. Maternal smoking and infant exposure to second-hand smoke can also contribute to sudden infant death syndrome (AADAC, 2008). Children can also experience middle ear disease, diseases of the lower respiratory tract, respiratory irritation, and worsened asthma as a result of second-hand smoke (AADAC, 2008).

In Alberta, those who smoke or try smoking usually start by age 14 (AADAC, 2008). Along with the long term risks that teens who smoke are exposed to, cigarette smoking during adolescence can contribute to severe negative health effects, such as increased blood pressure, increased heart rate, increased risk of respiratory problems and reduced rate of lung growth and function (AADAC, 2008).

Cigarette smoke contains over 7,000 chemicals including 69 carcinogens (U.S. Department of Health and Human Services, 2010). Research also indicates that cigarette smoking may act as a gateway drug and lead to the use of other drugs (Lai, Lai, Page & McCoy, 2000).

Tobacco use also results in lost productivity. It is estimated that the additional cost of employing a smoker is roughly \$3,400 per year (The Conference Board of Canada, 2006).

#### **Next Steps**

With ten years of dedicated tobacco control funding and the successful implementation of numerous initiatives, Alberta is markedly more smoke free in 2012 than in 2002. However, it's critical that tobacco reduction remain a focus. That's why Alberta has developed a new strategy.

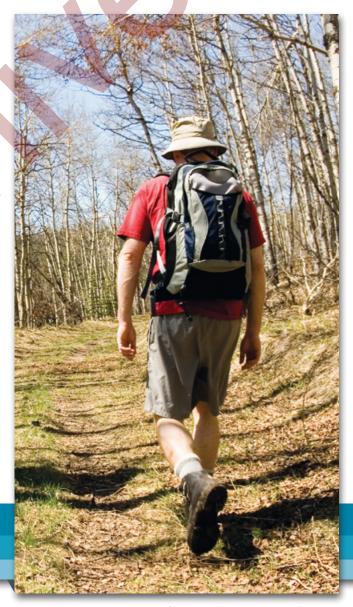
Initiatives and policies relevant to the strategy will be examined for implementation over the next ten years. In the short term, though, there are some significant steps that can be taken.

This strategy will be launched with a series of important initiatives over the next three years to kick start another decade of successful reductions in tobacco use.

It is anticipated that they will be funded through monies already targeted toward tobacco reduction, and any requests for additional funds, should they be necessary, will become part of future budget approval processes. The priority initiatives in the first three years include the following:

In the area of provincial legislation and regulation, the Alberta Government will:

- Introduce legislation restricting the sale of flavoured tobacco.
- Introduce provincial legislation to prohibit tobacco sales to minors.
- Enact legislation to protect children from secondhand smoke in vehicles.



#### Further steps to prevent tobacco use will include the following:

- Develop and implement a social marketing/ public awareness campaign to address the harms associated with tobacco.
- Expand school-based programs with a focus on reducing tobacco use.
- Develop and implement a youth engagement campaign and expand peer-leadership programs.
- Develop tobacco control prevention initiatives that target at-risk populations and pregnant women.
- Expand community supports to enhance protective factors and reduce risk factors known to influence tobacco use.

#### In the area of tobacco cessation, we are committing to:

- Enhance health professional tobacco cessation training.
- Continue to support the implementation of brief tobacco intervention and cessation support as a standard of care in healthcare settings.
- Expand communication campaigns to increase the reach of provincial tobacco cessation services.
- Enhance and expand workplace, school-based and community-based tobacco cessation programming.

### To ensure that Alberta stays at the leading edge of tobacco reduction, we will:

 Develop a comprehensive research and evaluation framework to measure the impacts of initiatives under the strategy.

These early initiatives will continue the momentum of actions taken over the last ten years and help set the groundwork for other initiatives contemplated under the ten year time frame of the strategy.

Initiatives have been identified to support the strategic directions which are outlined in the next sections. The list of initiatives is not intended to be exhaustive and additional initiatives will be considered as appropriate. As well, the strategy will adopt a phased implementation with initiatives being introduced over the next 10 years. Phase one initiatives are planned to commence between 2012-2015; phase two initiatives are planned to commence between 2015-2018; and phase three initiatives are planned to commence between 2018-2022. Initiative prioritization may change in response to emerging issues.

Task teams consisting of tobacco control stakeholders from across Alberta will be established to guide the implementation of the initiatives outlined in the next sections.



## **Creating Tobacco-free Futures**

#### **Vision**

To reduce tobacco use in Alberta through an innovative, evidence-based and sustainable framework.

#### **Performance Targets**

To support Albertans in leading healthy lives the strategy sets performance targets to meet or exceed by 2022.

#### Smoking Prevalence 2022 Targets

- Albertans ages 15 and over: Reduce from 19 per cent in 2010 (Health Canada, 2011) to 12 per cent in 2022.
- Albertans ages 12 to 19: Reduce from 13 per cent in 2010 (Alberta Health and Wellness, 2011) to 6 per cent in 2022.
- Albertans ages 20 to 24: Reduce from 30 per cent in 2010 (Alberta Health and Wellness, 2011) to 20 per cent in 2022.
- Pregnant women in Alberta: Reduce from 17 per cent in 2008 (Alberta Health and Wellness, 2011) to 11 per cent in 2022.

#### Per Capita Tobacco Sales Target

 Reduce estimated per capita tobacco sales by 50 per cent, from 1491 units in 2011/2012 (Alberta Treasury Board and Finance, 2012) to 745 units in 2022.

#### Tobacco Quit Rate Targets

Increase the proportion of daily smokers 15 years of age and older making one or more quit attempts from 49 per cent in 2010 (Health Canada, 2011) to 65 per cent in 2022.

## Alberta's Strategic Directions for Reducing Tobacco Use

In order to achieve the strategy's performance targets, four strategic directions have been identified: prevention; protection; cessation; and knowledge translation and capacity building.

**Prevention:** Prevent youth, young adults, pregnant women and at-risk populations from using tobacco, tobacco-like products, smokeless tobacco and other related products.

**Protection:** Protect Albertans from the harms of tobacco, tobacco-like products, smokeless tobacco and second-hand smoke.

**Cessation:** Expand comprehensive cessation initiatives.

**Knowledge Translation and Capacity Building:** Support linkages between prevention, protection and cessation outcomes.

These strategic directions are grounded in three guiding principles:

- Utilizing proven tobacco reduction practices to achieve success;
- Relying on evidence to shape policy direction; and
- Integrating promising practices to promote innovation.

## **Strategic Directions**

Alberta's strategy is a framework to guide the development of initiatives within the province and decisions around policy. Approved priority initiatives appear below in bolded type.

#### **Prevention**

The goal of prevention is to prevent youth, young adults, pregnant women and at-risk populations from using tobacco, tobacco-like products, smokeless tobacco and other related products.

If successful, it's expected that:

- 1.1 Tobacco, tobacco-like products and smokeless tobacco will be less visible, available and affordable as a result of considering the introduction of initiatives such as:
  - Introducing provincial legislation to prohibit tobacco sales to minors (phase one).
  - Developing policy interventions that reduce the initiation and use of tobacco, tobacco-like products and smokeless tobacco (phase one).
  - Tobacco tax increases.
- 1.2 Awareness of the harms associated with tobacco, tobacco-like products, smokeless tobacco and other related products will be enhanced through the consideration of initiatives such as:
  - Increasing awareness through social marketing, paid and earned media to address the harms associated with tobacco, tobacco-like products, smokeless tobacco and other products that lead to tobacco use (phase one).

- Considering mandatory health warning signage and tobacco reduction messaging targeted at tobacco, tobacco-like products and smokeless tobacco products at point of sale (phase two).
- Developing tobacco, tobacco-like products and smokeless tobacco prevention advertisements to precede movies shown in Alberta that depict tobacco use (phase three).
- 1.3 The school-based and post-secondary tobacco reduction framework will be enhanced by using a comprehensive school health approach that considers initiatives such as:
  - Providing students, teachers and parents with access to targeted, up-to-date information on the risks associated with tobacco, tobacco-like products and smokeless tobacco use (phase one).



- Supporting the delivery of comprehensive school health programs focused on reducing tobacco, tobacco-like products and smokeless tobacco use for students in key transitional grades (phase one).
- Supporting the development of tobacco, tobacco-like products and smokeless tobacco reduction education in wellness-related school curricula (elementary, junior and senior high) based on best and promising practices (phase two).
- Supporting the inclusion of tobacco, tobacco-like products and smokeless tobacco reduction education in wellness-related school curricula (elementary, junior and senior high) based on best and promising practices (phase two).
- Collaborating with stakeholders to support the development of post-secondary initiatives focused on reducing tobacco, tobaccolike products and smokeless tobacco use (phase three).
- 1.4 Youth and young adults will be engaged in tobacco, tobacco-like products and smokeless tobacco prevention through consideration of initiatives such as:
  - Supporting the expansion of evidence informed peer-leadership programs province-wide (phase one).
  - Developing and implementing youth and young adult engagement campaigns using learnings from successful campaigns in other jurisdictions (phase one).

- 1.5 Tobacco, tobacco-like products and smokeless tobacco prevention programs will be developed for at-risk youth, young adults and pregnant women through consideration of initiatives such as:
  - Recommending that community capacity building efforts are culturally relevant and inclusive of at-risk populations (phase one).
  - Supporting the development of prevention initiatives that target at-risk populations, pregnant women and other populations as required (phase one).
  - Expanding community support for activities that enhance protective factors and reduce risk factors known to influence tobacco, tobacco-like products and smokeless tobacco use (phase one).
  - Offering training for educators and health professionals to integrate prevention messaging when intervening with youth and youth at risk of using tobacco, tobacco-like products and smokeless tobacco (phase two).

#### **Protection**

The goal of protection is to protect Albertans from the harms of tobacco, tobacco-like products, smokeless tobacco and second-hand smoke.

If successful, it's expected that:

- **2.1** More Albertans will be protected from tobacco, tobacco-like products, smokeless tobacco and second-hand smoke exposure through initiatives to be considered such as:
  - Restricting the sale of flavoured tobacco (phase one).

- Exploring options to prohibit the use of tobacco-like products in the same locations where tobacco products are prohibited (phase one).
- Enacting legislation to protect children from second-hand smoke in vehicles (phase one).
- Considering the prohibition of tobacco, tobacco-like products and smokeless tobacco use on all government-owned or leased property including schools, post-secondary institutions, healthcare facilities and provincial and municipal building grounds (phase two).
- Exploring options to increase smoking restrictions in outdoor areas, for example, children's playgrounds, public parks, etc. (phase two).
- Exploring the creation of provincial tobacco product standards (phase three).
- Exploring options to prohibit smoking in hotel and motel guest rooms (phase three).
- Considering the development of legislation and policy interventions to decrease tobacco, tobacco-like products and smokeless tobacco use and further protect Albertans from secondhand smoke (phase three).
- 2.2 Awareness of the harms associated with secondhand smoke from tobacco and tobacco-like product use will be enhanced through initiatives to be considered such as:
  - Developing and implementing a communications strategy to increase public awareness of areas where non-smokers, especially children, are still exposed to secondhand smoke (phase one).

- Using educational efforts to encourage landlords to make multi-unit dwellings 100 per cent smoke-free (phase two).
- **2.3** Tobacco control efforts through cross-ministry support and collaboration will be enhanced through initiatives to be considered such as:
  - Exploring the development of additional anti-contraband measures and increased enforcement resources (phase two).

#### Cessation

The goal of cessation is to expand comprehensive cessation initiatives.

If successful, it is expected that:

- 3.1 Albertans will have increased access to and availability of tobacco cessation supports and resources through initiatives to be considered such as:
  - Enhancing health professional tobacco cessation training (phase one).
  - Continuing to support the implementation of brief tobacco intervention and cessation support as a standard of care in healthcare settings (phase one).
  - Developing population specific curricula for health professional training (phase two).
  - Exploring options to enhance access to nicotine replacement therapy products and tobacco cessation medications for Albertans (phase two).

- Exploring compensation and incentives for eligible health professionals who provide tobacco reduction services (phase two).
- Exploring options to increase the number of retail outlets that sell nicotine replacement therapy products (phase three).
- **3.2** Awareness of tobacco cessation services will be enhanced through initiatives to be considered such as:
  - Expanding communication campaigns to increase the reach of provincial tobacco cessation services (phase one).
- 3.3 Cessation supports for specific settings and populations will be promoted and their uptake increased through initiatives to be considered such as:
  - Enhancing and expanding workplace, school-based and other communitybased tobacco cessation programming (phase one).
  - Developing tailored tobacco cessation programming for at-risk populations, pregnant women and other populations as required (phase two).

#### **Knowledge Translation and Capacity Building**

The goal of knowledge translation and capacity building is to support linkages between prevention, protection and cessation outcomes.

If successful, it is expected that:

- **4.1** The strategy will be aligned with other health strategies through the consideration of initiatives such as:
  - Collaborating with stakeholders to enhance alignment with provincial, national and international health strategies (phase one).
- **4.2** Awareness of tobacco reduction initiatives will increase through the consideration of initiatives such as:
  - Developing and promoting common branding and marketing tools for initiatives under the strategy (phase one).
  - An enhanced earned media strategy (phase one).
- **4.3** Stakeholder engagement will be enhanced through the consideration of initiatives such as:
  - Continuing to build partnerships among stakeholders to support the strategy (phase one).
  - Supporting tobacco reduction coalitions and community-based tobacco reduction groups across the province to support the goals of the strategy (phase one).

- **4.4** The community grant system will be enhanced through the consideration of initiatives such as:
  - Basing grant-funded initiatives from Alberta Health Services on ongoing and emerging tobacco reduction needs (phase one).
  - Expanding grant funding from Alberta Health Services to include multi-year funding as appropriate (phase one).
  - Sharing information on successful grant programs to encourage adoption of similar initiatives in other parts of the province (phase one).
  - Incorporating successful grant projects with a provincial scope into Alberta Health Services core funding as appropriate (phase two).

- **4.5** Training opportunities will be enhanced through the consideration of initiatives such as:
  - Increasing access to training opportunities in order to educate stakeholders and encourage them to participate in tobacco reduction initiatives (phase two).
  - Supporting the incorporation of tobacco reduction information and skill development in health related post-secondary curriculum (phase three).
- 4.6 Community enforcement participation in tobacco, tobacco-like products and smokeless tobacco reduction activities will be increased through the consideration of initiatives such as:
  - Supporting the expansion of tobacco reduction education programs that serve as alternatives to fines under the *Prevention of Youth Tobacco Use Act* (phase one).
  - Engaging law enforcement agencies in the planning and implementation of initiatives as appropriate (phase one).
  - Expanding law enforcement agencies' awareness of tobacco, tobacco-like products and smokeless tobacco reduction initiatives (phase two).
- **4.7** Enforcement of tobacco reduction legislation and policies will be improved through the consideration of initiatives such as:
  - Exploring the creation of a provincial tobacco retail licensing system (phase one).
  - Engaging and supporting enforcement stakeholders in the development of an enhanced enforcement strategy (phase two).
  - Exploring increasing the fines for violations of tobacco reduction legislation (phase two).

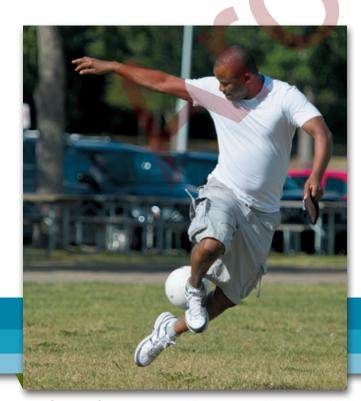
- **4.8** Research and evaluation strategies will be implemented through the consideration of initiatives such as:
  - Supporting the development of a coordinated and comprehensive provincial research strategy to inform policy and program development (phase one).
  - Encouraging the timely and broad dissemination of results, including publication in peer-reviewed journals (phase one).
  - Supporting surveillance efforts to monitor tobacco, tobacco-like products and smokeless tobacco use among at-risk populations (phase one).
  - Developing a comprehensive evaluation framework for the strategy (phase one).
  - Ensuring programs funded under the strategy include evaluation components to improve accountability and provide an evidence-based guide for funding priorities (phase one).

#### Success is Within Our Reach

Significant reductions in tobacco use have occurred since the inception of the Alberta Tobacco Reduction Strategy in 2002.

Creating Tobacco-free Futures will ensure that Alberta is well equipped to continue preventing tobacco use, protecting Albertans from the harms of tobacco and second-hand smoke and reducing tobacco use from 2012 to 2022. By building on what has already been accomplished and implementing the initiatives in our strategic directions we will strive to meet or exceed our performance targets.

Some initiatives will require legislative changes; while others can be done through policy work and program development. While further work remains to be done in order to develop and approve many of the changes, the direction is clear: Alberta will continue to work hard to prevent and reduce tobacco use in the province.



## **Appendices**



## Appendix One — Tobacco Reduction Successes Since 2002

This appendix provides detailed information on some of Alberta's successful initiatives that have occurred during the past 10 years.

- The implementation of comprehensive legislation to protect Albertans from the various harms associated with tobacco use.
  - In 1999 Alberta introduced the Prevention of Youth Tobacco Use Act which was later amended in 2004. The Prevention of Youth Tobacco Use Act prohibits youth under the age of 18 from possessing, smoking or consuming tobacco products in a public place.
  - Alberta's Smoke-free Places Act, effective
    January 1, 2006, restricted smoking in any public
    place and workplace where minors are allowed.
    Casinos, bingo halls and bars were exempt
    from these restrictions. The Tobacco Reduction
    Act replaced the Smoke-free Places Act.
  - In 2008, the Tobacco Reduction Act came into effect. The Tobacco Reduction Act prohibits smoking in public places, workplaces, public vehicles and within five metres from a doorway, window or air intake of a public place or workplace. In addition, the Tobacco Reduction Act prohibits the display, advertising and promotion of tobacco products in retail outlets. Furthermore, restrictions were placed on where tobacco products can be sold.

- Strengthened anti-contraband legislation and enforcement provisions.
  - The Alberta Tobacco Tax Amendment Act, 2003 implemented a joint effort by Alberta and the Canada Border Services Agency to charge Alberta tobacco tax on tobacco imported by consumers into Alberta. Through an agreement with the Canada Border Services Agency, the Agency collects tobacco tax on behalf of the province on quantities of tobacco exceeding applicable limits that are brought into Alberta by consumers through various ports of entry.
  - The Alberta Gaming and Liquor Commission added additional staff to increase enforcement activities in 2002.
  - The Alberta Tobacco Tax Amendment Act, 2009, strengthened enforcement measures and increased fines and penalties for non-compliance.

- The successful implementation of community bylaws which have further protected Albertans from secondhand smoke.
  - Since the inception of the Alberta Tobacco
     Reduction Strategy, many bylaws have been
     enacted by communities throughout Alberta. The
     majority of the bylaws focus on creating smokefree places within these communities.
  - To date, there are components of existing community bylaws that are more restrictive than the *Tobacco Reduction Act*, including bylaws that have prohibitions on smoking in hotels and other bylaws that prohibit smoking in cars with children present.
- Significant tax increases decreased tobacco product affordability.
  - In 2002, the Government of Alberta increased the tobacco tax by \$2.25 per pack, more than doubling Alberta's tobacco tax rate. Successive tax increases in 2007 and 2009 resulted in an additional \$1.00 per package. In 2009, the tax rate for loose tobacco was increased from 18.5 cents per gram to 30 cents to help restore tax parity between different tobacco products.

- The implementation of a comprehensive tobacco reduction school strategy.
  - Teaming Up for Tobacco Free Kids is a school-based, Alberta Education curriculumlinked prevention program aimed at youth in grades 4 – 6.
  - Building Leadership for Action in Schools Today (BLAST) is a junior high peer-leadership program delivered by The Lung Association Alberta & NWT and funded by Alberta Health Services.
  - Kick the Nic is a 10-week tobacco cessation program for youth.
- The implementation of community grants that facilitated innovative local tobacco reduction initiatives in communities across Alberta.
  - The community grants program provides guidance and funding to communities to develop and implement innovative projects that support the Alberta Tobacco Reduction Strategy goals.

- The implementation of provincial tobacco cessation services, including AlbertaQuits Helpline, AlbertaQuits Online and AlbertaQuits Groups.
  - AlbertaQuits Helpline is a free, confidential telephone counselling service, whereby callers can access help to develop an individual quit plan, receive information, or be referred to cessation services available in their community.
  - AlbertaQuits Online provides free web-based expert support, medication information, tobacco cessation resources and community support.
  - AlbertaQuits Groups offers free tobacco cessation support across Alberta for adults 18 years of age and over. The service is provided in a group counselling format.
- Comprehensive training for health professionals to help people quit tobacco.
  - Currently Alberta Health Services offers Tobacco Reduction and Cessation (TRaC) training which is intended to build the capacity of healthcare providers to offer tobacco cessation interventions.
     The program is currently expanding to offer on-line training as well as curriculum accreditation.
  - Special Populations training is also offered by Alberta Health Services. This training program builds upon the success of TRaC training by offering unique specialty courses which address the needs of special populations and informs best practices.

- Increased tobacco cessation supports in healthcare facilities.
  - Alberta Health Services' Tobacco and Smoke Free Environments Policy came into effect in 2011.
     The policy prohibits the use of tobacco products and prevents exposure to second-hand smoke at Alberta Health Services sites province-wide. By offering a tobacco-free environment, Alberta Health Services provides a supportive setting for patients, staff and visitors to reduce their dependence on tobacco products.
- The implementation of smokeless tobacco control initiatives in communities across Alberta targeting atrisk populations.
  - The Alberta Spit Tobacco Education Program supports local smokeless tobacco focused initiatives that provide education, and capacity building to at-risk areas and populations including Albertans engaged in sports activities, rural Albertans and aboriginal groups.

## Appendix Two — Glossary

- At-risk: More likely or greater potential to experience addiction than the general population. Examples include:
  - First Nations, Métis and Inuit populations;
  - Immigrant populations;
  - Low income individuals and families; and
  - People with mental health problems and illnesses.

(Additional populations will be considered as required)

- Healthcare facilities: Includes those which are publicly funded and/or contracted facilities such as hospitals, continuing and long term care sites, cancer care centres, mental health and addiction sites, public health centres, community health centres and urgent care sites.
- Smokeless tobacco: A product composed in whole
  or in part of tobacco, including tobacco leaves
  and any extract of tobacco leaves which does not
  require combustion in order to be used. Smokeless
  tobacco primarily comes in two forms snuff (dry
  and moist) and chewing tobacco. It is absorbed by
  the mucous membrane of the mouth or nose.
- Tobacco-like products: Includes substances used in waterpipes and herbal cigarettes.
   (Additional tobacco-like products will be considered as required)
- Unit: One unit of tobacco means one cigarette, one cigar, or 2/3 of a gram of loose tobacco for the purposes of calculating the per capita tobacco sales performance measure. This is consistent with Alberta's tobacco tax system. This measure will be re-estimated if the equivalency used for determining tax rates changes.



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## **Appendix Four — Acknowledgments**

Alberta Health would like to thank the Provincial Advisory Committee on Tobacco for their support in developing Creating Tobacco-free Futures. The Provincial Advisory Committee on Tobacco is comprised of the following organizations:

- · Action on Smoking and Health;
- Alberta Education;
- Alberta Gaming and Liquor Commission;
- Alberta Health;
- Alberta Health Services;
- Alberta Human Services:
- Alberta Justice and Solicitor General;
- Alberta Medical Association;
- Alberta Pharmacists' Association;
- Alberta Policy Coalition for Chronic Disease Prevention;
- Alberta Public Health Association;
- Alberta Treasury Board and Finance;
- Canadian Cancer Society, Alberta/NWT Division;
- College and Association of Registered Nurses of Alberta;
- Health Canada;
- Heart and Stroke Foundation;
- The Lung Association Alberta & NWT; and
- University of Alberta School of Public Health.





