Monitor Introduction

This RRFSS Monitor describes the use of artificial tanning equipment by Waterloo Region adults aged 18 and older. The purpose of the module is to determine the proportion of adults who use artificial tanning equipment and why adults in Waterloo Region are using tanning equipment. From January to December of 2011, a total of 1222 adults were asked about their use of artificial tanning equipment over the past year (cycles 6 to 9). Estimates are presented with 95% confidence intervals (CI) and appear in the following format: (CI: XX.X-XX.X). Tests of significance were performed on the data and all statistically significant differences were determined by p-values less than 0.05.

Use of artificial tanning equipment among adults in the Waterloo Region has decreased

In 2008, 8.7% (CI: 7.0-10.5) of adults aged 18 years and older in Waterloo Region used artificial tanning equipment at some point in the past 12 months. As of 2011, there was a significant decrease in use of artificial tanning equipment to 5.7% (CI: 4.2-7.2) among adults aged 18 years and older in the Waterloo Region.

Significant differences exist by age and gender

Adults aged 18 to 24 years were significantly more likely to use artificial tanning equipment in the last year than adults aged 45 to 64 years (Table 1).

Table 1: Per cent of adults aged 18 years and older who used artificial tanning equipment in the past 12 months, by age group, Waterloo Region, 2011

<table>
<thead>
<tr>
<th>Age Group</th>
<th>18 to 24</th>
<th>25 to 44</th>
<th>45 to 64</th>
<th>65+</th>
</tr>
</thead>
<tbody>
<tr>
<td>18 to 24</td>
<td>11.2%</td>
<td>7.7%</td>
<td>4.4%</td>
<td></td>
</tr>
<tr>
<td>25 to 44</td>
<td>4.3-18.1</td>
<td>4.8-10.5</td>
<td>2.4-6.5</td>
<td></td>
</tr>
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<td></td>
</tr>
</tbody>
</table>

x,y,z...Represent statistically significant differences between two proportions (%) with a p-value of less than 0.05, e.g., two proportions with an “x” next to them are statistically different from each other. The superscript “E” denotes high sampling variability, and estimates must be interpreted with caution. An “F” denotes unacceptable sampling variability, and estimates or conclusions based on these data will be unreliable and most likely invalid.

Fast Facts:
- 5.7% (CI: 4.2-7.2) of adults used artificial tanning equipment in the previous 12 months
- 63.5% (CI: 50.4-76.7) of adults who used artificial tanning equipment in the previous 12 months used it less than 11 times
- Most important reason for using artificial tanning equipment in the past year was to get a base tan (91.2% (CI: 83.1-99.4)).
Women aged 18 years and older were significantly more likely to use artificial tanning equipment in the last year than men aged 18 years and older (Figure 1).

**Figure 1: Per cent of adults aged 18 years and older who used artificial tanning equipment in the past 12 months, by gender, Waterloo Region, 2011**

![Figure 1](image)

The superscript "E" denotes high sampling variability, and estimates must be interpreted with caution.

There were no reportable significant differences in use of tanning equipment in the previous 12 months by education level, household income or geography.

**Almost two-thirds of adults who use artificial tanning equipment used it less than 11 times in the past 12 months**

In 2008 and 2011, approximately two-thirds of adults who had used artificial tanning equipment in the previous 12 months used it less than 11 times (66.8% (CI: 56.8-76.9) versus 63.5% (CI: 50.4-76.7) respectively). As well, in 2008 and 2011 a third of adults who used artificial tanning equipment in the previous 12 months used it 11 times or more (33.2% (CI: 23.1-43.2) versus 36.5% (CI: 23.3-49.6)).

There were no significant differences in frequency of artificial tanning equipment use by age, gender, education level, household income or geography.

**Most important reason that Waterloo Region adults use artificial tanning equipment is to get a base tan for a vacation**

In 2011, there were a number of reasons why Waterloo Region adults used artificial tanning equipment. Among adults who had used artificial tanning equipment over the previous 12 months, the most important reason indicated for using artificial tanning equipment was to tan without burning, to get a base tan or to prepare for a vacation (91.2% (CI: 83.1-99.4)). Conversely, the least important reason to use artificial tanning equipment was to prevent cancer (14.4% (CI: 4.8-24.0)) (Table 2).
Table 2: Per cent of adults aged 18 years and older who used artificial tanning equipment in the past 12 months, by reason of use, Waterloo Region, 2011

<table>
<thead>
<tr>
<th>Reason to use artificial tanning equipment</th>
<th>Per cent of Waterloo Region Adults</th>
</tr>
</thead>
<tbody>
<tr>
<td>To tan without burning, to get a base tan, or to prepare for a vacation</td>
<td>91.2% (CI: 83.1-99.4)</td>
</tr>
<tr>
<td>To increase Vitamin D</td>
<td>66.7% (CI: 53.8-79.6)</td>
</tr>
<tr>
<td>To look better, to look fit, to look healthy, or to improve your appearance</td>
<td>65.0% (CI: 52.2-77.8)</td>
</tr>
<tr>
<td>To relax or feel better</td>
<td>65.0% (CI: 51.9-78.0)</td>
</tr>
<tr>
<td>To treat a skin condition</td>
<td>31.4% E (CI: 18.4-44.4)</td>
</tr>
<tr>
<td>To boost your immune system</td>
<td>27.4% E (CI: 14.7-40.1)</td>
</tr>
<tr>
<td>To prevent cancer</td>
<td>14.4% E (CI: 4.8-24.0)</td>
</tr>
<tr>
<td>Because a doctor recommended it</td>
<td>F</td>
</tr>
</tbody>
</table>

The superscript “E” denotes high sampling variability, and estimates must be interpreted with caution. An “F” denotes unacceptable sampling variability, and estimates or conclusions based on these data will be unreliable and most likely invalid.

There were no reportable differences among reasons indicated by adults to use artificial tanning equipment by age, gender, education level, household income or geography.

About RRFSS survey

Information here is presented from the Rapid Risk Factor Surveillance System (RRFSS). RRFSS is an on-going telephone survey occurring in participating public health units across Ontario. On a monthly basis, a random sample of approximately 100 adults aged 18 and older are interviewed regarding risk behaviours of importance to public health. The survey is conducted by the Institute for Social Research (ISR) at York University, on behalf of Region of Waterloo Public Health. For more information, please visit www.rrfss.on.ca.

Analyzed Questions (Total Weighted Sample = 1222)

- During the past 12 months have you used any artificial tanning equipment such as a tanning bed, sunlamp or tanning light for any reason including medical reasons?
- In the past 12 months how many times have you used artificial tanning equipment?
- In the past month how many times have you used artificial tanning equipment?
- I’m going to read you a list of reasons that people use tanning artificial tanning equipment. Please tell me if each of these is a very important, somewhat important or not a reason why you use artificial tanning equipment:
  - To treat a skin condition or other medical condition?
  - To tan without burning, to get a base tan, or to prepare for a vacation?
  - To look better, to look fit, to look healthy, or to improve your appearance?
  - Because a doctor recommended it?
To relax or feel better?
To boost your immune system?
To prevent cancer?
To increase vitamin D?

**Analyzed Indicators**
- Adult use of artificial tanning equipment in the past year (2008 n=1199, 2011 n=1220)
- Adult frequency of use of artificial tanning equipment in the last year (2008 n=101, 2011 n=69)
- Monthly frequency of use of artificial tanning equipment by adults who have used it in the last year (2008 n=101, 2011 n=69)
- Adults reasons for their use of artificial tanning equipment (2011 n=69)

**Important definitions and cautions:**
- All data were analyzed according to the RRFSS Manual of Operations. The superscript “E” denotes high sampling variability, and estimates must be interpreted with caution. The superscript “F” denotes unacceptable sampling variability, and estimates or conclusions based on these data will be unreliable and most likely invalid. The sample was weighted to reflect the number of adults in a household.
- A “module” in RRFSS is generally a self-contained group of questions on a specific public health topic. Generally, modules may be added or taken off the RRFSS every 4 month period (cycle) of the on-going survey system.
- Confidence intervals and coefficient of variation were calculated using unweighted sample sizes and weighted estimates.
- Tests of significance were performed and statistically significant differences were determined by p-value <0.05. The terms “significant” and “significance” indicates a statistically significant difference.
- The survey was only administered in English, using a random digit dialing methodology and represents the behaviours, attitudes, and beliefs of adults in Waterloo Region.
- Responses which include “don’t know” and “refused” are generally removed from analysis when they represent less than 5% of the sample.

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