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Smoking Cessation and the Workplace

Profile of Tobacco Smokers and Workplace Smoking Cessation Policies and Programs

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Outline

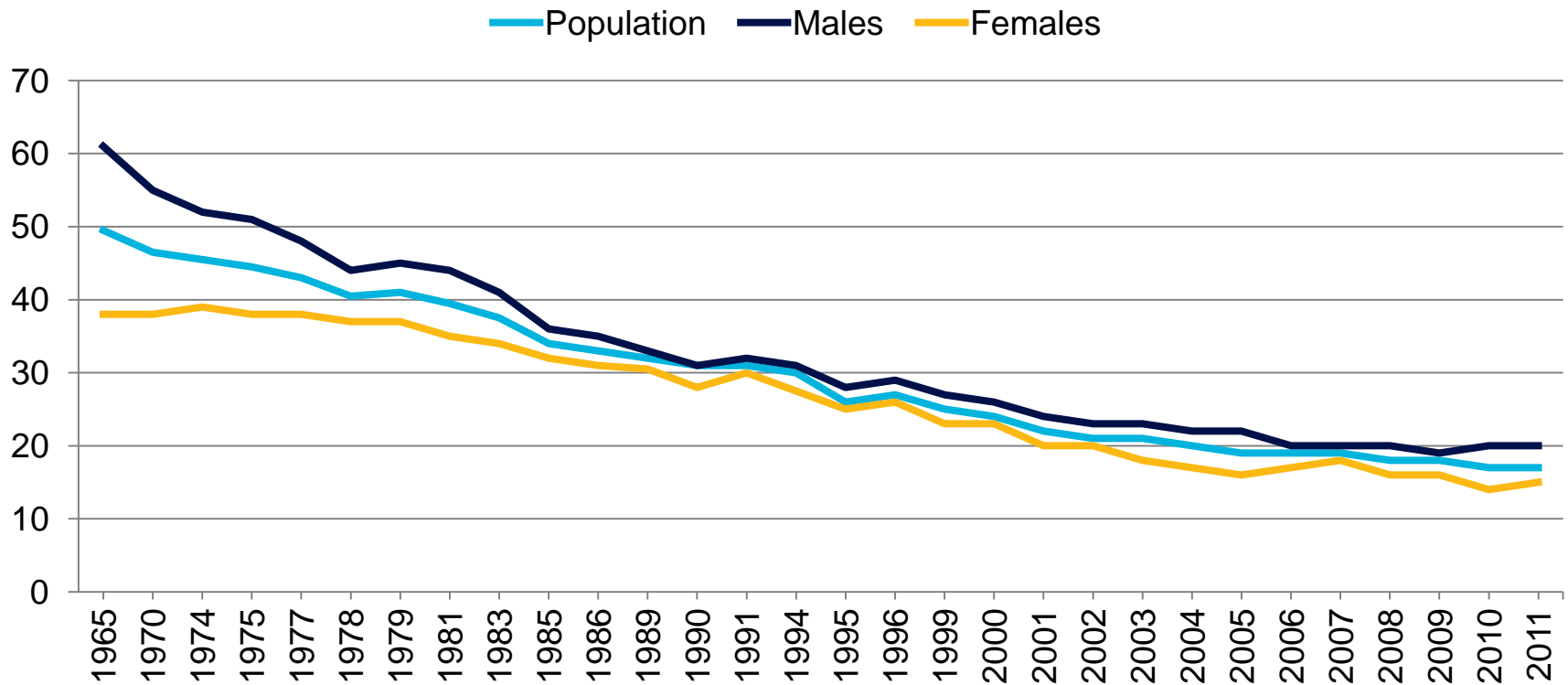
- Profile of Tobacco Smokers
- Evidence-Based Smoking Cessation Strategies
- Smoking Cessation Policies and Programs in Canadian Workplaces
- Recommendations for Employer Action



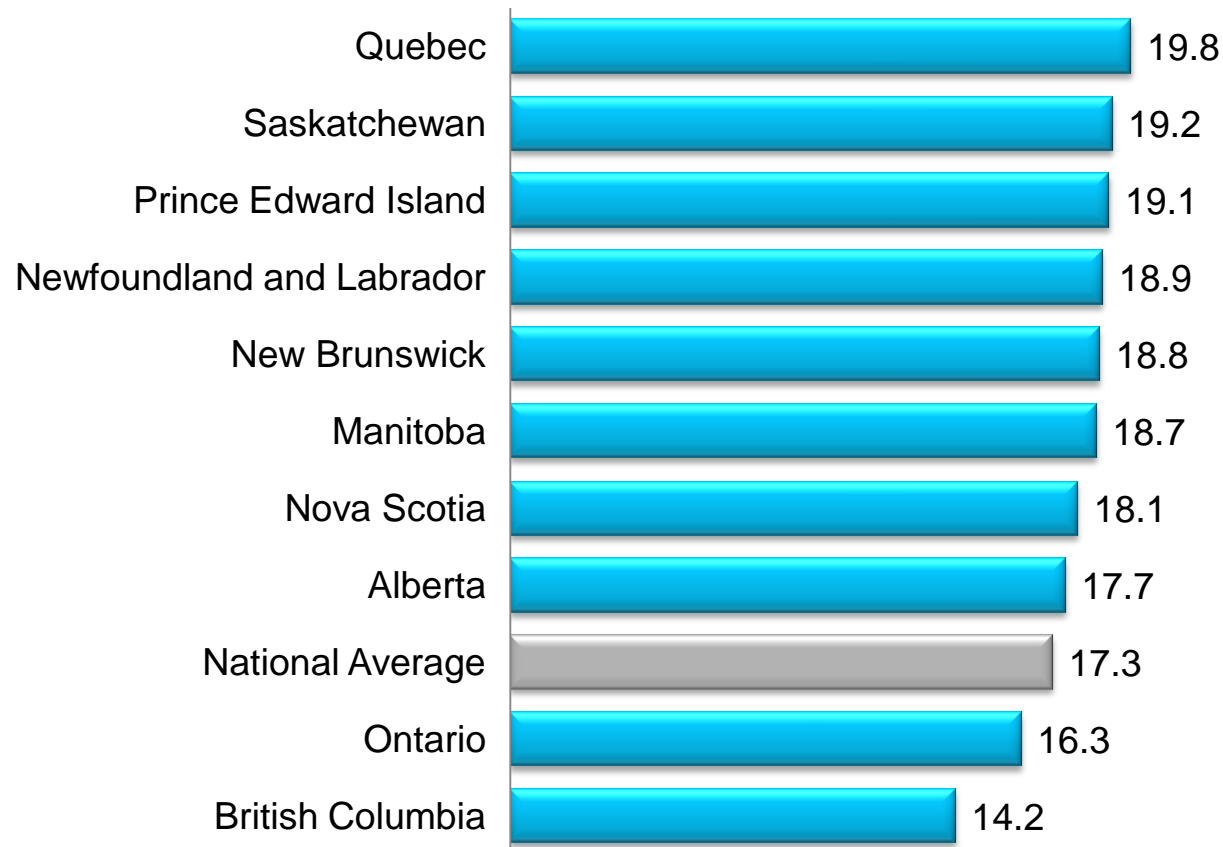
Profile of Tobacco Smokers

Significant decline in smoking rates

- From 50 per cent in 1965 to 17.3 per cent in 2011



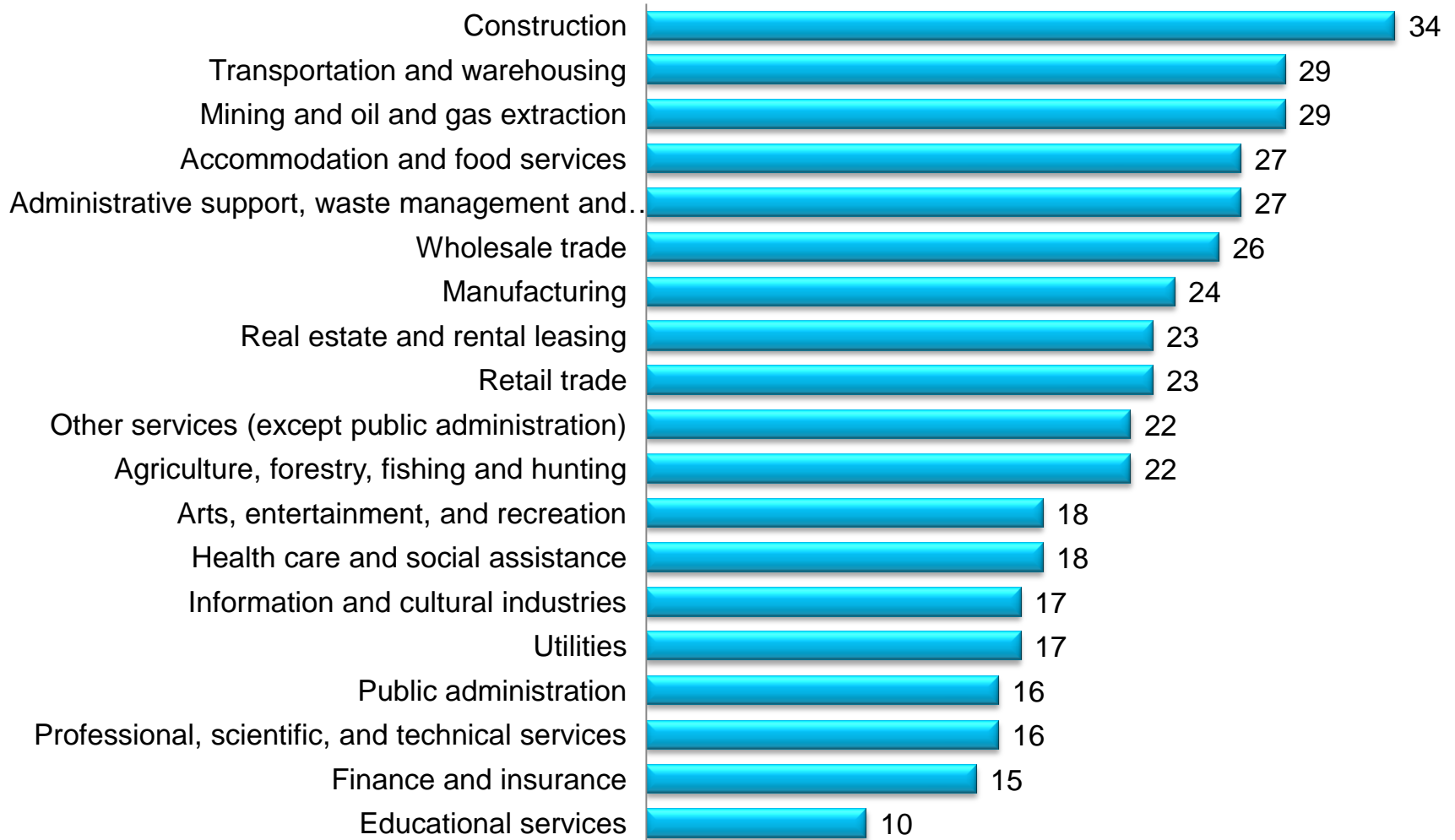
Smoking Prevalence by Province



Source: Statistics Canada, CCHS (2011)



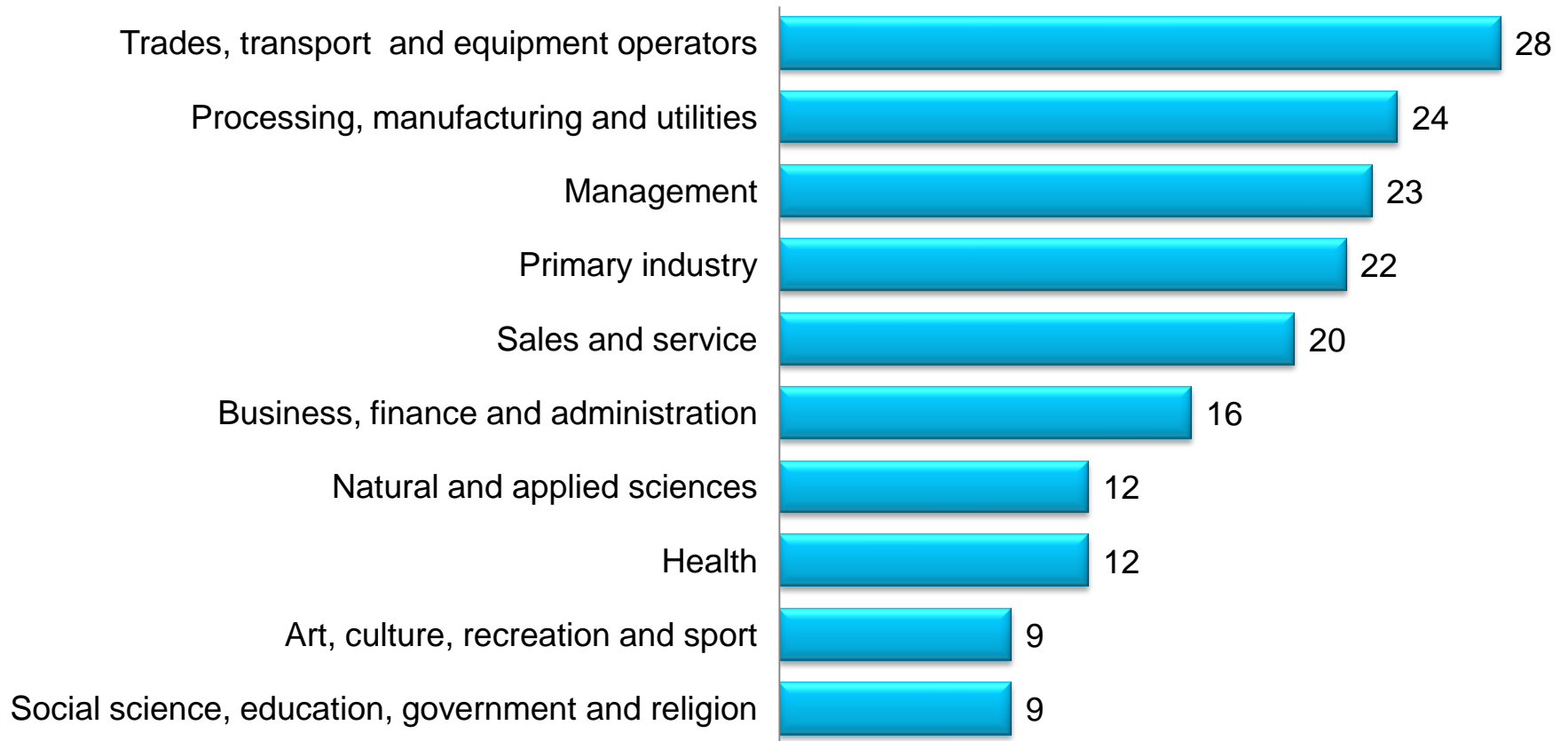
Smoking Prevalence by Industry



Source: Statistics Canada, CCHS (2011)



Smoking by Occupation



Source: Statistics Canada, CCHS (2011)



Evidence-Based Tobacco Cessation Strategies



- The majority of smokers in Canada are considering quitting.
- Smokers who use medication are more likely to succeed in their quit attempts.
- Combining behavioural support and medication increases the chance of successfully quitting by 70 to 100 per cent.
- However, more than half of Canadians who attempted to quit in the past two years, have not used any smoking cessation aids.





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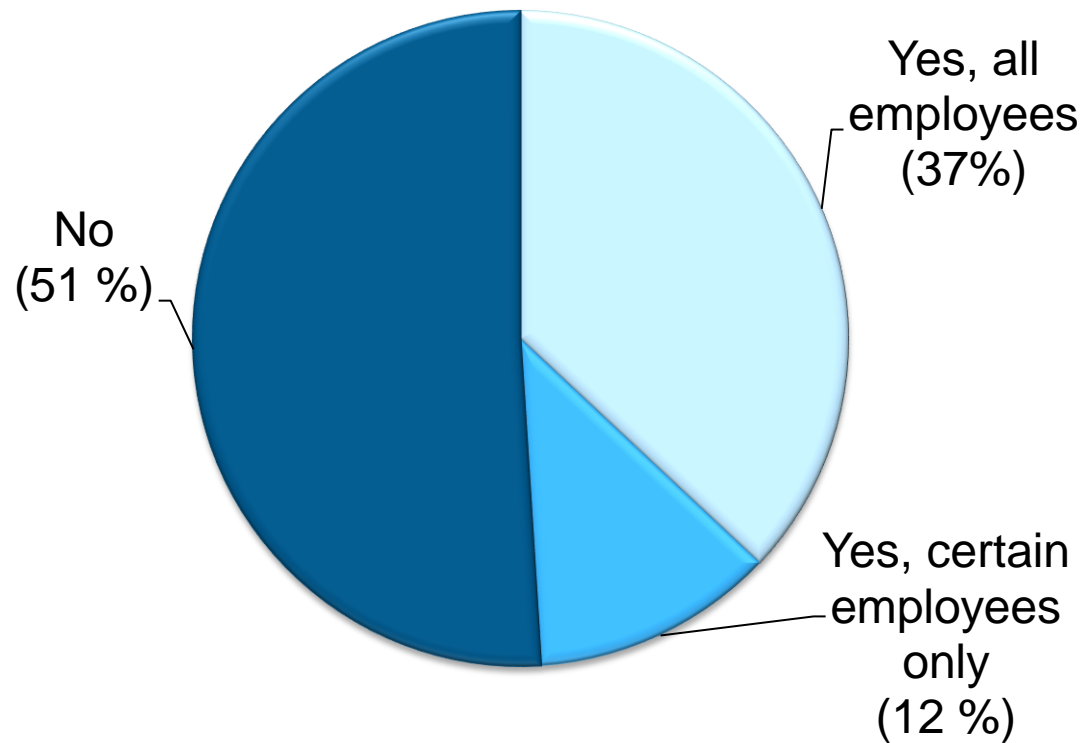
Smoking Cessation Policies and Programs in Canadian Workplaces

Role of Health Risk Assessments

- Helps to determine health risk factors within your organization.
- Identifies smoking habits and willingness to quit.
- Assess whether smoking cessation program is needed.



Use of Health Risk Assessments



Source: The Conference Board of Canada.



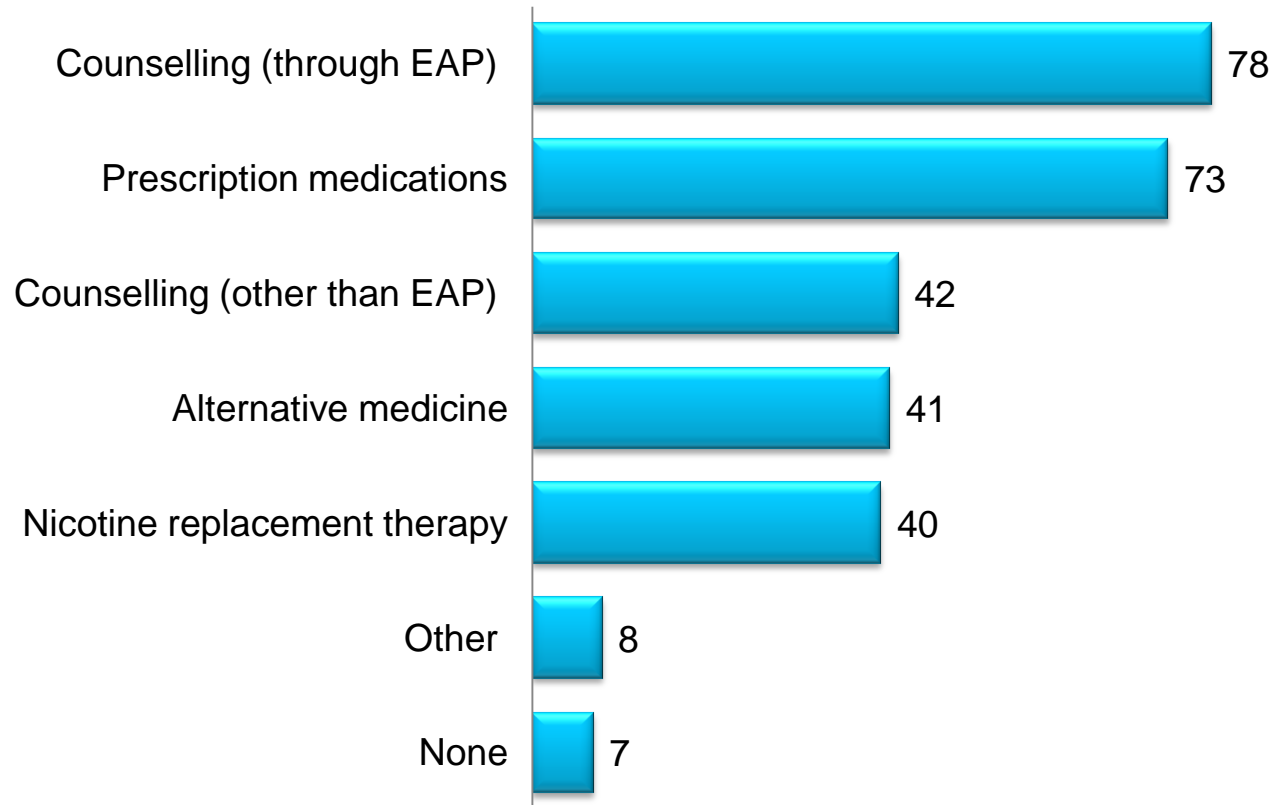
Workplace Smoking Restrictions

	% of workplaces where smoking is not permitted
Inside any building	80
Company vehicles	61
Outside building entrances	55
Outside of designated smoking areas	53
Within a set distance outside the building	45
On job site(s) (e.g., construction, landscaping)	36
Other	4
No smoking is permitted on company property either inside or outside	19

Source: The Conference Board of Canada.



Smoking Aids and Services Covered



Source: The Conference Board of Canada.



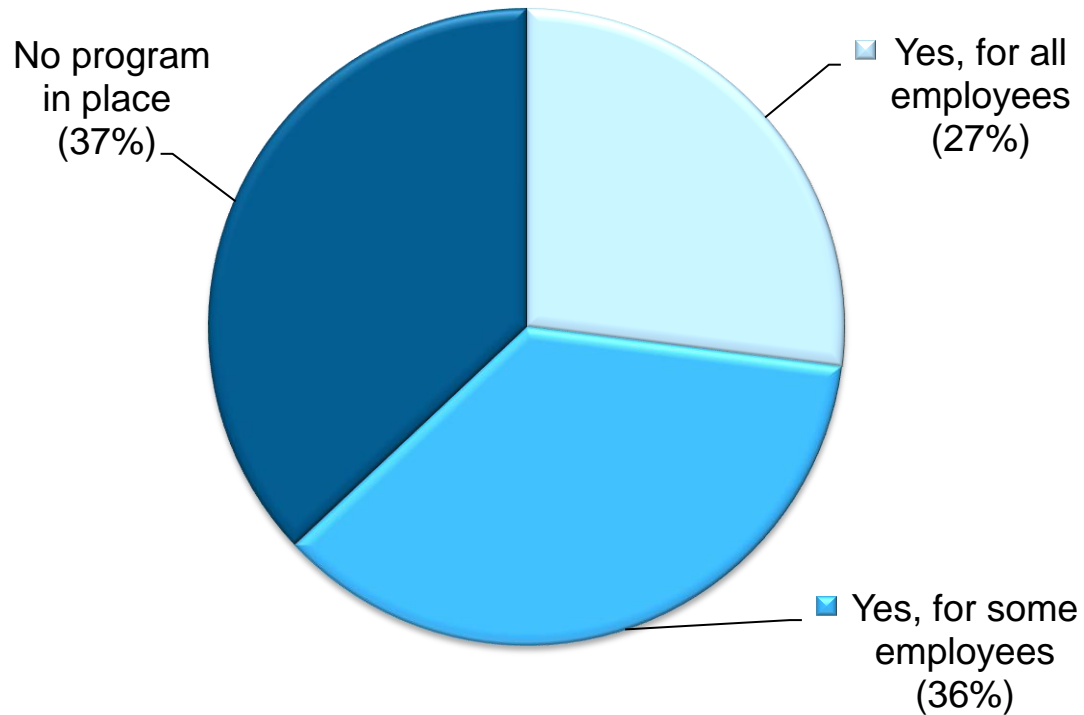
Yearly Reimbursement Maximums for Smoking Cessation Aids and Services

	Average
Nicotine replacement therapy (e.g., patches, gums, inhalers)	\$505
Alternative medicine (e.g., acupuncture, hypnosis)	\$554
Psychological sessions/counselling	\$701

Source: The Conference Board of Canada.



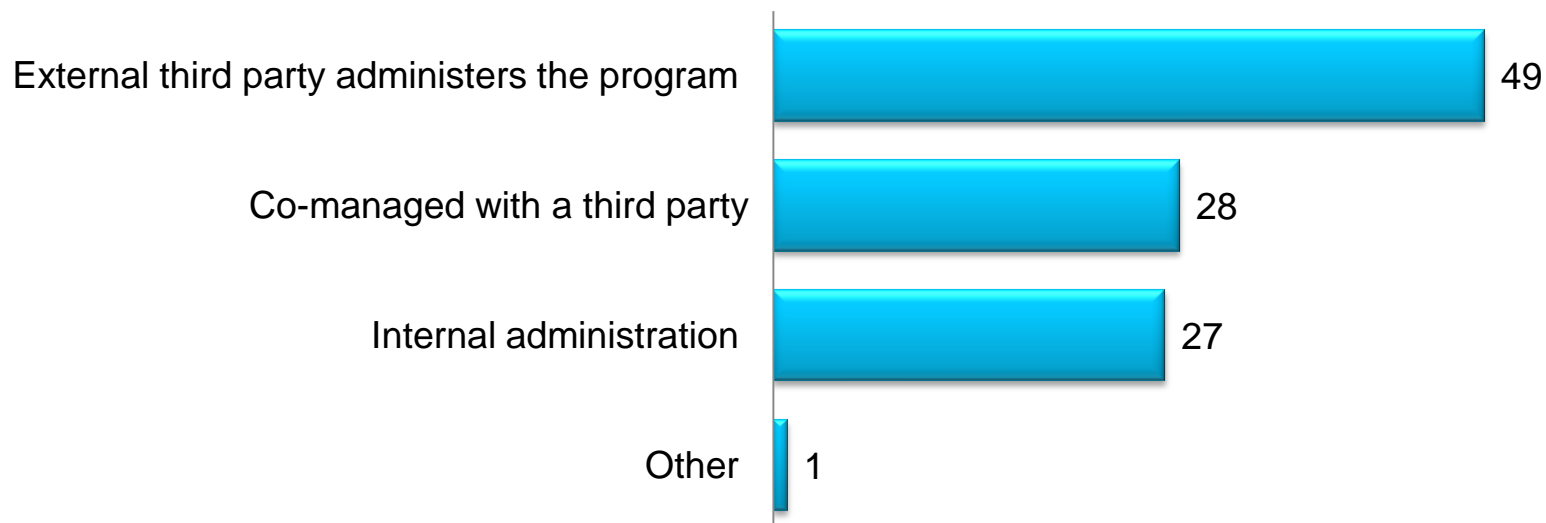
Smoking Cessation Programs



Source: The Conference Board of Canada.



Administration of Smoking Cessation Programs



Source: The Conference Board of Canada.



Smoking Cessation Program Providers

	% of employers using
EAP provider	91
Group benefits plan administrator	30
Wellness and health promotion provider	16
Local health authority or public health unit	13

Source: The Conference Board of Canada.



Smoking Cessation Programs

Top Five Ways to Communicate Program

1. Corporate intranet site
2. Health and wellness bulletin
3. Lunch and learn sessions
4. Pamphlets or bulletins from EAP provider
5. Flyers/posters on employee bulletin board



Smoking Cessation Programs



Self-Help Resources

- Canadian Cancer Society
- Heart & Stroke Foundation
- Health Canada
- Lung associations
- Telephone support lines
- Provincial government resources
- Community health centres/district health authorities



Smoking Cessation Programs

Use of Incentives



- 17 per cent of organizations provide incentives to encourage participation in the programs
- Examples include:
 - Cash incentives for employees who quit for at least one year
 - Extra sum of money in wellness account
 - Contests to win prizes (e.g., iPod, iPad)
 - Gift cards
 - Sessions offered during paid work time



Spending on Workplace Smoking Cessation Programs

\$6,265

average total **annual cost** of
workplace smoking cessation
program

Source: The Conference Board of Canada.



Cost of Smokers

\$4,256

estimated annual **cost** to
organizations **of an employee**
who smokes

Source: The Conference Board of Canada.



Methods for Evaluating Smoking Cessation Programs



Source: The Conference Board of Canada.



Barriers to Success

Financial and Human Resources

- Evaluation and making the business case
- Smoking competes with other health concerns for priority in wellness programming
- Coverage of smoking cessation aids and services
- Monitoring compliance with workplace smoking restrictions

Reaching Various Employee Groups

- Communicating programs
- Choosing right communication channels
- Motivating smokers
- Size and location of organization

Source: The Conference Board of Canada.



Monitoring and Evaluation

Strategies that Make Programs Successful

- Strong policies regarding smoking in the workplace
- Relationships with external partners
- Integrated wellness strategy
- Senior management support
- Targeted and regular communication
- On-site health care professionals (e.g., occupational health nurses)





Program

- Partnered with the NL Lung Association
- Integrated counselling support and financial reimbursement for smoking cessation aids
- Open to employees and their immediate family members



Success

- 31 employees and 4 spouses have registered for the program
- City's greatest success story is a very heavy smoker who quit after smoking for 35 years



Program

- Partnership between Windsor-Essex County Health Unit, six workplaces, and ten pharmacies
- 12-week program with pharmacist counselling, NRT and medication coverage, and follow-up by the pharmacist
- All participants were referred to Smokers' Helpline for continued support



Success

- 240 employees participated in the program
- 40 per cent remained smoke-free after six months



Program

- Alberta and Northwest Territories Lung Association, with funding from Health Canada partners with workplaces to provide free smoking cessation program on site during work hours
- Includes:
 - Peer group counselling and information sessions
 - Follow-up sessions
 - \$200 certificate for NRT
- Creation of tobacco champions within each workplace



Success

- 727 individuals participated from 54 different organizations
- At the one-year follow-up, 27 per cent of respondents were smoke-free

Recommendations

1. Conduct health risk assessments.
2. Develop a comprehensive non-smoking policy which includes a smoking ban on company property.
3. Smoking cessation aids should be covered under your group benefits plan.
4. Eliminate lifetime maximums for smoking cessation aids and prescription smoking cessation medications and ensure that annual maximums allow for more than one quit attempt per year.



Recommendations

5. Combine smoking cessation aids coverage with counselling sessions.
6. Create effective partnerships with vendors or external suppliers.
7. Build an integrated wellness plan with a well designed communications strategy.
8. Engage senior management in becoming organizational champions for the program.
9. Monitor and evaluate the program's success.



Questions? Contact :

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