

FREQUENTLY ASKED QUESTIONS

1. **Why are my rights as a smoker not being respected?**



Everyone has the right to breathe air free of tobacco smoke. This is a health issue first and foremost. Tobacco smoke is a health hazard. No safe level exists of exposure to second-hand smoke. Whether people are out for pleasure or working in the hospitality industry, they should not be forced to breathe tobacco smoke.

2. **How will the smoke-free bylaw be enforced?**



Enforcement is the key to the successful implementation of a smoke free by law. Several actions will facilitate the enforcement of the bylaw. They include:

- ensuring that the duties of the proprietor are clearly stated in the bylaw
- implementing a period of education and warning prior to starting the enforcement.
- ensuring that the bylaw does not allow exemptions that would make it difficult to enforce, but rather puts establishments on a level playing field.

The first six months of enforcement are crucial. Hastings County along with its 14 member municipalities cover a wide geographic area and contains some 35,000 people. The Board of Health is already responsible for the enforcement of the Tobacco Control Act (TCA) and the Board has also approved one full-time by law enforcement officer. We are confident that with the cooperation of the County and municipalities we will be successful in enforcing the smoke free by law.

3. **Should bars be exempt from the smoke-free bylaw?**




It is crucial that we create a level playing field. This means that bars and restaurants must be treated the same.

Hospitality industry workers should be offered the same protection as workers in federal and provincial buildings who are already protected from second-hand smoke.

In bars, second-hand smoke levels are four to six times higher than offices where smoking is permitted. A non-smoking bartender smokes the equivalent of about 36 cigarettes during an eight-hour shift. Workers in the hospitality industry are three times more likely to develop lung cancer than the general population.

A survey on smoking in public places was conducted by the Health Unit in January 2001. It showed that 72% of respondents agreed a municipal bylaw to restrict smoking in public places should be enacted. Other findings showed 64% supported smoke-free restaurants and 44% of respondents supported smoke-free bars. Smoke-free bars and restaurants are healthier for customers and workers.


4. **Should bingo halls be exempt from the smoke-free bylaw?**

-  Bingo players are drawn to bingo halls by prizes not by smoking. Smokers go to movies and travel on trains and planes for the length of time or longer than a bingo session without smoking. Breaks allow players to go outside and smoke.


The returns produced by charity bingo have been cut by more than half province-wide in the last fifteen years. A study conducted in 2000 by the Registered Gaming Suppliers of Ontario Association and the Ontario Charitable Gaming Association concluded that competition from a variety of new gaming activities such as casinos, slots, internet gambling, instant win and lotteries is one of the reasons that has led to reduced profits for charities. As a result, there has been a significant reduction in the number of players, and hence revenue. Charity bingo across the province has seen significant decline in revenue well before the smoke-free bylaws became an issue.

The survey on smoking in public places conducted by the Health Unit in January of 2001 found that 56% of respondents supported smoke-free bingo halls. The potential for gaining new customers and new volunteers to a smoke-free bingo exists, as many people avoid smoke-filled spaces.


5. **Should private clubs be exempt from the by-law?**

-  No. Exemptions for private clubs would create an unlevel playing field in relation to restaurants and bars. The public should receive the same protection from smoke in private clubs.

6. **Don't governments profit from cigarette taxes?**

-  Tobacco use is now estimated to cost the Ontario health care system \$1.1 billion each year, with an additional \$2.6 billion being lost annually in the province through lost income and lost productivity. Compared to the approximately \$370 million the provincial government received in revenue from the sale of tobacco, the costs of smoking greatly outweigh the revenue received.

7. **Why are designated smoking rooms and ventilation systems not recommended?**

-  Designated smoking rooms are expensive to build and maintain. They create an unlevel playing field, giving an advantage to larger establishments. Designated smoking rooms do not protect staff who must serve customers in these rooms. The American Society of Heating, Refrigeration and Air-Conditioning Engineers (ASHRAE) is the world's leading ventilation standard-setting organization. ASHRAE has concluded that no ventilation technology currently exists to effectively reduce tobacco smoke to levels that would provide adequate public health protection. The only way to eliminate second-hand smoke from indoor air is to remove the source.

8. **What are the health effects of SMOKING and how does it impact my community?**



Smoking is the leading cause of preventable illness and premature death in Canada. Smoking kills three times more Canadians than car accidents, suicides, drug abuse, murder and AIDS combined. Tobacco use is responsible for 25% of all fatal cancers. Smoking is the main cause of lung cancer, accounting for at least 80% of all new cases. Smokers have a 70% greater chance of dying from heart disease and a 50% greater risk of stroke than non-smokers.

Smoking is a leading cause of death and disability in Hastings & Prince Edward Counties. Every year more than 225 of our family members, friends and neighbours are dying from smoking related lung, heart and respiratory disease and cancer.

9. **What are the health effects of SECOND-HAND SMOKE and how does it impact my community?**



The evidence of harmful health effects of second-hand smoke is overwhelming. Second-hand smoke exposure is the third leading preventable cause of death in Canada, after smoking and alcohol use. The estimates for the number of deaths due to second-hand smoke exposure range as high as 7,800 per year in Canada. Based on that estimate, as many as 53 non-smokers in Hastings & Prince Edward Counties may die from breathing second-hand smoke every year. Many more suffer from illness and disease.

In adults, second-hand smoke has been found to cause heart disease, lung cancer and nasal sinus cancer. It has also been linked to other diseases such as stroke, breast cancer and cervical cancer. Exposure to second-hand smoke has been associated with miscarriages among pregnant women, as well as an increased rate of low birth weight babies.

In children, exposure to second-hand smoke has been found to cause Sudden Infant Death Syndrome (SIDS), bronchitis, middle ear disease and respiratory symptoms, such as asthma.

10. **Is there an economic impact on bars after smoke-free bylaw is implemented?**



Few independent, reliable studies have been conducted to date on the economic impact of smoke-free bylaws on bars alone. Reliable studies must use sales tax data to verify the businesses' actual income. The consulting firm KPMG conducted an Economic Impact Analysis of the City of Ottawa's no smoking bylaw and published its results in November 2002. The Study found that "...in the over-all economic context, the food and beverage industry appears to be stronger than one would expect. This suggests the smoke free bylaw has had little or no negative impact on the industry as a whole."

References

- Bourns, B., and Malcomson, A. (December 2001). "Economic impact analysis of the no-smoking by-law on the hospitality industry in Ottawa". KPMG Chartered Accountants, Ottawa, Ontario.
- Cancer Care Ontario (2000). "Ontario's Cancer Prevention Blueprint: An Ounce of Prevention." Toronto, Ontario
- Colman, Ronald. (September 2001). "The economic impact of smoke-free workplaces: an assessment for Nova Scotia." GPI Atlantic, Nova Scotia.
- Health Canada. (Accessed April 2002). "The Facts About Tobacco."
<http://www.hc-sc.gc.ca/hecs-secs/tobacco/facts/index.html>
- Johnson, K., Hu, J., and Mae, Y. (2001). "Lifetime residential and workplace exposure to environmental tobacco smoke and lung cancer in never smoking women, Canada 1994-1997". *International Journal of Cancer*: 93, 902-906.
- Kirkland, Doug. (April 2002). Personal communication, City of Ottawa.
- Kirkpatrick, Kent. (February 28, 2002). "Ontario's declining charitable bingo revenues: a four-point action plan for Ottawa". Corporate Services and Economic Development Committee and Council, Ottawa, Ontario.
- Lukits, Ann. (February 9, 2002). "Smoking will be banned in Kingston: councillor." Kingston Whig-Standard, Kingston, Ontario.
- Ontario Tobacco Research Unit. (May 2001). "Protection from second-hand tobacco smoke in Ontario: A review of the evidence regarding best practices". Toronto, Ontario.
- Physicians for a Smoke-Free Canada. (2001). "Clearing the Air." Physicians for a Smoke-Free Canada, Ottawa, Ontario.
- Picard, A. (July 12, 2001). "Second-hand smoke can triple lung cancer risk". Globe and Mail, Toronto, Ontario.
- Repace, Lowrey. (1992). "Issues and answers concerning passive smoking in the workplace: rebutting tobacco industry arguments." *Tobacco Control*, pp. 208-219.
- Restaurant smoking bans and their economic impact: published research and related articles. (September 2001). 58 research studies included.
- Roswell Park Cancer Institute. (April 17, 2000). Buffalo, New York.
- Schabas, Richard, Chief Medical Officer of Health. (1996). "Tobacco: sounding the alarm". Queen's Printer of Ontario, Toronto, Ontario.

Siegel, Michael. (1993). "Involuntary smoking in the restaurant workplace: a review of employee exposure and health effects." *Journal of the American Medical Association*, 270(4), July 28, 1993; Trout, D, op. cit.; Eisner (1998), op. cit.

Simcoe County District Health Unit. (1999). "100% Smoke-Free Simcoe County." Barrie, Ontario.

Single, Eric, Robson, Lynda et al. (1996). "The cost of substance abuse in Canada." Canadian Centre on Substance Abuse, Toronto, Ontario.

Yessiss, Jennifer. (April 2001). "Survey on smoking in public places." Smaller World Communications, Richmond Hill, Ontario.

Yessiss, Jennifer. (June 2001). "Survey on smoking in public places after a media campaign." Smaller World Communications, Richmond Hill, Ontario.