

Ottawa-Carleton Council on Smoking and Health

The Ottawa-Carleton Council on Smoking and Health (OCCSH) is a coalition of dedicated individuals, community organizations, and local health groups that have been working on tobacco issues since 1978. The OCCSH is one of the oldest councils on smoking and health in Canada.

Our members include the following organizations:

- Academy of Medicine —Ottawa
- Allergy and Environmental Health Association (Ottawa Chapter)
- Canadian Cancer Society, Carleton Unit
- Cancer Care Ontario Eastern Region
- Centre for Addiction and Mental Health
- City of Ottawa, Public Health
- Heart and Stroke Foundation of Ontario
- McDougall Barber Shop
- Regional Heart Beat Committee
- Somerset West Community Health Centre
- The Lung Association—Ottawa-Carleton Region
- The Ottawa School of Homeopathy
- The University of Ottawa Heart Institute

Our goals encompass prevention, cessation, protection, and the denormalization of tobacco use:

- to prevent youth from starting to smoke;
- to encourage smokers to quit;
- to create a social environment where non-smoking is the norm; and
- to assist in establishing smoke-free environments.

All of our goals are furthered by the implementation of smoke-free public places and workplaces legislation.

Smoke-Free Ottawa: Your Way Is Clear To Clear the Air

The Ottawa-Carleton Council on Smoking and Health fully supports the bylaws that would prohibit smoking in all public places and workplaces as passed by the Committee on Health, Recreation, and Social Services on April 6, 2001. We applaud the Committee for amending the proposed bylaw to include taxis and support the proposal to extend the coverage to limousines as well.

A substantial body of research on the impact of smoking bans, experience in many other municipalities, and the extent of public support all lead to only one conclusion—City Council must pass the bylaw with no delays and no exemptions.

Why Legislate Smoke-Free Public Places and Workplaces?

The health case for banning smoking in public places and workplaces is irrefutable. It is based on an enormous body of evidence endorsed by the world's leading scientific authorities.

- Exposure to second-hand smoke is the third leading cause of preventable death in Canada, responsible for the death of over 3000 Canadians every year, primarily from lung cancer and cardiovascular diseases.
- Exposure to second-hand smoke is a major cause of respiratory illnesses and loss of quality of life for adults from such conditions as asthma, pneumonia, bronchitis, and emphysema.¹
- Children exposed to second-hand smoke are at much higher risk of many illnesses, including colds; ear infections; lower respiratory track infections; and chronic illnesses like asthma.²
- Bar and tavern employees have higher rates of lung cancer than almost all other occupations, including fire fighters and miners. Research shows, however, that respiratory health and lung function improves among both non-smoking and smoking bartenders shortly after the implementation of a smoking ban in bars.³
- Smoking bans influence smokers to smoke less and to quit. Internal research conducted by a tobacco company found that smokers faced with workplace smoking bans increase at a rate

- that is 84% higher than average and reduce their tobacco consumption by 11-15%.⁴ Using data from two large-scale national surveys, another study found that workplace bans reduce smoking prevalence by five percentage points and decrease daily consumption among smokers by 10%.⁵
- A significant, but difficult to quantify, impact of bans on smoking in public places is that they help to denormalize tobacco use. The less youth are exposed to smoking among adult role models, the less likely they are to believe that “everyone” smokes—an important factor in reducing smoking uptake among youth.⁶

Do Ottawa Residents Support the Proposed Smoking Ban?

Yes! Public support in Ottawa for smoke-free public places and workplaces is very strong and has grown substantially in recent years. Experience in other communities shows that support for smoking bans *increases* after implementation, among non-smokers and smokers!

- 74% of Ottawa residents polled in the fall of 2000 support a 100% smoke-free bylaw (up from 69% in 1999).⁷
- When asked about the effect of a smoking ban on their patronage of hospitality establishments, a majority of respondents said they would frequent these places more often because of a smoking ban:
 - 60% would frequent restaurants more often vs. 13% less often;
 - 53% would frequent pubs more often vs. 13% less often.⁸
- About 77% of visitors to the “smokefreeottawa” website “voted” in favour of the proposed ban, more than three times the number of opponents. The volume of comments submitted via email in support of the ban (over 1000 positive messages), and the heartfelt emotion behind them, has been overwhelming.
- About 6,000 citizens from all wards submitted postcards to Mayor Chiarelli voicing their strong support for the proposed ban on smoking in public places and workplaces.

Does Business Suffer Economic Harm From Smoking Bans?

No! All research conducted independent of the tobacco industry has concluded that there is no evidence that the hospitality sector suffers economic losses from smoking bans.

- The BC Workers’ Compensation Board conducted a thorough Regulatory Impact Analysis in preparation for the reintroduction of a province-wide ban on smoking in all workplaces. A review of short-term, provincial and regional impacts and long-term impacts of extending the second-hand smoke requirements to the hospitality sector was conducted and reached the following conclusions:

- A statistically significant, short-term, negative impact of 12% occurred in the hospitality sector for the first month, but by the second month the decline in sales was not statistically significant.
- A review of the impact of the smoking ban on the BC Capital Region District (implemented on 1 January 1999), as well as studies on other jurisdictions, gives an indication of the longer-term impacts of smoking bans. The review concludes that “. . . there would be no longer-term effects from instituting the proposed amendment.”
- Numerous studies, by Hyland, Glantz, and others, based on the proportion of restaurant sales to total retail sales in each region, show unequivocally that smoking bans have no negative impact on the proportion of consumer spending in restaurants.⁹
- A national study by the Conference Board of Canada found that “The case study and the validation survey do not support the fear that going smoke-free would be detrimental overall for business. . . . The experience of going smoke-free was a positive one for a majority of restaurants examined in this study.”¹⁰
- Smoking bans bring important corollary benefits to businesses that enhance their bottom line:¹¹
 - reduced employee absenteeism;
 - reduced insurance costs;
 - reduced cleaning and maintenance costs;
 - increased customer turnover.
- Basic logic indicates that bars and restaurants will not lose business from going smoke-free since only 22% of Ottawa’s adult population smokes. *Many* of these potential customers stay home rather than patronize smoky establishments.

Why Not Permit Designated Smoking Rooms?

No ventilation system exists that is capable of reducing exposure to the many toxic chemicals in second-hand smoke to an acceptable level.

- The *Ontario Occupational Health and Safety Act* has identified 15 substances that have no safe level of exposure—6 of these chemicals are found in tobacco smoke.¹²
- The acceptable risk level for lung cancer and heart disease from second-hand smoke exposure is greatly exceeded under conditions of ideal dilution and ideal displacement ventilation.¹³
 - Under conditions of ideal dilution ventilation (type used in most hospitality establishments), second-hand smoke risk levels for lung cancer and heart disease combined are 15,000-25,000 times the “acceptable risk” level for federally regulated hazardous air pollutants in the U.S.
 - Under conditions of ideal displacement ventilation (a promising new but unproven technology), the second-hand smoke risk levels for lung cancer and heart disease combined would still be 1,500-2,500 times the acceptable risk level for federally regulated hazardous air pollutants in the U.S.

- Using current indoor air quality standards, the ventilation rate would have to be increased more than 1000-fold—the equivalent of tornado-like levels of air flow—to reduce the cancer risk from second-hand smoke to an acceptable level.¹⁴
 - The ventilation rate recommended by ASHRAE (the American Society of Heating, Refrigerating, and Ventilating Engineers, the North American authority on ventilation) for offices and restaurants is 10 litres per second per occupant.
 - The ventilation rate needed to achieve an acceptable risk level for second-hand smoke exposure is 50,000 litres per second per occupant.
- Even if children are not permitted in DSRs, the health of the employees who must service those rooms is put in real jeopardy. Non-smoking food service workers are 50% more likely to develop lung cancer than other non-smokers.¹⁵ Employees should not have to sacrifice their health for a pay cheque!
- Designated smoking rooms should not be permitted in seniors residences since many seniors have breathing problems and even the opening and closing of the door to a common room would expose them to second-hand smoke. Smoke-free common rooms would give all seniors equal access to the facilities in their residence.
- Seniors in seniors' homes would still be allowed to smoke in their rooms, so requiring common areas to be smoke-free would not impose any hardship on those who smoke.

Why Not Restrict The Smoking Ban To Places Frequented By Children?

- The prohibition on smoking in public places must apply equally to all establishments to avoid the eventual unravelling of the bylaw. If gaming establishments are granted an exemption or phase-in, then bars will demand equal treatment. If bars are granted any sort of exemption, restaurants will object to the lack of a level playing field. To avoid the “slippery slope” and to maximize the effectiveness of the bylaw, all hospitality establishments must be required to follow the same rules.
- Enforcement is also greatly facilitated if all establishments follow the same rules.
 - The definition of what constitutes a “bar” versus a “pub” versus a “restaurant” does not become an issue.
 - There is no public confusion about the rules.
- The employees of bars, bingo halls, and other establishments in which children are not permitted deserve the same level of health protection in the workplace as office workers.
- Regardless of whether or not they smoke, the health of bar and bingo hall employees is compromised by exposure to second-hand smoke, particularly given the length of exposure and the very high concentrations these employees have to endure.

Shouldn't adults be able to choose whether or not to smoke and whether or not to be exposed to second-hand smoke?

- The bylaw does not deny anyone the right to choose to smoke. However, people do not have the right to harm the health of others by their use of tobacco. This bylaw protects the public and workers from involuntary exposure.
- As a society, we do not force workers in any other industry on any other health issue to choose whether or not to endure serious preventable risks to health and safety in order to earn a pay cheque. Employers have a responsibility under the law to provide a safe workplace. Second-hand smoke has been declared a “Class A” carcinogen—a toxin for which there is no safe level of exposure—and as such is clearly a hazardous workplace pollutant.

Shouldn't bars and restaurants that are adversely affected be compensated or the bylaw rescinded?

- There is NO evidence that the hospitality sector will be adversely affected!
- Employers have a responsibility under the law to provide safe workplaces. Governments do not compensate workplaces that deal with hazardous substances for the costs they incur to keep their employees safe. Nor do governments compensate workplaces for the costs they incur in complying with basic health and safety requirements, such as the many sanitation regulations imposed on restaurants. The regulation of second-hand smoke should not be treated any differently from the regulation of any other hazardous workplaces substance.

Why not give more time for public education, for ventilation technologies to be improved, for bar owners to educate their customers?

- A delay means no protection for health as long as the delay is in effect. People will continue to get sick and die from unnecessary exposure to second-hand smoke.
- The public has already been educated—that's why three-quarters of Ottawa residents support the smoke-free bylaw.
- Bars and restaurants have had lots of time to prepare for the smoking ban and yet they have done nothing but continue to oppose its implementation. They have been aware for years that a total smoking ban was inevitable, as this city and many others (as well as other levels of government) have passed increasingly restrictive laws over the past 20 years to protect people from second-hand smoke exposure.

Why not just let the market fill the demand for non-smoking establishments?

- Under no other circumstances does government let businesses that are motivated by profit decide whether or not to offer health protection to their employees and patrons.

- In other important health and safety matters—pollution controls, food preparation—government mandates the behaviour of business, regardless of whether or not compliance affects their bottom line.
- Even if the public could make the choice to frequent only non-smoking establishments, the workers in the smoking establishments and the children who must accompany their parents would not have that choice and their health would still be at serious risk.

What about bingo halls and the charities that may lose funding from loss of bingo revenues?

- It is true that a majority of bingo players smoke. It is equally true that there are many people who enjoy playing bingo but don't go to bingo halls because they are too smoke-filled.
- It is also true that when the smoking section of a bingo hall is filled, bingo players who smoke will sit in the non-smoking section.
- In other jurisdictions where bingos have gone smoke-free, smoke breaks have simply been instituted so that people can go outside.
- People haven't stopped going to movie theatres, taking plane trips cross-country and around the world, or going to amateur or professional hockey or ball games because they can't smoke in these places. They won't stop going to bingos either.
- Bingos may suffer revenue losses, and charities may lose funding as a result. But there are other solutions to the problems of charity revenue losses that *don't require public health to be compromised!* The OCCSH recommends that Council consider waiving bingo licensing fees for one year, as was done in the City of Waterloo.
- The mandate of many of the charities supported by bingo revenues is to improve health and well-being. This bylaw will go a long way to improving the health of virtually all the citizens of Ottawa.

Can smoking bans in public places really be enforced?

- Absolutely! Smoking is not permitted in public places in four U.S. states. In California, for example, there has been no smoking in restaurants since 1995 and in bars since 1998. Over 50 Canadian municipalities have banned smoking in restaurants and more than 38 have prohibited smoking in bars.
- There are a great number of success stories, many more than the few isolated failures. It is unfortunate that the media chooses to focus only on the failures.
- The enforcement plan for the City of Ottawa does not repeat the mistakes others have made:
 - the bylaw proposal has been well-publicized and the public and business sector have been thoroughly consulted;

- implementation begins in the summer;
- ashtrays are not permitted by law;
- a public and business education campaign precedes enactment of the bylaw;
- proprietors are responsible for ensuring compliance in their establishments;
- there is a level playing field among all classes of establishment.

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