BENEFITS OF A TOBACCO-FREE WORKPLACE

N.C. Tobacco Prevention & Control Branch

According to the U.S. Surgeon General, "the debate is over": Secondhand Smoke (SHS) is a Known Health Hazard

SHS causes premature death in adults and children who do not smoke. SHS kills an estimated 7,300 U..S. adult nonsmokers from lung cancer, 34,000 from heart disease, and 1,000 infants from sudden infant death syndrome each year.

The scientific evidence indicates that there is no risk-free level of exposure to SHS.

Many North Carolinians, both children and adults, are still exposed to SHS in their homes and workplaces, despite recent progress in tobacco control.

Eliminating indoor smoking fully protects nonsmokers from exposure to SHS. The American Society of Heating, Refrigeration, Air-conditioning Engineers (ASHRAE) "encourages elimination of smoking in the indoor environment as the optimal way to minimize (SHS) exposure."

The Centers for Disease Control and Prevention (CDC) has stated, "...all patients at risk of coronary heart disease or with known coronary artery disease should be advised to avoid all indoor environments that permit smoking."

Smoke-Free Policies Save Lives

A University of California, San Diego study shows that "California's 40 year-long tobacco control program has resulted in lung cancer rates that are nearly 25 percent lower than other states."

Smoke-Free Policies Can Create Positive Behavior Changes

Workplace smoking restrictions can lead to less smoking among employees. Smoking bans and restrictions in the workplace lead to reductions in daily consumption of cigarettes and increases the number of workers who quit tobacco. In New York State, adult smoking rates dropped 11% after a smoke-free law went into effect, accompanied by a media campaign and a tobacco cessation program.

Smoke-free policies can change the attitudes and behaviors of adolescents, preventing them from ever smoking.

NC DEPARTMENT OF HEALTH AND HUMAN SERVICES
Division of Public Health

State of North Carolina

Department of Health and Human Services • Division of Public Health

www.ncdhhs.gov • www.tobaccopreventionandcontrol.ncdhhs.gov

N.C. DHHS is an equal opportunity employer and provider.

Smoking and Secondhand Smoke are Costly

At current estimates, employees who smoke cost businesses approximately \$6,000 more per year than those who do not smoke.

After the Smoke-Free Restaurants and Bars Law was implemented in North Carolina, the average number of weekly emergency department visits by North Carolinians having heart attacks dropped by 21%. This saved an estimated \$3.3 to \$4.8 million in annual healthcare costs.

Public Opinion Supports Smoke-Free Workplaces

The State Employee's Association of North Carolina voted to support a smoke-free state government workplace.

Nationally, over 80% of adult respondents report they believe that SHS is harmful and that nonsmokers should be protected in their workplaces.

81% of North Carolinians support the Smoke Free Restaurants and Bars Law, making it quite popular. 74% would be in favor of expanding the ban to all areas indoors in which the public was invited.

References:

US Centers for Disease Control and Prevention. Smoking and Tobacco Use: Fact Sheets. Revised November 2014. Accessed July 2015. http://www.cdc.gov/tobacco/data_statistics/fact_sheets/secondhand_smoke/health_effects/

U.S. Department of Health and Human Services. The Health Consequences of Involuntary Exposure to Tobacco Smoke: A Report of the Surgeon General—Executive Summary. U.S. Department of Health and Human Services, Centers for Disease Control and Prevention, Coordinating Center for Health Promotion, National Center for Chronic Disease Prevention and Health Promotion, Office on Smoking and Health, 2006: http://www.surgeongeneral.gov/library/secondhandsmoke/report/executivesummary.pdf

American Society of Heating, Refrigerating, and Air Conditioning Engineers. Environmental Tobacco Smoke: Position Document. Atlanta, Georgia: 2005 [cited 2006 Oct 23].

Pechacek, TF and Babb, S How acute and reversible are the cardiovascular risks of secondhand smoke? BMJ. 2004

Apr 24: 328(7446):980-3.

University of California San Diego Healthy System. California's Leadership in Tobacco Control Results in Lower Lung Cancer Rate. Accessed January 12, 2011. http://health.ucsd.edu/news/2010/Pages/9-28-tobacoo-control-results.aspx

Centers for Disease Control and Prevention, Office on Smoking and Health. Fact Sheet: Smoke Free Policies Reduce Smoking. October, 2006.

http://www.cdc.gov/tobacco/data_statistics/fact_sheets/secondhand_smoke/protection/reduce_smoking/

Berman M, Crane R, Seiber E, Munur M (2013) Estimating the cost of a smoking employee. Tob Control doi: 10.1136/tobaccocontrol-2012-050888

Herndon S, Martin J, Patel T, Staples AH, Swetlick J. The impact of smoke-free legislation on population health in North Carolina. NC Med J. 2014; 75(6):422-428 http://www.ncmedicaljournal.com/content/75/6/422.full.pdf

Centers for Disease Control and Prevention. National Health Interview Survey. 2000. http://ftp.cdc.gov/pub/Health Statistics/NCHS/Dataset Documentation/NHIS/2000/srvydesc.pdf

Elon University Poll: Elon Poll: April 20th- April 24th, 2015. http://www.elon.edu/docs/e-web/elonpoll/042815_ElonPollSummary.pdf