LHIN 7 -----**Toronto Central**

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7. Toronto Central LHIN

Key Findings

Top three priority risk factor population estimates by sex (see Table 7.1 below):

<u>Females</u>

Alcohol—current consumption Smoking—ever-smoked status Alcohol—consumption exceeding cancer prevention recommendations

<u>Males</u>

Alcohol—current consumption Smoking—ever-smoked status Smoking—current status

Risk factor summary

Alcohol—current consumption

Priority areas:

- Females: areas throughout the central, western and eastern parts of the LHIN
- Males: areas throughout the central part of the LHIN and in the western and eastern parts of the LHIN
- Adolescent females: areas were mainly dispersed across the downtown Toronto core
- Adolescent males: areas dispersed across the LHIN
- Alcohol—consumption exceeding cancer prevention recommendations

Priority areas:

- Females: areas throughout the central and eastern parts of the LHIN
- Males: clusters in the central and eastern parts of the LHIN

Excess body weight

Priority areas:

• Females: very few areas in the western and eastern parts of the LHIN

Inadequate vegetable and fruit consumption

Priority areas:

• Females: one area in the western part of the LHIN

Physical activity

Priority areas:

- Females: areas in the western and eastern parts of the LHIN
- Males: areas in the western and eastern parts of the LHIN
- Adolescent females: areas throughout the central and eastern parts of the LHIN

Sedentary behaviour

Priority areas:

• Females: few areas, mostly in the eastern parts of the LHIN

Smoking—current status

Priority areas:

- Females: areas in the southern and eastern parts of the LHIN
- Males: areas in the central-west and eastern parts of the LHIN
- Adolescent females: few areas in the central part of the LHIN
- Adolescent males: areas dispersed across the central part of the LHIN

Smoking—ever-smoked status

Priority areas:

- Females: areas throughout the central LHIN and in the western and eastern parts of the LHIN
- Males: areas dispersed throughout the LHIN

Introduction

This section describes the estimated local prevalence of risk factors across the LHIN compared to the Ontario prevalence estimates from 2000 to 2014. These comparisons are always relative to Ontario with respect to the level of statistical evidence for the underlying prevalence estimate and often the number of areas meeting specific criteria are presented in parentheses (e.g., n=40). Risk factor maps are presented for females and males age 12 and older, and for adolescent females and adolescent males ages 12 to 18 inclusive. Throughout the text, the terms "area(s)" and "local" refer to the 2006 census dissemination areas (see the <u>Data and Methods</u> section, page 3).

Exclusions

As discussed in the <u>Interpretation</u> section (page 7), maps are shown only for risk factor estimates in the LHIN where one or more local estimates were higher than Ontario (or lower than Ontario for physical activity). Therefore, the risk factor maps not displayed for Toronto Central LHIN include:

- excess body weight (overweight/obese) among males, adolescent females and adolescent males;
- inadequate vegetable and fruit consumption among males, adolescent females and adolescent males;
- physical activity among adolescent males; and
- sedentary behaviour among males, adolescent females and adolescent males.

Notes

Risk factor prevalence could not be estimated for several areas in the Toronto Central LHIN (e.g., suppressed census populations or institutionalized populations), which are shown as "insufficient data" on the maps. See <u>Appendix C</u> for a full list of areas in the insufficient data category.

Priority population estimates

Priority population estimates may be helpful in prioritizing health promotion and planning efforts for potential populations affected by certain modifiable risk factors. Table 7.1 (page 235) presents the estimated priority populations for each risk factor by sex and age group in the Toronto Central LHIN. Priority populations are defined as those living in areas with a higher risk factor prevalence (or lower prevalence for physical activity) than Ontario. These estimates were produced by summing the population from all higher (or lower for physical activity) prevalence small areas (2006 dissemination areas) after taking into account the risk factor prevalence of each area. For example, if among females 100 areas had a higher prevalence of current alcohol consumption than Ontario, the female 2006 census populations in each of these areas were multiplied by the prevalence of current alcohol consumption for each area and then summed across the 100 areas to produce an estimate of the female "priority population." These calculations are intended to provide a measure to prioritize the risk factors rather than a population estimate.

According to the <u>Methods</u> (page 4) and <u>Interpretation</u> (page 7) sections, these higher prevalence areas had strong statistical evidence of elevated prevalence compared to Ontario (posterior probabilities \geq 80%). An exception is physical activity, which had strong statistical evidence of lower prevalence estimates than Ontario (posterior probabilities \leq 20%). Therefore, the population estimates for each risk factor are likely undercounted because areas with less statistical certainty (posterior probabilities < 80% and physical activity posterior probabilities > 20%) are not included in the priority population estimates.

Table 7.1 Estimated priority populations among higher prevalence^{**} dissemination areas compared to Ontario by risk factor, sex and age group, Toronto Central Local Health Integration Network (LHIN), using 2006 census populations

Risk factor	Female priority population*†	% of female population in the LHIN [†] (n=494,440)	Male priority population*†	% of male population in the LHIN [†] (n=457,110)	Adolescent female priority population**	% of adolescent female population in the LHIN [‡] (n=36,930)	Adolescent males priority population* [‡]	% of adolescent male population in the LHIN [‡] (n=38,490)
Alcohol—current consumption	209,790	42%	174,090	38%	660	2%	990	3%
Alcohol—consumption exceeding cancer prevention recommendations	32,570	7%	6,550	1%	NM	_	NM	_
Excess body weight	440	0%	NE		NE		NE	
Inadequate vegetable and fruit consumption	2,070	0%	NE		NE	_	NE	_
Physical activity**	6,470	1%	13,210	3%	3,730	10%	NP	
Sedentary behaviour	960	0%	210	0%	NE		NE	
Smoking—current status	10,010	2%	23,810	5%	40	0%	70	0%
Smoking—ever-smoked status	109,610	22%	56,210	12%	NM		NM	

NE = no estimates within the "higher" prevalence categories**; NM = not modelled; NP = census population estimates not available

* Estimates rounded to multiples of 10

** For physical activity, priority populations are those living in areas with a lower risk factor prevalence compared to Ontario

⁺ Population age 12 and older

[‡]Population ages 12 to 18

— Value not applicable

Alcohol—current consumption

People age 12 and older

An estimated 70% of females and 79% of males in Ontario reported current alcohol consumption.

Higher prevalence than Ontario

For females (Figure 7.1), there were 867 areas with a higher prevalence of current alcohol consumption compared to the Ontario average, and 718 areas for males (Figure 7.2). For both sexes, higher prevalence estimates occurred mainly in the central parts of the LHIN, (e.g. along Yonge Street) as well as areas around the intersections of Bloor Street West and Parkside Drive, and Evans Avenue and Islington Avenue in the western tip of the LHIN. For females, additional areas with a higher prevalence were located more extensively in the central, eastern and western parts of the LHIN, along Royal York Road, Broadview Avenue and Kingston Road.

Lower prevalence than Ontario

Lower prevalence of current alcohol consumption than the Ontario average was similarly common among females (n=166; Figure 7.1) and males (n=156; Figure 7.2). For females and males, clusters of lower prevalence areas were located in the northwestern part of the LHIN, along Weston Road. Another clustering was located in the northeastern part of the LHIN around the intersection of St. Clair Avenue East and Victoria Park Avenue. There were also a few lower prevalence areas scattered around the central part of the LHIN for both sexes.

Adolescents

Among the adolescent population in Ontario, approximately 40% of females and males reported current alcohol consumption.

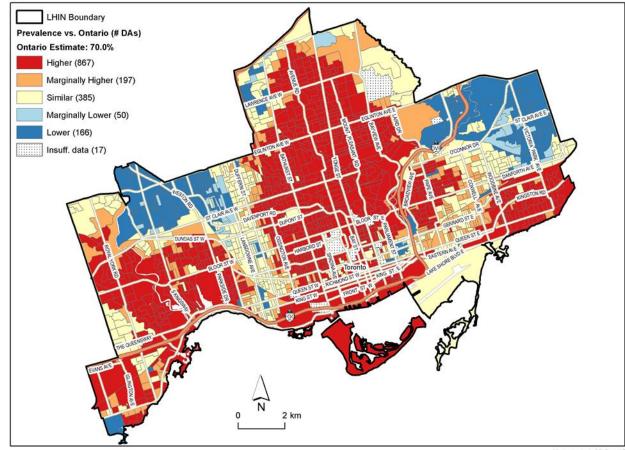
Higher prevalence than Ontario

Fewer areas with higher prevalence estimates than Ontario were identified for adolescent females (n=114; Figure 7.3) compared to adolescent males (n=151; Figure 7.4). For both sexes, these higher prevalence areas were scattered across the LHIN, but for adolescent females, tended to be located towards the south of the LHIN.

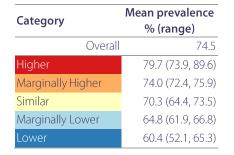
Lower prevalence than Ontario

Areas with a lower prevalence than Ontario were widespread throughout the LHIN for both adolescent females (n=793; Figure 7.3) and adolescent males (n=709; Figure 7.4).

Figure 7.1 Current alcohol consumption among females (age 12 and older), 2000–2014, Toronto Central Local Health Integration Network (LHIN) by 2006 dissemination area (DA)



Map created: 08-Sep-17



Prevalence by 2006 dissemination areas (DA) and 95% credibility intervals

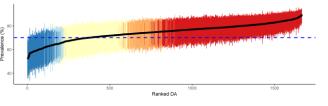
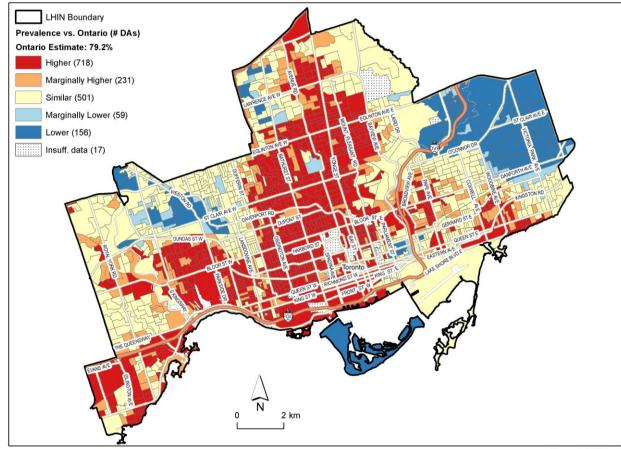


Figure 7.2 Current alcohol consumption among males (age 12 and older), 2000–2014, Toronto Central Local Health Integration Network (LHIN) by 2006 dissemination area (DA)



Map created: 08-Sep-17

Category	Mean prevalence % (range)		
Overal	l 81.0		
Higher	84.8 (82.1, 90.3)		
Marginally Higher	81.8 (80.7, 83.0)		
Similar	79.1 (75.4, 81.6)		
Marginally Lower	75.6 (72.2, 77.2)		
Lower	70.6 (59.9, 75.6)		

Prevalence by 2006 dissemination areas (DA) and 95% credibility intervals

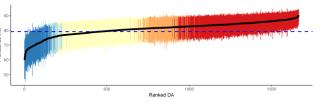
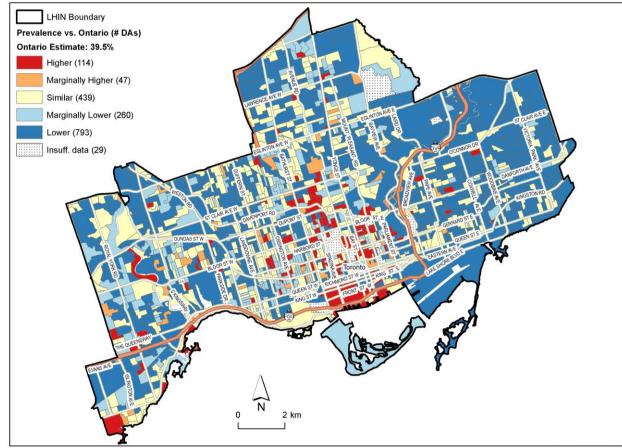


Figure 7.3 Current alcohol consumption among adolescent females (ages 12 to 18), 2000–2014, Toronto Central Local Health Integration Network (LHIN) by 2006 dissemination area (DA)



Map created: 08-Sep-17

Category	Mean prevalence % (range)	
Overall	35.1	
Higher	51.1 (44.8, 55.6)	
Marginally Higher	44.0 (42.5, 45.7)	
Similar	39.6 (36.0, 44.0)	
Marginally Lower	35.5 (34.0, 36.7)	
Lower	29.7 (8.4, 35.5)	

Prevalence by 2006 dissemination areas (DA) and 95% credibility intervals

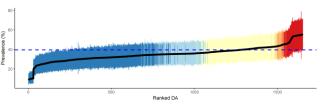
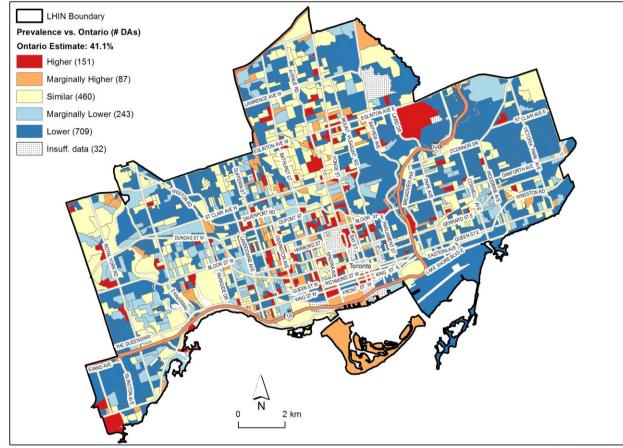


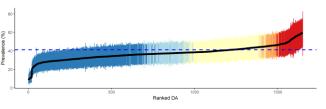
Figure 7.4 Current alcohol consumption among adolescent males (ages 12 to 18), 2000–2014, Toronto Central Local Health Integration Network (LHIN) by 2006 dissemination area (DA)



Map created: 11-Sep-17

Category	Mean prevalence % (range)	
Overal	l 37.5	
Higher	52.0 (45.7, 59.7)	
Marginally Higher	45.5 (44.2, 47.9)	
Similar	40.8 (37.3, 44.9)	
Marginally Lower	37.3 (35.4, 38.5)	
Lower	31.4 (8.5, 37.4)	

Prevalence by 2006 dissemination areas (DA) and 95% credibility intervals



Alcohol—consumption exceeding cancer prevention recommendations

People age 12 and older

Almost 7% of the female population in Ontario drank alcohol in excess of the recommended limits for cancer prevention. Among males, the Ontario prevalence of exceeding the recommended limits was 8.5%.

Higher prevalence than Ontario

There were 952 areas with a higher prevalence of alcohol consumption in excess of cancer prevention recommendations than the Ontario average for females (Figure 7.5). These areas occurred in the central (downtown Toronto and north to Lawrence Avenue West) and the southeastern parts of the LHIN, as well as along Parkside Drive. For males, 182 areas had a higher prevalence than Ontario (Figure 7.6). For males, these areas tended to cluster south of St. Clair Avenue West and Yonge Street, and in the eastern tip of the LHIN, south of O'Connor Drive between Broadview Avenue and Victoria Park Avenue.

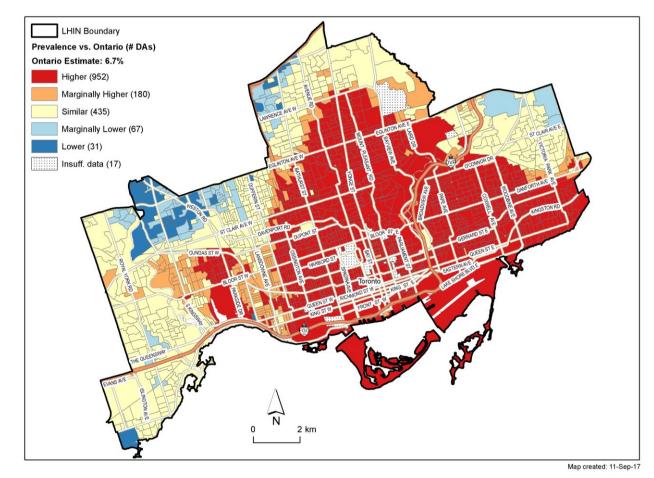
Lower prevalence than Ontario

Areas with a lower prevalence of alcohol consumption in excess of cancer prevention recommendations than the Ontario average were less common among females (n=31; Figure 7.5) compared to males (n=216; Figure 7.6). For females, these areas occurred around Weston Road and northwest of Lawrence Avenue West and Bathurst Street. For males, these areas were located along the north boundary of the LHIN, along St. Clair Avenue West, Lawrence Avenue and St. Clair Avenue East.

Adolescents

The area-based prevalence of exceeding cancer prevention recommendations was not estimated for adolescent populations.

Figure 7.5 Alcohol consumption exceeding cancer prevention recommendations among females (age 12 and older), 2000–2014, Toronto Central Local Health Integration Network (LHIN) by 2006 dissemination area (DA)



CategoryMean prevalence
% (range)Overall9.8Higher11.5 (8.8, 17.1)Marginally Higher8.9 (8.1, 10.3)Similar7.3 (5.8, 9.0)Marginally Lower5.7 (5.2, 6.1)Lower5.1 (3.8, 5.5)



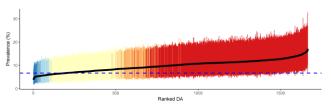
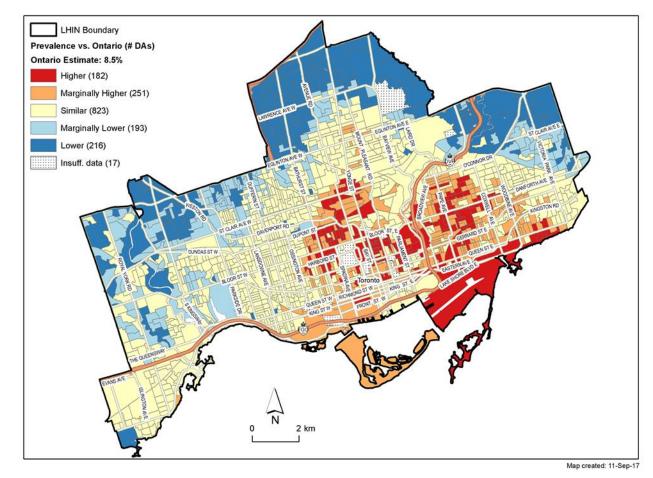
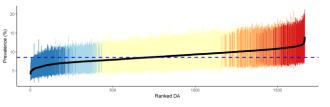


Figure 7.6 Alcohol consumption exceeding cancer prevention recommendations among males (age 12 and older), 2000–2014, Toronto Central Local Health Integration Network (LHIN) by 2006 dissemination area (DA)



CategoryMean prevalence
% (range)Overall8.8Higher11.2 (10.3, 14.0)Marginally Higher10.4 (9.7, 11.4)Similar8.8 (7.6, 10.4)Marginally Lower7.4 (6.9, 7.7)Lower6.4 (4.0, 7.3)

Prevalence by 2006 dissemination areas (DA) and 95% credibility intervals



Excess body weight

People age 12 and older

The estimated Ontario prevalence of excess body weight (overweight or obese) was 41% among females and 56% among males.

Higher prevalence than Ontario

Areas with a higher prevalence of excess body weight compared to Ontario were uncommon for females (n=3; Figure 7.7) and were located in the western and eastern parts of the LHIN. In the Toronto Central LHIN, there were no areas with a higher prevalence than Ontario for males, which is why that map is not shown.

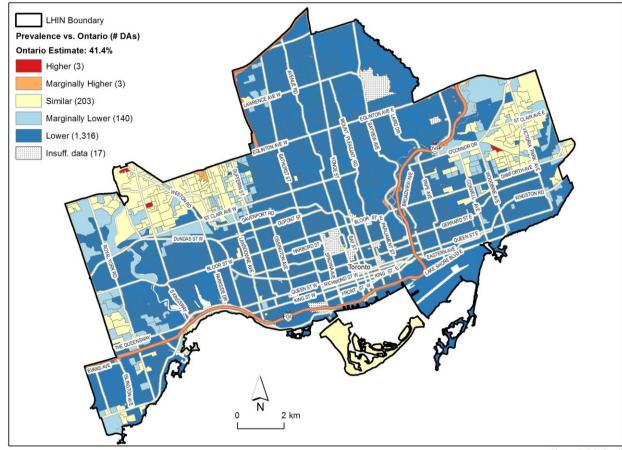
Lower prevalence than Ontario

Most areas in the Toronto Central LHIN had a lower prevalence of excess body weight than the Ontario average for females (n=1,316; Figure 7.7). Two exceptions were located in the western (e.g., Weston Road) and eastern (e.g., St. Clair Avenue East) parts of the LHIN.

Adolescents

Among Ontario adolescents, an estimated 15% of females and 25% of males were overweight or obese. In the Toronto Central LHIN, there were no areas with a higher prevalence than Ontario for adolescents, which is why those maps are not shown.

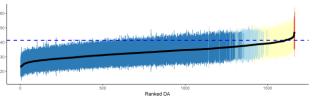
Figure 7.7 Excess body weight (overweight/obese) among females (age 12 and older), 2000–2014, Toronto Central Local Health Integration Network (LHIN) by 2006 dissemination area (DA)



Map created: 11-Sep-17

Category	Mean prevalence % (range)	
Overal	II 33.6	
Higher	46.7 (46.2, 47.2)	
Marginally Higher	45.6 (44.5, 47.0)	
Similar	40.4 (37.1, 44.3)	
Marginally Lower	37.9 (35.6, 39.2)	
Lower	32.0 (22.9, 37.6)	





Inadequate vegetable and fruit consumption

People age 12 and older

Inadequate consumption of vegetables and fruits was common across Ontario, with approximately 63% of females and 77% of males reporting inadequate consumption.

Higher prevalence than Ontario

Only one area had a higher prevalence of inadequate vegetable and fruit consumption than the Ontario average for females (Figure 7.8). This area was located at the intersection of Weston Road and St. Clair Avenue West. In the Toronto Central LHIN, there were no areas with a higher prevalence than Ontario for males, which is why that map is not shown.

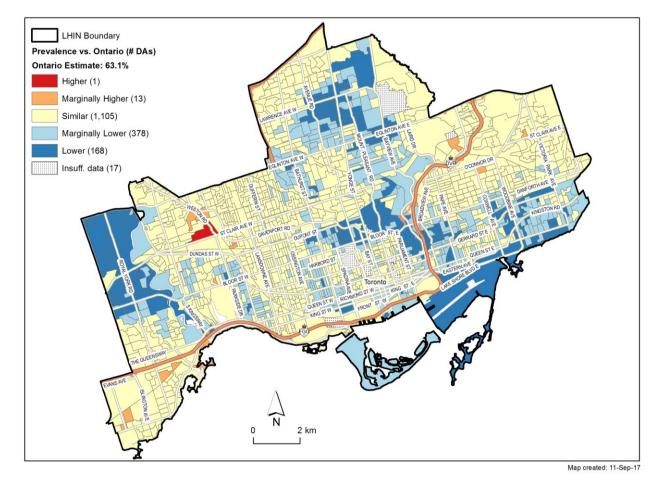
Lower prevalence than Ontario

Areas with a lower prevalence of inadequate vegetable and fruit consumption than Ontario for females (n=168; Figure 7.8) were concentrated in western, northern, central and southeastern parts of Toronto Central LHIN. For example, these areas were located along Royal York Road north of Bloor Street West, around Yonge Street and Lawrence Avenue West and along Eglinton Avenue East between Yonge Street and Laird Drive. They were also located north of Bloor Street East between Bathurst Street and Bayview Avenue, along the Don Valley Parkway (DVP) between Bloor Street East and Gerrard Street East, and south of Danforth Avenue between Coxwell Avenue and Victoria Park Avenue.

Adolescents

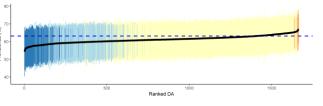
More than two thirds of the adolescent Ontario population had inadequate vegetable and fruit consumption at approximately 68% for females and 74% for males. In the Toronto Central LHIN, there were no areas with a higher prevalence than the Ontario average for adolescents, which is why those maps are not shown.

Figure 7.8 Inadequate vegetable and fruit consumption among females (age 12 and older), 2000–2014, Toronto Central Local Health Integration Network (LHIN) by 2006 dissemination area (DA)



Category	Mean prevalence % (range)
Overall	61.2
Higher	66.3 (66.3, 66.3)
Marginally Higher	66.1 (65.3, 67.0)
Similar	62.1 (59.2, 66.2)
Marginally Lower	59.6 (57.6, 61.0)
Lower	57.8 (54.4, 59.7)

Prevalence by 2006 dissemination areas (DA) and 95% credibility intervals



Physical activity

Because physical activity reduces cancer risk, lower prevalence estimates of this risk factor are of interest. The colour scheme of the maps was inverted so that the "lower than Ontario" estimates are displayed in red.

People age 12 and older

Most of the Ontario population was not physically active, with approximately one in five (23%) females and one in three (30%) males being physically active.

Lower prevalence than Ontario

There were fewer areas with a lower prevalence of physical activity than the Ontario average for females (n=99; Figure 7.9) compared to males (n=179; Figure 7.10). For both sexes, lower prevalence estimates occurred in northwestern and eastern parts of Toronto Central LHIN. For females, additional areas with a lower prevalence were scattered across the LHIN, whereas for males they were mostly found along Dufferin Street north of St. Clair Avenue West and to the east along Victoria Park Avenue north of Danforth Avenue as well as west of Woodbine Avenue

Higher prevalence than Ontario

Areas with a higher prevalence of physical activity than Ontario were more common for females (n=182; Figure 7.9) compared to males (n=77; Figure 7.10). For both sexes, the higher prevalence areas were located in the western and central parts of the LHIN, but the distribution of these areas was more extensive for females than males.

Adolescents

Adolescents were more physically active than adults, with approximately 40% of adolescent females and 57% of adolescent males being active.

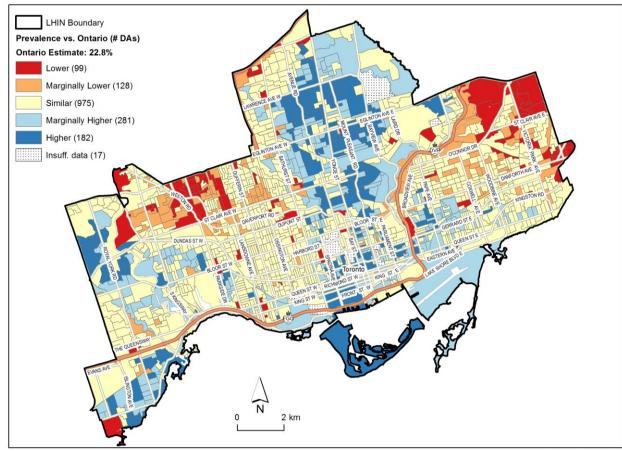
Lower prevalence than Ontario

Areas with a lower prevalence of physical activity than the Ontario average for adolescent females (n=545; Figure 7.11) were widespread across the central and eastern parts of the LHIN. Lower prevalence areas were particularly common in the downtown core and along Danforth Avenue, roughly bounded by O'Connor Drive and Queen Street East. There were no areas with a lower prevalence than Ontario for adolescent males, which is why that map is not shown.

Higher prevalence than Ontario

There were no areas with a higher prevalence than Ontario detected among adolescent females (Figure 7.11).

Figure 7.9 Physical activity among females (age 12 and older), 2000–2014, Toronto Central Local Health Integration Network (LHIN) by 2006 dissemination area (DA)



Map created: 11-Sep-17

Category	Mean prevalence % (range)	
Overal	23.9	
Lower	18.2 (12.9, 20.2)	
Marginally Lower	20.3 (19.3, 21.1)	
Similar	23.4 (20.6, 25.9)	
Marginally Higher	26.2 (25.1, 27.9)	
Higher	28.4 (26.5, 34.9)	

Prevalence by 2006 dissemination areas (DA) and 95% credibility intervals

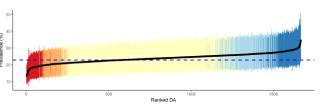
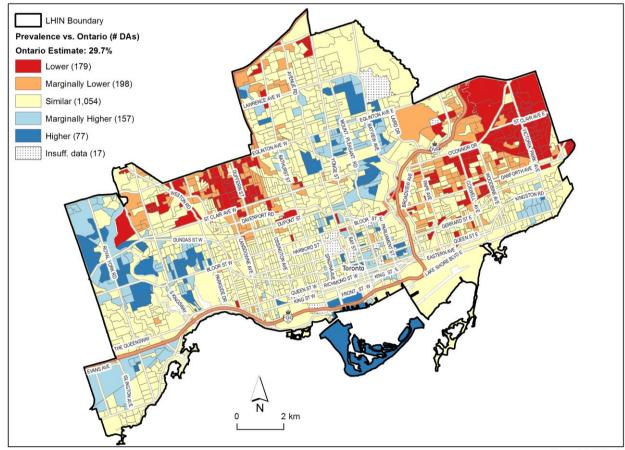


Figure 7.10 Physical activity among males (age 12 and older), 2000–2014, Toronto Central Local Health Integration Network (LHIN) by 2006 dissemination area (DA)



Map created: 11-Sep-17

Category	Mean prevalence % (range)		
Overall	29.6		
Lower	24.9 (21.9, 26.4)		
Marginally Lower	26.9 (25.5, 27.8)		
Similar	29.9 (27.2, 33.8)		
Marginally Higher	33.3 (32.2, 35.6)		
Higher	35.8 (33.8, 45.5)		

Prevalence by 2006 dissemination areas (DA) and 95% credibility intervals

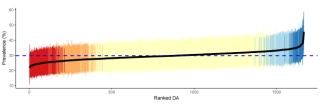
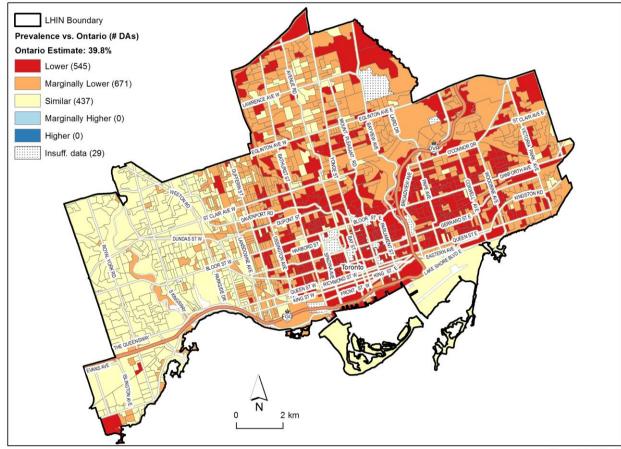


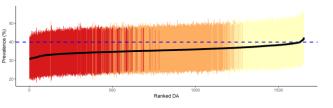
Figure 7.11 Physical activity among adolescent females (ages 12 to 18), 2000–2014, Toronto Central Local Health Integration Network (LHIN) by 2006 dissemination area (DA)



Map created: 11-Sep-17

Category	Mean prevalence % (range)
Overal	I 35.6
Lower	33.7 (30.6, 35.4)
Marginally Lower	35.6 (33.1, 37.0)
Similar	38.0 (36.3, 42.4)
Marginally Higher	N/A
Higher	N/A
N/A = no estimates in	the category

Prevalence by 2006 dissemination areas (DA) and 95% credibility intervals



Sedentary behaviour

People age 12 and older

Approximately half of the Ontario population reported sedentary behaviour during leisure time (females, 49%; males, 56%).

Higher prevalence than Ontario

In the Toronto Central LHIN, six areas had a higher prevalence of sedentary behaviour than the Ontario average for females (Figure 7.12), located mainly in the eastern part of the LHIN. Only one higher prevalence area was identified for males (Figure 7.13).

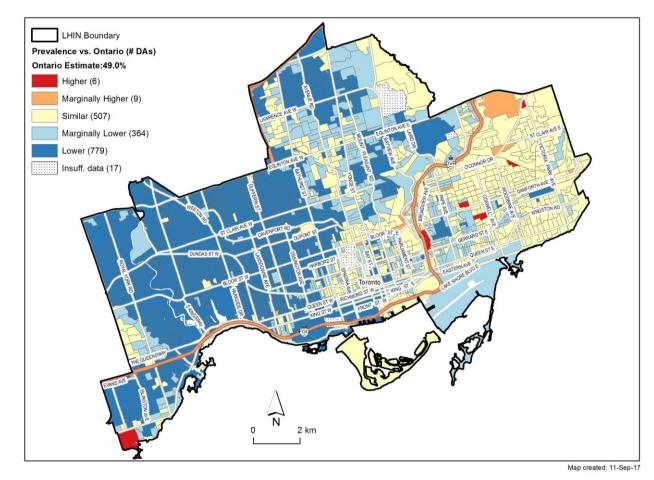
Lower prevalence than Ontario

Areas with a lower prevalence of sedentary behaviour than Ontario for females (n=779; Figure 7.12) were located extensively throughout the western (e.g., west of Bathurst Street) and northern parts of the LHIN (e.g., Avenue Road and Lawrence Avenue West). A few lower prevalence areas also occurred around the downtown core and south of Danforth Avenue towards the east. Among males (n=23; Figure 7.13) lower prevalence areas were located in the western part of the LHIN (e.g., west of Kingsway South).

Adolescents

More than half of the Ontario adolescent population reported sedentary behaviour during leisure time, at approximately 55% for females and 60% for males. In the Toronto Central LHIN, there were no areas with a higher prevalence than Ontario for adolescents, which is why those maps are not shown.

Figure 7.12 Sedentary behaviour among females (age 12 and older), 2000–2014, Toronto Central Local Health Integration Network (LHIN) by 2006 dissemination area (DA)



Category	Mean prevalence % (range)
Overall	45.0
Higher	54.0 (52.7, 54.7)
Marginally Higher	52.1 (51.3, 52.9)
Similar	47.9 (45.4, 52.6)
Marginally Lower	45.5 (43.3, 46.7)
Lower	42.8 (39.2, 45.6)

Prevalence by 2006 dissemination areas (DA) and 95% credibility intervals

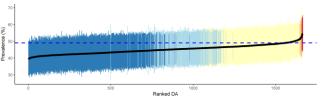
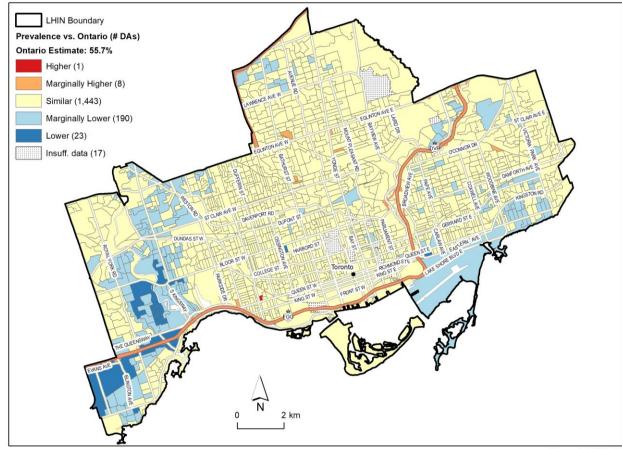


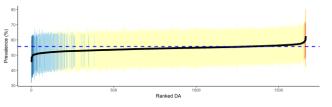
Figure 7.13 Sedentary behaviour among males (age 12 and older), 2000–2014, Toronto Central Local Health Integration Network (LHIN) by 2006 dissemination area (DA)



Map created: 05-Oct-17

Category	Mean prevalence % (range)	
Overall	54.4	
Higher	60.8 (60.8, 60.8)	
Marginally Higher	59.6 (58.7, 62.5)	
Similar	54.7 (52.0, 59.6)	
Marginally Lower	51.9 (50.2, 53.2)	
Lower	49.8 (45.4, 51.5)	





Smoking—current status

People age 12 and older

Current tobacco smoking was reported by 17% of Ontario females and 24% of males.

Higher prevalence than Ontario

For females (Figure 7.14), 136 areas with a higher prevalence of current smoking than the Ontario average were identified, whereas 232 areas were identified for males (Figure 7.15). For females, higher prevalence areas tended to occur in the southeastern part of the LHIN (e.g. south of Danforth Avenue) as well as around the downtown core (e.g. Front Street West). In contrast, higher prevalence areas for males were located in the central and eastern parts of the LHIN around Dufferin Street and Bloor Street West, along King Street West and Parliament Street, north of Danforth Avenue and south of Queen Street East.

Lower prevalence than Ontario

Areas with a lower prevalence of current smoking than Ontario were less common for females (n=228; Figure 7.14) compared to males (n=350; Figure 7.15). For both sexes, lower prevalence areas occurred towards the northern and western boundaries of the LHIN. For females, these areas were also found along Don Valley Parkway (DVP) north of O'Connor Drive. Additional lower prevalence areas for males occurred between Eglinton Avenue and Bloor Street as well as east of Royal York Road and west of Parkside Drive.

Adolescents

Approximately 8% of adolescent females and adolescent males in Ontario reported that they currently smoked tobacco.

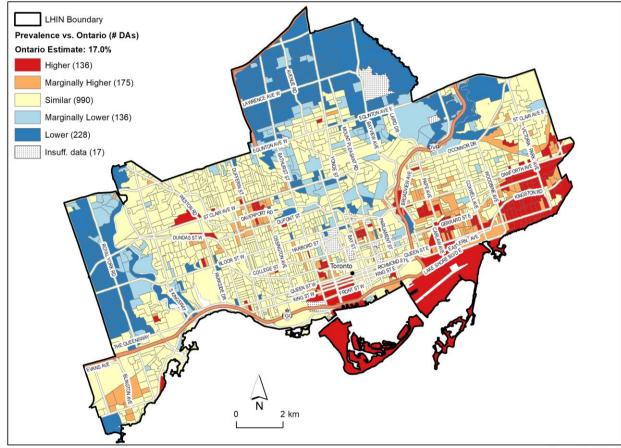
Higher prevalence than Ontario

Forty-one areas had a higher prevalence of current smoking than the Ontario average for adolescent females (Figure 7.16) and 66 areas for adolescent males (Figure 7.17). For both sexes, higher prevalence areas were dispersed mostly around the central part of the LHIN.

Lower prevalence than Ontario

Areas with lower prevalence estimates were located mainly in northern and eastern parts of the LHIN but also spread sparsely across the LHIN for both adolescent females (n=249; Figure 7.16) and adolescent males (n=313; Figure 7.17).

Figure 7.14 Current smoking among females (age 12 and older), 2000–2014, Toronto Central Local Health Integration Network (LHIN) by 2006 dissemination area (DA)



Map created: 11-Sep-17

Category	Mean prevalence % (range)	
Overal	l 17.6	
Higher	23.6 (20.5, 29.1)	
Marginally Higher	21.2 (19.2, 25.3)	
Similar	17.8 (14.8, 22.1)	
Marginally Lower	14.5 (13.3, 15.2)	
Lower	12.1 (7.1, 14.4)	

Prevalence by 2006 dissemination areas (DA) and 95% credibility intervals

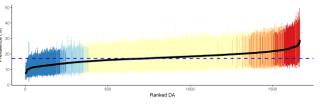
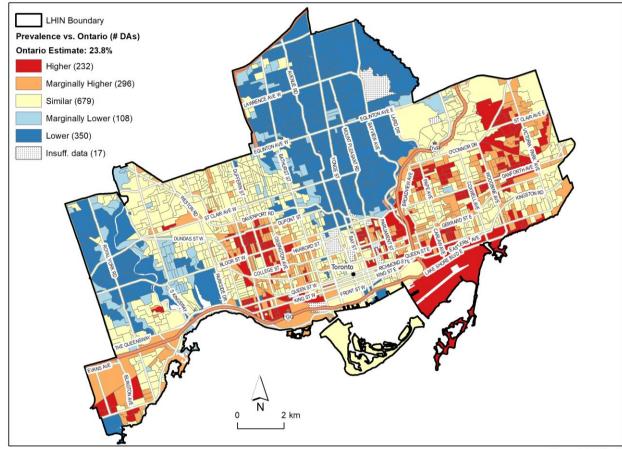


Figure 7.15 Current smoking among males (age 12 and older), 2000–2014, Toronto Central Local Health Integration Network (LHIN) by 2006 dissemination area (DA)



Map created: 11-Sep-17

Category	Mean prevalence % (range)
Overall 24.4	
Higher	31.0 (27.9, 37.9)
Marginally Higher	28.4 (26.2, 31.1)
Similar	25.0 (20.4, 29.0)
Marginally Lower	20.5 (19.3, 21.8)
Lower	16.8 (9.3, 20.9)

Prevalence by 2006 dissemination areas (DA) and 95% credibility intervals

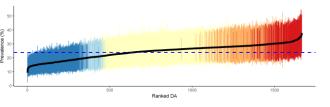
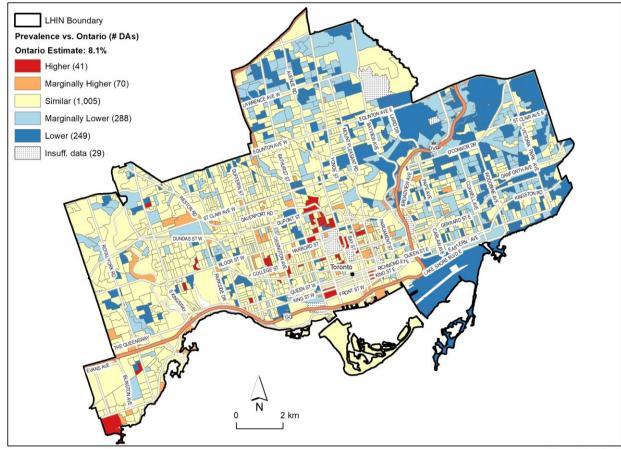


Figure 7.16 Current smoking among adolescent females (ages 12 to 18), 2000–2014, Toronto Central Local Health Integration Network (LHIN) by 2006 dissemination area (DA)



Map created: 11-Sep-17

Category	Mean prevalence % (range)
Overal	1 7.9
Higher	12.7 (11.8, 13.8)
Marginally Higher	11.4 (10.1, 14.1)
Similar	8.5 (6.9, 11.0)
Marginally Lower	6.7 (6.1, 7.2)
Lower	5.2 (1.6, 6.4)

Prevalence by 2006 dissemination areas (DA) and 95% credibility intervals

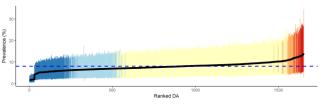
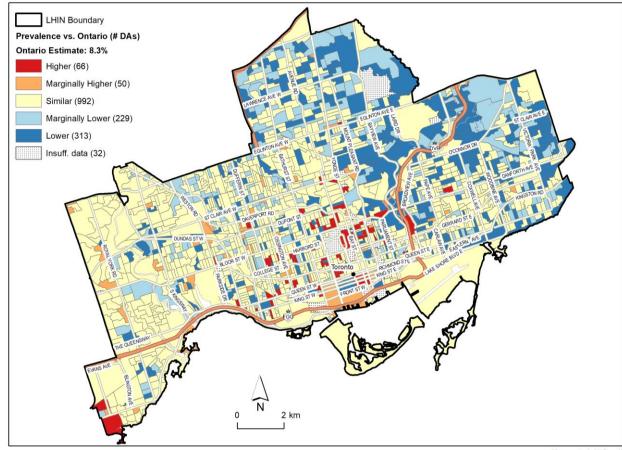


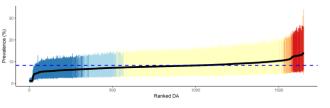
Figure 7.17 Current smoking among adolescent males (ages 12 to 18), 2000–2014, Toronto Central Local Health Integration Network (LHIN) by 2006 dissemination area (DA)



Map created: 11-Sep-17

Category	Mean prevalence % (range)
Overall 8.0	
Higher	12.8 (11.8, 14.1)
Marginally Higher	11.2 (10.4, 14.0)
Similar	8.5 (7.2, 11.0)
Marginally Lower	6.9 (6.3, 7.4)
Lower	5.5 (1.0, 6.6)

Prevalence by 2006 dissemination areas (DA) and 95% credibility intervals



Smoking—ever-smoked status

People age 12 and older

Approximately one in two Ontario females and three in five Ontario males reported having ever-smoked.

Higher prevalence than Ontario

More areas with a higher prevalence of ever-smokers than the Ontario average were detected for females (n=659; Figure 7.18) compared to males (n=284; Figure 7.19). For females, these areas were found mainly throughout the central and southeastern parts of the LHIN, with an additional cluster to the west around Bloor Street West and Parkside Drive. For males, higher prevalence areas were dispersed in areas throughout the central (e.g. Yonge Street St. and Clair Avenue West, Parliament Street and Bloor Street East), southern (e.g. along Queen Street West and East) and western (e.g. along Royal York Road south of Bloor Street West) parts of the LHIN.

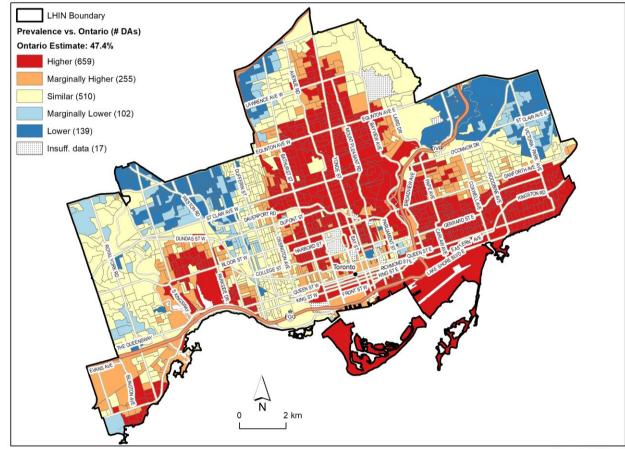
Lower prevalence than Ontario

Areas with a lower prevalence of ever-smokers than the Ontario average were detected for females (n=139; Figure 7.18) and males (n=88; Figure 7.19). For females, most of these areas were located towards the western, northwestern and eastern boundaries of the LHIN north of St. Clair Avenue West and west of Dufferin Street; along the Don Valley Parkway (DVP) north of O'Connor Drive; and, along Victoria Park Avenue north of Danforth Avenue. For males, higher prevalence areas were dispersed in the western, eastern and northern parts of the LHIN.

Adolescents

The area-based prevalence of ever-smoked status was not estimated for adolescent populations.

Figure 7.18 Ever-smoked status among females (age 12 and older), 2000–2014, Toronto Central Local Health Integration Network (LHIN) by 2006 dissemination area (DA)



Map created: 12-Sep-17

Category	Mean prevalence % (range)
Overall 50.8	
Higher	56.1 (51.5, 64.7)
Marginally Higher	51.8 (50.0, 54.6)
Similar	47.7 (43.2, 53.7)
Marginally Lower	43.1 (40.3, 45.0)
Lower	40.1 (34.1, 43.7)

Prevalence by 2006 dissemination areas (DA) and 95% credibility intervals

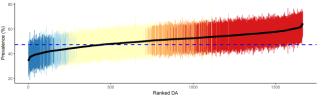
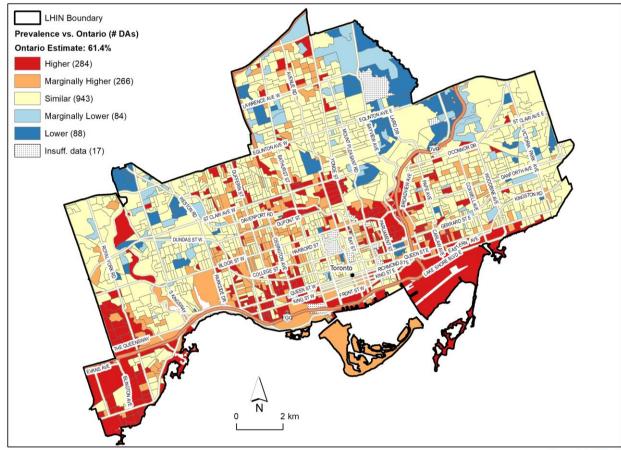


Figure 7.19 Ever-smoked status among males (age 12 and older), 2000–2014, Toronto Central Local Health Integration Network (LHIN) by 2006 dissemination area (DA)



Map created: 12-Sep-17

Category	Mean prevalence % (range)
Overal	l 62.4
Higher	66.9 (64.7, 73.3)
Marginally Higher	64.5 (63.4, 66.7)
Similar	61.6 (57.4, 64.2)
Marginally Lower	58.1 (54.4, 59.3)
Lower	54.7 (44.2, 58.0)

Prevalence by 2006 dissemination areas (DA) and 95% credibility intervals

