

MEASURING SUSTAINABLE DEVELOPMENT

APPLICATION OF THE GENUINE PROGRESS INDEX TO NOVA SCOTIA

**THE ECONOMIC IMPACT OF SMOKE-
FREE WORKPLACES:**

AN ASSESSMENT FOR NOVA SCOTIA

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EXECUTIVE SUMMARY

Exposure to Second-Hand Smoke is a Serious Health Risk

- There is a consensus among the most reputable scientific and medical academies and government agencies on the serious health hazards of second-hand smoke or environmental tobacco smoke (ETS).

Exposure to second-hand smoke causes heart disease, lung cancer, nasal sinus cancer and respiratory ailments in adults, and it causes sudden infant death syndrome, fetal growth impairment and a wide range of respiratory conditions in infants and children, including bronchitis, pneumonia, middle ear disease and asthma exacerbation. ETS exposure causes about 200 deaths per year in Nova Scotia and is the leading cause of workplace death. More recent research has linked ETS exposure to cervical and breast cancer, stroke, and miscarriages in adults; and to asthma induction, decreased lung function, cystic fibrosis, and cognition and behaviour problems in children.

- Restaurant, bar and casino workers are particularly at risk from workplace exposure to second-hand smoke. In restaurants, second-hand smoke levels are twice as high as in other workplaces that do not have smoking restrictions. In bars and casinos they are 3-6 times as high. Food service workers have a 50% higher rate of lung cancer than the general population.

Excess mortality for workers in smoking lounges, bars, restaurants, casinos and bowling alleys is 15-26 times higher than OSHA's "significant risk" level.

- Smoke-free workplace legislation would reduce ETS exposure among Nova Scotians by 80%, cut cigarette consumption among smokers by 20%, and save Nova Scotia an estimated \$200 million a year in avoided health care costs (\$50 million) and productivity losses (\$150 million).

Ventilation Does Not Remove Toxins or Prevent ETS Exposure

- Expert assessments, empirical evidence, risk assessment procedures, and internationally accepted indoor air quality and ventilation standards have determined that ventilation and non-smoking sections do **not** remove the toxic constituents of tobacco smoke from the air and provide no solution to the problem of exposure to second-hand smoke.

Instead, the recommendations of expert scientific panels on ETS exposure are "*clear, consistent and unanimous – all involuntary exposure is harmful and should be eliminated.*"¹ The U.S. Surgeon-General has called for "*100% smoke-free environments in all public areas and workplaces, including all restaurants and bars.*"²

Smoke-free Policy Has No Adverse Impact on Business and May be Good for Business

- Without exception, every objective study using official sales tax data demonstrates that smoke-free legislation has no adverse impact on restaurant, bar, hotel and tourism receipts. Two studies find an initial decline in receipts in the first 1-2 months following enactment, but no evidence of any overall or aggregate decline in the longer term. Indeed, several studies find that restaurant, bar, hotel and tourism receipts increase following smoke-free legislation, indicating that it may be good for business as non-smokers frequent eating and drinking establishments more often and smokers adjust to the new rules.
- Given the consistency of the evidence, the enormous and costly toll of second-hand smoke exposure, the economic benefits of smoke-free workplace legislation, and the demonstrated lack of any adverse impact on business, there is a clear case for such legislation in Nova Scotia. This is particularly true in light of the growing body of legal precedent indicating that governments and employers are bound by law to ensure safe working environments for employees and to remove known health hazards from the workplace.

Tobacco Industry Arguments Have Been Proven False

- Past obstacles to smoke-free workplace legislation can only be understood by reference to tobacco industry resistance and opposition. Tobacco industry documents reveal extensive industry efforts to prevent public smoking restrictions by denying the overwhelming evidence on the health hazards of second-hand smoke and working through and funding arms-length third parties to lobby against smoke-free legislation.
- Industry claims of declining revenues after implementation of smoking bans, when checked against objective sales tax receipts, have always been proven false.
- Active involvement by the health community has been shown to be the most determining element in ensuring the successful passage of smoke-free legislation in other jurisdictions.