



Smoke Free ECU Project

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Report to the Review of Smoking at ECU Team

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Smoke Free ECU project

Contents

- Smoke Free ECU project content2
- Introduction.....3
- Supporting evidence.....3
- Survey methods.....4
- Demographics.....5
- Finding & discussion5
- Current smoking behaviour.....5
- Perceived level of exposure to second hand smoke5
- Smoke free campus options6
- Non-smoking behaviour options6
- Concerns and level of interest in potential options7
- Challenges7
- Meeting challenges8
- Conclusion9
- References 10
- Appendix..... 11
- Appendix 1: ECU Tobacco Survey 2009 Intercept Survey 11
- Appendix 2: Student Online Survey questions 13
- Appendix 3: Staff online Survey questions..... 14
- Appendix 4: Information Sheet 1 Intercept Survey..... 16
- Appendix 5: Information Sheet 2 Staff Online Survey..... 17
- Appendix 6: Intercept Survey Q 12 Qualitative thematic findings..... 18
- Appendix 7: Student Survey Q149 qualitative thematic findings 19
- Appendix 8: Support materials..... 20

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Introduction

Edith Cowan University has continued its commitment to reviewing smoking obligations in respect to smoking on its campuses with the implementation in July 2009 of a formalised project to explore the opportunities to create a healthier and safer ECU workplace.

There is health, legal and moral obligations for workplaces to be safe. The WA Government has recently passed the strongest anti-smoking legislation in outdoor public spaces in Australia, setting precedence for institutions and workplaces to complement and support these actions. The Legislation refers to the Tobacco Products Control Amendments Bill 2008 Section 106B: Use of tobacco products in outdoor areas (eating and drinking) and will be enacted by September 2010 (Western Australia Parliament 2009).

Recent research by Action on Smoking & Health Australia (2007) surveying tobacco free policy at Australian Universities note that ECU is one of the institutions with most areas of specific anti-tobacco policy and leads most universities in WA with the exception of Notre Dame which is a smoke free campus (Notre Dame University 2009). This is a strong incentive to take a lead in implementing further strategies aimed at reducing the impact of smoking on campus. The Review of Smoking at ECU committee (ROSC) has collaborated with all WA Universities to ensure a shared focus and collaborative reporting to the Vice Chancellors. ECU has undertaken engagement with Curtin University Health to utilise comparative survey methods and instrument to support the ROSC program.

This paper provides evidence of findings to inform future support and smoking policies at ECU. It provides additional information to the Smoking Free ECU project summary findings provided to the March 2010 Council meeting. This included three points of evidence 1) Intercept surveys conducted on the three ECU campuses using a sample of 334 reflecting staff/student ratio, with 46% smokers; 2) student online survey and 3) all staff online survey.

The project proposed to determine:

- current smoking behaviour
- perceived level of exposure to second hand smoke on campuses
- concerns and level of interest in potential options
- behaviour options if unable to smoke during working hours

The project findings addressed the predicted areas of challenges with strategies to address effective support to smokers while ensuring the majority of the ECU community can access an environment that upholds their health and wellbeing.

Supporting evidence

Legislation states there is strong scientific evidence that smoking in crowded outdoor areas can lead to harmful levels of chronic exposure (Western Australia Parliament 2009). In 2007, 16.6% of the Australian population smoked daily (19.4% all smokers). While smoking rates for 2007-8 ABS National Health Survey (2009) indicate statistically lower rates than 2004-5 survey which is also likely to ensure opinions on smoke free environments or modified environments is less contentious. Smoking level however vary with increased levels with reduced levels of socio-economic status, aboriginality, ethnic groups, those with mental health problems and those with other drug use problems have much higher rates (Australian Institute of Health and Welfare 2008). Research also demonstrates few adolescents stop smoking on their own accord highlighting the importance of a supportive approach to cessation (Sussman 2006).

Smoking in any working area is inconsistent with an employer's obligation to maintain a safe and healthy workplace under Occupational Health and safety laws. Signage on its own is not enough to achieve a high rate of compliance and reinforces the holistic approach to smoking on university campuses as highlighted by Action on Smoking & Health in Australia (Action On Smoking and Health 2009). A smoke-free environment is the only way to fully protect non-smokers from the dangers of second-hand smoke. Strategies such as separating from non-smokers, cleaning the air, and ventilating buildings cannot eliminate exposure of non-smokers to second-hand smoke. Scientific evidence indicates that there is no risk-free level of exposure to second-hand smoke. Breathing even a little second-hand smoke can be harmful to a person's health (US Department of Health & Human Services 2006).

Research has shown that outdoor tobacco smoke can be concentrated in the air during times of smoking in locations near active smokers and it is possible for outdoor tobacco smoke to present a nuisance or hazard under certain conditions. A non-smoker sitting a few feet downwind from a smouldering cigarette can be exposed to substantial levels of contaminated air (Klepešis, Ott et al. 2007). As well as health reasons, a ban on smoking in outdoor area decrease risk of fires and will help to control cigarette butt litter (Bloch 2000). Cancer WA also suggests that thanks to bans on smoking in indoor areas, West Australians have become accustomed to smoke-free air. As a result, there is now more smoke outside – in eating areas, doorways and other outdoor areas where the health and well being of everyone nearby is impacted (Cancer Council WA & Curtin University WHO Collaboration 2008).

In terms of enforcing bans, Cancer WA notes that past experience people are accepting of bans on smoking when clarity about where and when they may smoke and where bans are applied uniformly across like settings. They suggest that legislation or policy banning smoking in outdoor areas would be largely self-enforcing given the strong community demand for more public spaces to be smoke-free. This is further strengthened on the Joondalup campus with the restriction that have been put in place with the City of Joondalup in 2007 banning smoking on its beaches suggesting a strong smoke-free culture in the local community (Cancer Council WA & Curtin University WHO Collaboration 2008).

Survey methods

The project received ethics approval to anonymously survey students and staff on the Joondalup, Mt Lawley and Bunbury Campuses and using online surveying (Human Research Ethics Committee 2009). Three surveys were implemented with an Intercept survey ($n=154$ smokers & $n=180$ (54% non-smokers) on Mt Lawley, Joondalup and regional Bunbury campuses; all staff online survey (44 %, $n=1229$) and all student online survey (36 %, $n=6115$). Validated questionnaires were modified for ECU specific use to assess tobacco use and attitudes (See Appendix's 1, 2 & 3). Demographics included smoking status, smoking behaviour on an ECU campus, age, gender, aboriginality, international student status, and country of origin (Rigotti, Regan et al. 2003; Le, Dhaliwal et al. 2008). Both closed and open ended questions were deployed to collect information among staff and students regarding overall smoking attitudes and behaviours.

Variables assessing opinions on tobacco control policies on campus and the social contexts of tobacco smoking amongst peers formed the second part of the surveys. These included attitudinal items with responses formed via a Licit-Scale used for drawing opinions and attitudes (Ryan and Garland 1999). Online students were provided the option to comment about smoking at University (Appendix 7 note) Smokers from surveys were asked to comment on their likely behaviour if they could not smoke on an

ECU campus and interest in accessing support options. Data was analysed by SPSS version 17 and qualitative data thematically interpreted. Further analysis will be undertaken and reported separately in the future. Descriptive statistics, Chi-squared tests and logistic regression analysis were used to assess association between selected variables and support for the complete ban 'on-campus' smoking.

All survey participants were provided or could access an online Information Sheet (Appendix's 4&5) (Human Research Ethics Committee 2009) and an incentive to take part in the surveys was provided, with the option to enter a draw for a gift voucher.

Demographics

Survey findings were representative of the University population as outlined in the table below.

Total students	Total Staff	1 Intercept surveys (staff & students)	2 Students online survey	3 Staff online survey
16,894 International 2902 (17%) Aboriginal 93 (0.5%)	2817 (17% total pop)	334 (1.7% total pop.) Smokers 46% Staff 20% International students 21% JO 37%, ML 39%, BUN 33% Males 52%, Females 48%	N=6115 (36%) International 908 (20%) Aboriginal 55 (0.25%) JO 49%, ML 36%, BUN 6%, Other 9% Smokers 9.7%	N=1229 (44%) JO 68%, ML 27%, BUN 4% Males 34%, Female 66% Academic 34% General 64% Smokers 9.7%

Finding & discussion

Current smoking behaviour

In 2009 members of the ECU community (7678 representing 36%) were surveyed on their smoking behaviour with both the staff and student surveys indicating 9.7% were smokers. This compares with 10.2% for students at Curtin University in 2008. Slightly higher were ECU International students with 12% of smokers (9% non-international). Not all students who were smokers smoked on campus (71%) with 20% smoking daily on campus. There were remarkable differences observed on daily smoking pattern among staffs. More general staff (64%) tended to be smoking on a daily basis on ECU campus compared to academic staff (33%). Much higher numbers of staff smoked daily than students which indicate that students are likely to have more opportunities to smoke away from an ECU campus than staff.

The Intercept survey over-sampled smokers on the three campuses to ensure the views of this group were adequately measured. Even with a larger group of smokers there were only 22.8% that smoked daily on campus. The Intercept survey indicated 73% of smokers were international students 1.85 (95%CI:1.5-2.27) times the number of smokers than the sample population. While PIBT International students on the Mt lawley campus were not surveyed online, their views were represented by the Intercept survey and are likely to be similar to other International students surveyed.

Bunbury campus had higher staff smokers (14.6% n=7) and students 14.1% (n=54). Compared to the larger campuses with Joondalup staff 9% (n=74), students 9.2% (n=275); Mt Lawley staff 11.3% (n=36), students 9.6% (n=206).

Perceived level of exposure to second hand smoke

The majority of staff (91%) had the knowledge that second hand smoke is harmful. While 82% seek out smoke free environments or asked others not to smoke around them (56%). The majority (54%)

consider they were exposed to smoke on an ECU campus. This highlights concern for their health and wellbeing and further reinforces the social desirability of smoke free environments for the vast majority.

The majority of students (75%) chose to socialise in smoke free environments and only 6% disagreed with a smoke free social environment. 43% considered they were exposed to smoke on an ECU campus with only 28% suggesting they were not exposed. Smokers were 2.6 (95%CI:2.13-3.18) times more likely to disagree with the statement that they were exposed to other peoples tobacco smoke indicating some level of ignorance or they smoked away from others.

Interestingly the on-campus Intercept survey indicated the majority (61%) dated non-smokers suggesting the strong desire to be around non-smokers, even among smokers (46%). Only 15% disagreed with the desire to socialise with a non-smoker.

Smoke free campus options

Just under half of staff (48%) and students (45%) were in favour of a complete ban of smoking on campus. Slightly more academic staff (51%) than general staff favoured the ban. There was more resistance to a ban by staff at Bunbury campus (40%) compared to 43% Mt Lawley to 50% at Joondalup. This reflects the level of smokers between campuses and the smaller number of staff who worked at Bunbury campus surveyed. Consideration that 38% of staff *strongly agreed* to a ban (13% *strongly disagreed*), while only 9% of students *strongly disagreed* (35% *strongly agreed*) with this option. Although a higher percentage of International students were found to be smokers, they were in support 1.206 (95%CL:1.07-1.361) of a complete ban on-campus smoking.

The majority of staff (65%) and students (60%) agreed to support a dedicated smoking area, with staff smokers twice as likely to favour a dedicated area (95%CL:1.27-3.49).

For the on-campus Intercept survey non-international students were 2.29 (95%CI:1.16-4.50) times more likely to support the complete ban on campus smoking. Being a non-smoker was a predictor in favour of a complete ban (adjusted OR=6.83,95%CL:3.47-13.41) university wide. Gender was not associated with smoking opinions.

If a campus is to reflect an environment that provides both academic and social attributes then smoke-free is very appealing to students and staff.

Non-smoking behaviour options

There was strong indication from the on-campus Intercept survey with 42% of smokers agreeing they would quit or smoke less if they couldn't smoke on an ECU campus. This provides considerable scope for behaviour change and public health benefits. For the vast majority of smokers n=69 would smoke off-campus; not smoke (31); still smoke on campus (12) or in carparks (8). Others provided strategies which have been included in Appendix 8.

Staff smokers (22%) indicated they would quit or cut down if they couldn't smoke on an ECU campus, which would ensure staff will access and benefit from support initiatives that may be available to them. Of the staff smokers, 40 indicated that they would smoke off-campus; still smoke (5), work from home (9), smoke in their car (6) with three staff objecting and feeling wronged by any restrictions.

Students provided 1580 written responses on their thoughts and opinions toward smoking at ECU with 732 indicating a total ban against smoking with comments such as hates smoking/affects them in all kinds of ways; 618 had no real opinion towards changing policy and were either undecided or

commented on designated smoking areas; and 230 commented that they didn't favour total smoke-free ban with comments such as keeping the university the way it is/ smoking on campus doesn't bother them. (See note Appendix 7)

Concerns and level of interest in potential options

Staff (91%) and 80% of students (only 2.6% disagreed) welcome ECU introducing initiatives to help smokers who wish to quit. This indicates a high level of concern for smokers and desire to support their behaviour changes.

For those surveyed on-campus, 46% of the smokers were concerned enough with their own smoking behaviour and interested in accessing support options with 64% favouring online resources, 11% favoured telephone helpline and 26% considered accessing a support group.

A small number of staff smokers (2.2%) favoured accessing online resources for support. A few noted they would use phone counselling services and support groups if available. Only 6% of staff who smoked indicated they would not access support to quit, indicating pre-contemplators who are not likely to change smoking behaviour in the short term.

Challenges

Supporting current smokers in reducing harm

It has been recognised that smoking and passive smoking is hazardous to an individual's health and well-being and non-smokers should be protected from the involuntary inhalation of tobacco smoke. While smokers are less than 10% of campus users with only ¾ smoking on-campus, there will need to be a range of support strategies for those who want to quit or modify their behaviour. Comments from students and staff smokers were generally not extreme in objections to a smoking ban. Consideration for staff with limited opportunities to leave campus should be a focus of environmental and behavioural strategies. Employment options as well as staff and student orientations are opportunities for policy clarity and implementation of education measures. Attention to effective strategies in supporting International students and smokers with regional needs should be provided.

Supporting non-smokers

Consideration of the rights of non-smokers and concerns if smoking policies are not strengthened will need to be addressed to ensure the vast majority of ECU staff and students' smoking attitudes are acknowledged. There is strong evidence that people have come to expect environments and workplaces that are free of carcinogenic exposure.

Providing a designated smoking zone will still impact on non-smokers who may have to work or transit the area. Time limitations for workplace breaks may also be impacted. There was also strong objection to smoking on campus with 12% of students surveyed so concerned that they provided unprompted comment on banning smoking.

Strengthening ECU policy (environment; employment; fleet vehicles; student charter & student accommodation; financial connections to university investments) to support and expand on the scope of new WA Government Regulations will be important. Utilising existing campus programs and services, such as ECU Occupational Safety & Health; Staff Health & Wellness program; Health Services; Vario or student allied health practicum or counselling opportunities. Discussions with the Student Guild suggest they were very supportive of smoke free campuses and they should be further consulted for their cooperation during further phases.

A smoke free university will also provide expanded options for sponsorship and partnerships with a range of agencies including Healthway and the new Commonwealth Preventative Health Taskforce. Both agencies hold high priority to minimising the health implications of tobacco in the community and acknowledge exemplary workplaces.

Meeting challenges

A range of environmental and behavioural strategies can be undertaken to increase effectiveness of smoke free initiatives. Currently the University website states that ECU is smoke free or partially smoke-free. With the provision of totally smoke free in 2011, as indicated by the Vice Chancellor (Cox 4 December 2009) guidelines provided need to include campus implications and consequence of non compliance. Checklists for policy development for workplaces and university campus are available from Cancer Council and Action on Smoking and health included in Appendix 8 (Cancer Council WA 2009; ASH Australia February 2009).

The majority (over 90%) of ECU community sampled were sufficiently concerned about smokers health they indicated a high priority for providing education and relevant initiatives. Online support was a very acceptable mode of dissemination as a communication tool, as utilized by Notre Dame University, currently the only smoke free campus in Australia (ASH Australia 2009). The development of a comprehensive University website, including behavioural and environmental initiatives, could be drawn from the following two tables with further information outlined in Appendix 8.

Common Behavioural Interventions & Environmental Initiatives are included in table below adapted from (Allen 2010) p133.

Behavioural Interventions	Description
Self Help	Materials suggesting behavioural strategies, including leaflets, books, online program, 5A’s approach
Minimal clinical interventions	Brief advice from healthcare providers given in routine consultations
Intensive clinical interventions	Behavioural methods of greater intensity, usually implemented over a period of time. Can include: Individual counselling, proactive telephone counselling (QUIT), group therapy, aversion therapy.
Pharmacological interventions	Nicotine replacement therapy and others
Complementary initiatives	Acupuncture, hypnotherapy, relaxation programs
Innovation Campus activities	Staff subsidy programs; World Non-Smoking Day; student driven advocacy – Green lungs; Celebrate success

Environmental Initiatives	Description
Smoke Free locations	100% campus sites
Air quality Advocacy	Green Lungs
Student accommodation	100% campus sites
Employment	New employees
Fleet vehicles	Strengthening enforcement of existing ban in vehicles
Policy communications	Orientation, student charter
Monitor and Evaluate	Internal and external feedback

Conclusion

Any smoke free ECU initiatives need to be part of a comprehensive and integrated approach and imbedded in the existing staff health & wellness program, OSH policies and health initiatives & programs available to students.

A proactive approach with inspirational goals to eliminate smokers on campus is likely to have further benefits to the University, State Government acknowledgement, by Healthway, could include funding and sponsorship opportunities; ACOSH recognition and potentially the very highest accolade from the new National Preventative Health Taskforce. University students represent an educated group of people whose attitudes and habits are of importance to future opinion formation and policy development (Steptoe 2002). Further supporting universities as a hub of social diffusion against smoking where non-smokers and smoking cessation become more 'contagious' so these processes can be accelerated among less well-educated groups and disadvantaged in the community (National Preventative Health Taskforce 2008).

Future phases of smoke free ECU need to ensure evaluation and monitoring are integral to the ongoing program. Every opportunity should be taken to communicate and celebrate the successes of this high level initiative to highlight the importance ECU Executive and Council places on the health and wellbeing of its workforce, student population and visitors to the Joondalup, Mt Lawley and Bunbury regional campuses.

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Appendix

Appendix 1: ECU Tobacco Survey 2009 Intercept Survey

1. Screening question: Are you a member of ECU staff ① student ② If none, thank & exclude.

Ask person if they would like to complete this survey. It asks your opinions on cigarette smoking. Participation is voluntary & no question is compulsory. By completing the survey you have the chance of winning a \$70 gift voucher. You will need to write your contact details on a separate slip of paper for entry into the prize draw (this is optional). We **do not** want you to write your name on this survey.

If they are happy to participate, hand out **Information sheet** and **optional voucher draw**

ADMINISTRATION	QUESTIONNAIRE NUMBER		
SUPERVISOR: If this questionnaire number has been reissued as a substitute for an incorrect questionnaire tick here _____			

2. Campus (CIRCLE)

Joondalup	1
Mt Lawley	2
Bunbury	3

3. Day of Interview [CIRCLE]

Tuesday	1
Wednesday	2
Thursday	3
Friday	4

Interview started at [HHMM]	
Interview finished at [HHMM]	
INTERVIEW TERMINATED AT REQUEST OF RESPONDENT	Yes at
INTERVIEWER NAME [Clear sign initials]	
Was interview witnessed/ verified? [CIRCLE] <i>Sample</i>	
QUESTIONNAIRE CHECKED BY [INITIALS]	
QUERIES..... CLARIFIED [INITIALS & DATE]	

DEMOGRAPHICS

4. Gender [CIRCLE]

Male	1
Female	2

5. For the purpose of the survey, do you consider yourself to be of Aboriginal or Torres Strait Islander descent? [CIRCLE]

YES	1
NO	2

6. Are you an International student [CIRCLE] IF Yes Country _____

YES	1
NO	2

7. What is your age? _____ If decline (no ✓) _____

8. Which of the following best describes your use of cigarettes?

- A non smoker 1
- An ex smoker 2
- Occasionally smoke (on average, less than one per day) 3
- Currently smoke cigarettes regularly (more than one per day) 4
- Prefer not to answer 5

9. How often, if at all, do you smoke cigarettes/tobacco products on an ECU campus?

- Not at all 1
- Less often than weekly 2
- At least weekly (but not daily) 3
- Daily 4

10. ECU is currently considering new initiatives regarding smoking on campus. For each of the statements below, please indicate the extent to which you agree or disagree. (CIRCLE)

		Strongly disagree	Disagree	No opinion	Agree	Strongly agree
a	If someone smokes cigarettes around me they are causing me harm because of second-hand smoke.	1	2	3	4	5
b	I am exposed to other people's tobacco smoke on an ECU campus	1	2	3	4	5
c	I prefer to socialise in a smoke-free environment.	1	2	3	4	5
d	I seek out smoke-free environments.	1	2	3	4	5
e	It disappoints me when a friend who normally doesn't smoke, smokes cigarettes while drinking.	1	2	3	4	5
f	I would rather date a non-smoker.	1	2	3	4	5
g	I ask others not to smoke around me.	1	2	3	4	5
h	ECU campuses should be mainly smoke-free but with dedicated outdoor smoking zones	1	2	3	4	5
i	ECU campuses should be completely smoke free including all outdoor areas	1	2	3	4	5
j	I would welcome ECU introducing initiatives to help smokers who wish to quit.	1	2	3	4	5

Non smokers have completed survey. Smoker asked questions 11-13

11. Would you smoke less, or try to quit if you could not smoke on an ECU campus?

Yes	1
No	2

12. What would you do if you could not smoke on an ECU campus?

13. If you have concerns about smoking would you be interested in accessing any of the options (circle)

a	Online resource site (self-help)	1	
b	Telephone helpline (counselling)	2	
c	Support group (cessation therapies)	3	
d	others	4	
e	No	5	

Thanks you for your time. **Hand out Information sheet and optional voucher draw if not done so.**

Results of this survey will be available via ECU online site later this semester.

Appendix 2: Student Online Survey questions

A sub-sample instrument from the Student Satisfaction Survey 2009

Q146. Which of the following best describes your use of cigarettes?

A non smoker

An ex smoker

Occasionally smoke (on average, less than one per day)

Currently smoke cigarettes regularly (more than one per day)

Q147. How often, if at all, do you smoke cigarettes/tobacco products on an ECU campus?

Not at all

Less often than weekly

At least weekly (but not daily)

Daily

Q148. ECU is currently considering new initiatives regarding smoking on campus. For each of the statements below, please indicate the extent to which you disagree or agree.

		Strongly disagree	Disagree	No opinion	Agree	Strongly agree
a	I am exposed to other peoples tobacco smoke when working/studying on ECU campus					
b	I prefer to socialise in a smoke-free environment.					
c	Our campus should be smoke-free in all buildings					
d	Our campus should be smoke free including all out door areas					
e	I am interested in ways to stop smoking					

Q149. Would you like to comment on the issue of smoking on Campus?

Appendix 3: Staff online Survey questions



Win a \$70 gift voucher

As an ECU staff member you are invited to complete this brief survey on smoking attitudes, behaviours and employee support options. Findings will inform the Vice Chancellor's Planning and Management Group on future support and smoking policies at ECU. This survey is anonymous and has approval of ECU ethics. If you wish to be in the draw for a gift voucher you can leave your contact number at the completion of the survey. Your personal contact will only be used for the 'draw' and will not be retained and used for any other purpose. An information sheet is **hyper link**

Thankyou Survey coordinator Jill Darby ph: 63045081 (ECU Lecturer in Health Promotion).

Survey questions

Q1 What best describes your age? _____ years (Skip Q if you decline)

Q2 Gender

- Male
- Female

Q3 Which campus do you mostly work at?

- Mt Lawley
- Joondalup
- Bunbury
- I only work remote from ECU campuses.

Q4 re work status

(Q4) Which of the following best describes your use of cigarettes? A non smoker

- An ex smoker
- Occasionally smoke (on average, less than one per day)
- Currently smoke cigarettes regularly (more than one per day)
- Prefer not to answer

ECU is currently considering new initiatives regarding smoking on campus and values your opinions.

(Q5) If someone smokes cigarettes around me they are causing me harm because of second-hand smoke.

- Strongly disagree
- Disagree
- No opinion
- Agree

- Strongly agree

(Q6) I am exposed to other people's tobacco smoke on an ECU campus

(Q7) I seek out smoke-free environments.

(Q8) ECU campuses should be mainly smoke-free but with dedicated outdoor smoking zones

(Q9) ECU campuses should be completely smoke free including all outdoor areas

(Q10) I would welcome ECU introducing initiatives to help smokers who wish to quit.

Non smokers have now competed this survey. Move to last page to enter optional '\$70 gift voucher draw' and to press on submit button. Thank you.

Occasional smokers or current smokers please answer the following.

(Q11) How often, if at all, do you smoke cigarettes/tobacco products on an ECU campus? Not at al

- Less often than weekly
- At least weekly (but not daily)
- Daily

(Q12) Would you smoke less, or try to quit if you could not smoke on an ECU campus?

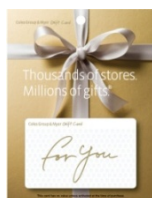
- Yes
- No

(Q13) What would you do if you could not smoke on an ECU campus?

(Q14) If you have concerns about smoking would you be interested in accessing any of the options

- Online resource site (self-help)
- Telephone helpline (counselling)
- Support group (cessation therapies)
- Other
- No

Non smokers have now competed this survey. Move to last page to enter optional '\$70 gift voucher draw' and to press on submit button. Thank you.



Win a \$70 gift voucher

(optional) First name & ECU number

Appendix 4: Information Sheet 1 Intercept Survey



Intercept survey – Joondalup, Mt Lawley, Bunbury

Information about the Smoking at Edith Cowan University survey 2009.

What are you being asked?

The purpose of this survey is to find out smoking attitudes and behaviours when you are at ECU Campus's.

How long will it take?

It will take about 3-5 minutes to complete the survey

Who is asking these questions?

Researchers in the School of Exercise, Biomedical and Health Sciences are conducting this survey on behalf of the Vice-Chancellor's Planning and Management Group.

How will the information be used?

ECU values the opinions of students studying and staff working on the Joondalup, Mt Lawley and Bunbury Campuses and will use the information when considering new initiatives regarding smoking on campus.

Will I be identified with this survey?

No. You are not identified in any way. We will not ask you your name or address or any other information that will identify you.

Do I have to do this survey?

No. It is voluntary. It is your decision whether or not you participate. You can stop the survey any time and you do not have to give us a reason why. If you decide to stop we will not use any of the information that you gave us. By completing the survey you are consenting to take part in the research project.

If I have questions?

You can contact survey coordinator Jill Darby on 63045081 (ECU Lecturer in Health Promotion).

If participants have any complaint regarding the manner, in which a research project is conducted, it may be given to the researcher or, alternatively to the Ethics Officer, Human Research Ethics Committee, Edith Cowan University 270 Joondalup Drive Joondalup 6027 (Ph 63042170). All study participants will be provided with a copy of the information Sheet for their personal records.

Appendix 5: Information Sheet 2 Staff Online Survey



Joondalup, Mt Lawley, Bunbury staff online survey

Information about the Smoking at ECU survey 2009.

What are you being asked?

The purpose of this online survey is to find out smoking attitudes and behaviours and employee support options.

How long will it take?

It should take about 5 minutes to complete the survey

Who is asking these questions?

Researchers in the School of Exercise, Biomedical and Health Sciences are conducting this survey on behalf of Edith Cowan University Vice-Chancellor's Planning and Management Group.

How will the information be used?

ECU values the opinions of staff working on the Joondalup, Mt Lawley and Bunbury Campuses and will use the information when considering new initiatives regarding smoking on campus.

Will I be identified with this survey?

No. You are not identified unless you choose to enter the \$70 gift voucher draw. This information will only be used for the 'draw' and not for any other purpose.

Do I have to do this survey?

No. It is voluntary. It is your decision whether or not you participate. You can stop the survey any time. By completing the survey you are consenting to take part in the research project

If I have questions?

You can contact survey coordinator Jill Darby on 63045081 (ECU Lecturer in Health Promotion).

Ethics approval number 4184 Darby. If participants have any complaint regarding the manner, in which a research project is conducted, it may be given to the researcher or, alternatively to the Ethics Officer, Human Research Ethics Committee, Edith Cowan University 270 Joondalup Drive Joondalup 6027 (Ph 63042170). All study participants will be provided with a copy of the information Sheet for their personal records.

Appendix 6: Intercept Survey Q 12 Qualitative thematic findings

Q12 What would you do if you could not smoke on an ECU campus?	#	
Not smoke	31	
Smoke off campus	69	
Still smoke on campus	12	
Smoke in car/car-park	8	
Chew gum	4	
Eat	5	Sleep, eat eat food and drink tea Talking with friends or cup tea Drink Butterscotch water
Occupy themselves	7	Do more exercise Probably be in the E-lab instead Read Study Playing, internet Stay in the e-lab Keep busy
Get emotional	5	Freak out Riot kick up a stink, uni stressful as is cry! Upset
Other	6	Nothing No idea Nothing Leave cigarettes at home Smoke less Not come here
total	147	

Q13 If you have concerns about smoking would you be interested in accessing any of the options

Other

Other options they would access if they had concerns about smoking	#
Nicotine replacement therapy (NRT)	4
Cold turkey	2
Self-belief	2
Other	2
total	10

Appendix 7: Student Survey Q149 qualitative thematic findings

Students provided 1580 written responses on their thoughts and opinions toward smoking at ECU with 732 indicating a total ban against smoking with comments such as hates smoking/affects them in all kinds of ways; 618 had no real opinion towards changing policy and were either undecided or commented on designated smoking areas; and 230 commented that they were against a smoke free ECU with comments such as keeping the university the way it is/ smoking on campus doesn't bother them.

Further qualitative analysis will be undertaken and reported separately in the future.

Appendix 8: Support materials

Behavioural strategies:

Self Help

Information on University website:

Provide links on the Uni website to other sites that provide information or help for those who are concerned about their own or others smoking (I.e. <http://www.quitnow.info.au/> a collaborative quit smoking health initiative between federal, state and territory governments and non-government organisations) (E.g. Notre Dame University).

5A's approach is outlined by (Zwar 2006) including 5A's Assess, Advice, Assist and Arrange follow-up

Campus anti-smoking and policy information developed by ECU media students and disseminate via library, student services TV's, campus radio station (Cross 2008)

Self-help:

(Relies on a range of strategies such as video, online or paper based support materials).

Self-help resources:

Providing smokers with information on the harmful effects of smoking and methods of quitting has been a basic approach for more than 20 years. In Australia currently the most widely distributed resource is the booklet **Quit Because You Can** (often called the 'Quit Book'), written by Quit Victoria with Commonwealth funding. The content is evidence-based and covers issues on preparing to quit through to coping with setbacks after quitting. This booklet has been regularly updated since 1997 and was redeveloped in 2007. An additional resource 'Choosing the Best Way to Quit' was also developed in 2007 and provides an overview of evidence-based information on quitting. The booklet is designed to help smokers choose the most effective approach to quitting that suits their individual needs. It recommends that for most people the best way to quit is to:

get some coaching (from the Quitline, Quit pack, group courses, the internet, or individual counseling), and use quitting medications (NRT or prescribed medications).

Evidence suggests these two forms of help have additive benefits.

<http://www.tobaccoaustralia.org.au/chapter-7-cessation/7-12-methods-services-and-products-for-quitting-se>

(The Cancer Council Website, 2009).

Evidence

Tobacco smoke and involuntary smoking (IARC Monographs, Volume 83, 2004)

<http://monographs.iarc.fr/ENG/Monographs/index.php>

The health consequences of involuntary exposure to tobacco smoke:
a report of the Surgeon General

<http://www.surgeongeneral.gov/library/secondhandsmoke>

Facts and information on tobacco and smoking (Cancer Council Western Australia)

<http://www.cancerwa.asn.au/prevention/tobacco/>

Examples of smoke free policies

Going smoke-free: a guide for workplaces

<http://www.quit.org.au/downloads/workplacekit.pdf>

Going smoke-free: workplace recommendations

<http://svc040.wic029p.server-web.com/editorial.asp?pageid=386>

International Union Against Tuberculosis and Lung Disease Tobacco Free Union

<http://www.tobaccofreeunion.org/content/en/>

Benefits of quitting:

<http://www.quit.org.au/browse.asp?ContainerID=1612>

http://www.health.nsw.gov.au/factsheets/general/benefits_of_quitting.html

<http://www.nicorette.com.au/quitting-for-good/immediate-benefits/>

(Providing the benefits of cessation, for both smokers and non-smokers and incentives to quit on the uni website).

Disadvantages of continuing to smoke:

http://www.nutri.com/index.cfm?fuseaction=page.facts_about_smoking

<http://www.knowledgebase-script.com/demo/article-222.html>

<http://www.quit-smoking-stop.com/harmful-smoking-effects.html>

<http://www.tobaccoinaustralia.org.au/chapter-4-secondhand> (Health effects of second hand smoke).

Websites for adolescents:

www.oxyGen.org.au

(This is an interactive site for young people about smoking, designed to encourage healthy lifestyle choices and to provide information on the impact of tobacco)

www.100incontrol.com

(Is a site provided by Queensland Health for young people wanting smoking prevention and cessation materials).

Harm minimisation approaches for adolescent smokers – modelled on Keep Left resources (Cross 2008)

Clear horizons for smokers over the age of 50

<http://www.smokefree.gov/landing.aspx?rid=2>

<http://women.smokefree.gov/landing.aspx?rid=3> (for female smokers who have recently quit smoking).

Fagerstrom Nicotine Dependence Test:

http://www.sdgp.com.au/client_images/169549.pdf

<http://www.outsmartcigarettes.com.au/outsmart/addicted.aspx>

Outsmart cigarettes website: Fagerstrom test

Minimal Clinical Interventions

On campus counselling service:

Provide information about the student association and student services including the counselling service as a point of reference for students and staff who are concerned about their own or others smoking (Notre Dame University).

Counseling at ECU:

<http://www.ecu.edu.au/student/counselling/index.php>

The Counselling Service is a professional and [confidential](#) service, which is available to all **students** free of charge.

Counsellors can provide emotional support and, where possible, assist students understand the problems you have and assist you in finding solutions that work.

The Counselling Service reception operates from 8.30am - 4.30pm Monday to Friday. Reception building 3 Room 128 Mt Lawley campus (for all campuses). Telephone 93706706, Facsimile 93706730, email

counselling@ecu.edu.au

ECU's main focus is to help students better manage their personal situation in relation to their studies, offering help mainly in 2 ways:

- Individual counselling sessions for personal problems
- Academic support through help with appeals and other concessions in special situation

The counsellors come from a range of professions, have postgraduate qualifications and have skills and experience in helping people with a wide range of personal, psychological and study-related difficulties.

All ECU counsellors are required to abide by professional Code of Ethics, and to uphold principles that outline professional conduct, responsibilities and confidentiality.

Regional support – SW Population Health will provide support to ECU Bunbury smoke-free program. Janelle Leiper Department of Health Epidemiologist is a point of contact.

Regional support – SW Population Health will provide support to ECU Bunbury smoke-free program.

Culturally and Linguistically Diverse (CaLD / International students

The WA Department of Health Tobacco Action Plan 2007-2011 highlights priorities in WA to supporting CaLD people who have a high smoking prevalence {WADepartmentofHealth, 2007

#499}www.watap.health.wa.gov.au/docs/watap_2007-2011.pdf

P31 in plan notes the importance of data collection of CaLD or International students from university sources. Support provided by WA Country Health SW Health Services; Alcohol & Drug Information Service www.dao.health.wa.gov.au . Useful source (Scollo 2008) Tobacco in Australia –facts & Issues a comprehensive online resource www.tobaccoinaustralia.org.au Chapter14 provides research on CaLD tobacco Control campaigns in Australia – experience and effectiveness.

NSW Multicultural Health Communication Services includes useful online tobacco cessation materials www.health.nsw.gov.au/mhcs/services.html

Intensive Clinical interventions

Telephone counselling: Quitline number is 131 848

<http://www.auckland.ac.nz/uoa/home/about/smokefree-2010>

(The University of Auckland, Smoke-free 2010).

Group & individual therapy utilising campus psychology services:

ECU's Vario Centre opportunity could model the UWA service.

Nicotine addiction can be one of the most difficult to beat, according to **University of WA clinical psychologists** offering a program for people battling to quit smoking. Unlike many other nicotine replacement therapies, the program also includes treatment to help people overcome conditioned behaviours linked to smoking. Dr Stritzke says this combined approach is aimed particularly at people who have tried many times to stop smoking, but have failed. The UWA program, which has been running for 10 years as part of training for postgraduate clinical psychologists, is now being offered more widely to the community, Dr Stritzke says. The next Smoking Cessation Program will start on April 17. Sessions run for two hours from 6-8pm and cost \$20 per session, or \$165 if paid in total. For more information, contact the Robin Winkler Clinic at the School of Psychology, UWA on 6488 2644.

Group therapy: (Should be offered before self-help therapy and can be used in conjunction with Nicotine Replacement Therapy products).

(To analyse motives for group member's behaviour, provide an opportunity for social learning, generate emotional experiences and impart information and teach new skills).

Individual support: (Offered on the SmokeFree RAC: Breathe Easy 2009 website)

One-on-one internet support:

The QuitCoach is a free computer program, where you will be asked questions and then given ideas and suggestions to help you quit smoking and stay quit.

<http://www.quitcoach.org.au/>

Counselling or Advice:

Talking to your doctor, nurse or a counsellor can improve your chances of outsmarting cigarettes. Combining support with medicines that help you stop smoking has been shown to improve your quitting chances even more.

http://www.outsmartcigarettes.com.au/tools/ways_quit.aspx

Fresh starts:

Fresh starts is a course for smokers who want to quit but feel they require some support in doing so. The course was developed by The Cancer Council Victoria, and is a nationally recognised and accredited QUIT smoking program. Its proven success has resulted in it being adopted by other state cancer organisations and health services.

The Cancer Council of Western Australia's Fresh Start program offers two services:

1. Evidence-based group counselling for smokers who want help to quit
2. Training for health professionals who wish to assist their clients to quit smoking.

Kristina Economo (Kristina Economo Project Officer, Make Smoking History. The Cancer Council WA46 Ventnor Avenue West Perth 6005 Phone: 08 9212 4333 Reception Phone: 08 9212 4370 Direct Fax: 08 9212 4339

keconomo@cancerwa.asn.au) state that they cannot provide a direct point of contact to assist student's in their attempt to quit, but that it is best to refer student's wanting to quit to the Quitline (13QUIT). The Quitline provides confidential telephone counselling, advice and support and can offer call backs if people need that extra support.

There is also a national website that provides all the relevant and up-to-date information on quitting <http://www.quitbecauseyoucan.org.au/> as well as information in other languages and state-specific contact details.

Furthermore, Freshstarts smoke-free contact for Edith Cowan University is: Ms Belinda Owen - Occupational Safety & Health/Workers Compensation Officer

Phone: 6304 2725

Email: b.owen@ecu.edu.au

(The Australian Council on Smoking and Health (ACOSH) has been working with all Universities in WA with the aim of all Universities going smoke-free together at the beginning of 2011. They have been in contact with Ms Belinda Owen – ECU Occupational Safety & Health/Workers Compensation Officer)

Pharmacological interventions

Nicotine Replacement Therapy:

(NRT)

(E.g. Nicorette, Nicabate, QuitX).

Nicotine Replacement Therapy (NRT) delivers nicotine without all the other components of cigarettes. There are different types of NRT products available, depending on level of dependence. These include **patches, inhalers, lozenges, gum, and microtabs** (which dissolve under the tongue). NRT has been shown to help reduce cravings and withdrawal symptoms associated with quitting smoking. NRTs are available without a prescription. GP's or pharmacist will provide guide on treatment..

Ways of quitting:

http://www.outsmartcigarettes.com.au/tools/ways_quit.aspx

NRT products:

[010062 ProductsQuit](#)

File Format: PDF/Adobe Acrobat - [Quick View](#)

Chemist direct website; Type in brand (i.e. Nicorette/Nicabate) for approximate costs:

<http://www.chemistdirect.com.au/index.php?osCsid=2ea82062164fac705b09ebd9d30b5aca>

Pharmco Therapies:

Nicotene replacement therapy. Bupropion and Varenicline have been shown to double quit rates (Zwar 2006)

Varenicline (Champix)

CHAMPIX(R)

File Format: PDF/Adobe Acrobat - [Quick View](#)

Approximate cost of Champix:

<http://search.chemistdirect.com.au/search?w=champix&view=list>

Bupropion (e.g. Zyban SR, Clorprax, Prexaton, Bupropion-RL)

Consumer Medicine Information

CMI Zyban

Approximate cost of Zyban:

http://search.chemistdirect.com.au/search?w=zyban&view=list&search_in_description=1

Complementary initiatives

Acupuncture:

According to (Zwar 2006) evidence based on the benefits have been difficult to establish.

Acupuncture is a traditional Chinese therapy, in which very fine needles are used to stimulate specific parts of the body. Research has found that acupuncture may be better than using no treatment at all, but overall, there is no definite evidence that it's beneficial in smoking cessation.

http://www.outsmartcigarettes.com.au/tools/ways_quit.aspx

Hypnotherapy:

Some people have found hypnosis useful when quitting smoking; however, so far, there is no conclusive scientific evidence that hypnotherapy can outsmart cigarettes in the long-term.

http://www.outsmartcigarettes.com.au/tools/ways_quit.aspx

Offer other wellness activities:

Exercise/sports/yoga/craft classes etc ('Live life longer program') (Peters 2010)

Survey respondents also suggested drinking tea, chewing gum including Nicovette gum and talking with friends can support behaviour change.

Allen Carr's easy way to stop smoking:

Note according to (Zwar 2006) no randomized studies have been reported in the literature for Allen Carr's clinic method.

Can do group bookings (anything between 5-20 people)

Costs \$550 per person, with a money back guarantee

The session runs for approx 5 to 6 hours, with as many back-up sessions as needed, (back-up sessions are 3 hours each session)

If a person has the first session, and two backup sessions and still finds no change in their smoking behaviour within a three month period, then they get their money back. However there are an extremely high percentage of people who stop smoking after trying Allen Carr's method, so they can afford to have this guarantee.

Contact for program Dianne (number is 61615649) noted availability of student discount for those wanting to use the Allen Carr method, by showing your student card on arrival.

Promotional materials on the Allen Carr's method are available. Can the University sponsor students/staff?

Dianne also mentioned that she could do a presentation on campus, about the Allen Carr's method, to explain how it works to staff/students. <http://www.allencarr.com.au/>

Perth Sessions start at 8:30 am and run until 1:30 pm

Comfort Inn Bel Eyre Perth' 285 Great Eastern Hwy' Belmont Ph: (08) 9277 2733

Promotional materials note "Allen Carr's **Easyway**® method is the only method that removes the desire to smoke. By removing the desire, we can remove the conflict. With no conflict, the whole quitting process is easy and, for many people, extremely enjoyable and empowering".

Innovative Campus activities

Staff support programs can include subsidised initiatives with RAC WA 'Make Yourself Interesting' where the organisation subsidises self help programs of the employee's choice and seeks Managers approval. Some staff have used this opportunity for smoking cessation programs and initiatives (RACWA 2009).

A range of educational opportunities can be undertaken in partnership with Government, Local Government and NGO agencies and student groups ie World smoke Free Day; Daffodil Week; Open Days; Health & Wellness promotional activities; Pines outdoor cinema promotional opportunities.

Green Lung promotions utilising student advocacy initiatives implemented by University Sains Malaysia Student Voluntary Organisation for Tobacco Control include **Facebook**, <http://www.facebook.com/pages/Green-Lung/116462678499> **Blogs**, www.usmgreenlungblogspot.com/ promotional activities including Green Lungs Carnival 2010; competitions with video/posters and song on the smoke free theme. <http://umisweb.um.edu.my/doc/berita/rules,regulation%20and%20entry%20form.pdf>
Mobile phone short SMS messages are highlighted by (Fjeldsoe 2009)

Environmental strategies:



Tobacco-free campuses: towards healthier universities and colleges

WA universities win top marks for tobacco-free policies <http://www.ashaust.org.au/lv4/campus.htm>

11/8/09: University of Notre Dame and Edith Cowan University, both in Western Australia, win ASH's top prizes for (respectively) protecting their campuses from second-hand smoke and tobacco industry interference. See [ASH media release 11/8/09](#) See [Survey summary and results table](#) See [Tobacco-free campus project poster including survey results and comments - presented by ASH at Oceania Tobacco Control Conference, Darwin, October 2009](#)

Smoke Free Locations

Smoking at ECU Current:

Smoking is not permitted:

- in University buildings including substantially enclosed areas such as balconies covered walkways and verandas
- in University vehicles
- near access/egress points (at least 3 metres away) to buildings such as doors, windows
- adjacent to external air-conditioning inlet ducts and vents in major thoroughfares
- Other areas where no-smoking signage is displayed.

[Smoke Free Workplace Policy](#) (link)

Designated areas:

Limiting the number of designated areas and ensuring that they are away from cross-traffic, access routes or walkways, air-conditioning equipment and building entrances.

<http://www.tobaccoinustralia.org.au/chapter-15-smokefree-environment/15-1-why-implement-smokefree-environments-> (Why implement smoke-free environments)

Signage:

Provide visible 'non-smoking' signage in all University courtyards and stating that smoking is not permitted elsewhere on campus. (If campus becomes completely smoke-free).

Tips/information on avoiding exposure to smoke (home, car, workplace):

www.smokefreezone.org (Car and home smoke-free zone)
http://www.smokefreezone.org/index.cfm/page_id/1013 Environmental tobacco smoke and strategies to reduce exposure).

"As a minority of students and staff will be smokers (less than 19% in 2007), managers need to decide, in consultation with staff and students, if the campus should establish designated smoking areas, how many and if they should be phased out at a later date. Where designated smoking areas are established, consideration

should be given to reducing the risks associated with smoke-drift into access areas and indoor workplaces.” {ASHAustralia, 2009 #480}.

Air Quality Advocacy

Student’s advocacy initiatives known as Green Lungs has been initiated in University Sains Malaysia providing avenue for student empowerment and ownership of health issues and alignment with environmental impacts of smoking. Behavioural initiatives can align with environmental activities on campus.

[https://sukaweb.penang.gov.my/pkn/Akhbar.nsf/981d6336478572e5482575e6002c4e9f/d34d04e2df48d9024825764200272f74/\\$FILE/091001%20Students%20show%20support%20for%20smoke-free%20environment.pdf](https://sukaweb.penang.gov.my/pkn/Akhbar.nsf/981d6336478572e5482575e6002c4e9f/d34d04e2df48d9024825764200272f74/$FILE/091001%20Students%20show%20support%20for%20smoke-free%20environment.pdf)

Student Accommodation

On campus accommodation at ECU:

ECU village (63045760), Currently smoking is not permitted inside the rooms, but outside is permitted. Similar rules apply at the accommodation village as it does on the ECU campus.

<http://www.ecu.edu.au/student/student-health/studentOHS.php> (link)

According to (Gerson 2005), providing a US example, demonstrated that enforcement of residential hall smoke free policies increase the range of positive outcomes where smokers were reduced.

On-campus accommodation provides a captive audience to undertake intensive educational programs. Engagement opportunities for funding intervention evaluation will demonstrate transferability of initiatives if appropriate (ie Healthway).

Employment

Employment opportunities in regard to smoking:

In regard to employment, The Heart Foundation will employ only non-smokers. At the time of implementing the Tobacco Policy, existing Heart Foundation employees who were smokers were encouraged and supported to give up smoking if they wish to do so.

Support to Quit Smoking at The Heart Foundation: (Taken out of tobacco Policy Guidelines from The Heart Foundation).

Heart Foundation employees who are smokers should be encouraged and supported to give up smoking if they wish to do so. However, all employees must comply with the guidelines set out in this policy.

Employees seeking help to quit smoking should be referred to the Cancer Helpline 131 120 or the *Fresh Start* Program Coordinator on 9212 4333.

Help that can be provided includes:

- Information and self help materials on quitting smoking
- The *Fresh Start* community courses on quitting smoking (at no charge to staff)
- Referral to complementary services where requested

Health checks:

Providing subsidised health checks at the student health centre for staff and students and information available for smoking cessation.

Employee assistance program (EAP): (Used by Smoke Free RAC: Breathe Easy 2009)

ECU current EAP support http://www.hr.ecu.edu.au/osh/html/employee_assistance.cfm

Each workplace may have their own service provider to assist individuals to quit smoking, and deal with other personal and work related issue. For information, go to Employee Assistance Professional Association Australia <http://www.eapaa.org.au/>

What is an Employee Assistance Program? An Employee Assistance Program (EAP) is a work-based intervention program designed to enhance the emotional, mental and general psychological wellbeing of all employees and includes services for immediate family members. The aim is to provide preventive and proactive interventions for the early detection, identification and/or resolution of both work and personal

<p>problems that may adversely affect performance and wellbeing. These problems and issues may include, but are not limited to, relationships, health, trauma, substance abuse, gambling and other addictions, financial problems, depression, anxiety disorders, psychiatric disorders, communication problems, legal and coping with change.</p> <p>The Employee Assistance Professional Association of Australia (Inc): Is the Peak Australian Body representing provider and user members that supply Employee Assistant Programs in the workplace. In co-operation with employees and management, EAPAA members' primary objective is to provide the most effective employee assistance services to individuals and their families suffering from personal or work related problems, which negatively affect their work and wellbeing.</p>
<p>Fleet Vehicles</p>
<p>Smoke retention in fleet vehicles - While ECU has existing policies on non-smoking in it's vehicles, concern from a range of users were outlined during research period. Revisiting current procedures and enhancing signage and education activities should be undertaken.</p>
<p>Policy Communications (Note ECU conforms to a range of Tobacco Policies {ActionOnSmoking&Health, 2007 #476})</p>
<p>According to Cancer Council WA 2009 - Introducing a smoke-free policy could greatly benefit workplaces for the following reasons:</p> <ul style="list-style-type: none"> • Less employee absenteeism • Increased productivity on the job • Decreased early retirement due to ill health • Lower annual healthcare costs • Lower risk of fire damage, explosions and other accidents related to smoking • Lower fire insurance premiums • Lower cleaning and maintenance costs • Reduces the risk of legal action from second hand smoke injuries • Reinforces the commitment to a healthier workplace • Raises awareness of health risks of smoking and encourages employees to cut down or quit
<p>Purpose of the policy (i.e. to avoid the harmful effects of smoking & exposure to second hand smoke)</p> <ul style="list-style-type: none"> • A link between the smoke-free policy and organisational values • Time-frame for implementation • A clear statement of where smoking is not permitted, for example on the premises, in work vehicles, at work functions and whilst wearing work uniforms Details of support available for smokers such as quit smoking courses • Consequences of non-compliance with the policy • Contact persons who can answer questions related to the policy
<p><u>Orientations:</u> Orientation packages for staff need to adequately accommodate smoke free education and dissemination</p>
<p><u>Student Charters:</u> Agreements to work under conditions outlined by the university should be developed in consultation with the Student Guild for dissemination each school year and included in the 'red book'</p>
<p><u>Advertising:</u> No advertising or selling tobacco products on campus. The University will not accept funds for research projects, grants, student scholarships or other material considerations from the tobacco industry or related third parties and investment strategies involving tobacco companies either directly or indirectly are prohibited also. {ActionOnSmokingandHealth, 2009 #477}</p>
<p><u>Regional enforcement support</u> – SW Hospital and SW Population Health should be consulted to support smoke-free implementation. Bunbury campus staff highlighted issues related to Hospital staff and patients smoking on ECU campus the result of Smoke-Free hospital campus adjacent.</p>

Enforcement of policy:

Develop a plan as to how the policy will be enforced.

Train staff to enforce the smoking policy throughout the University.

Implementation And Responsibilities

<http://staff.uow.edu.au/content/groups/public/@web/@ohs/documents/doc/uow016890.pdf> (University of Wollongong).

Particular attention will be given to ensure that:

- all employees and students are fully aware of the policy and their obligations;
- management is aware of its responsibility to ensure the policy is enforced;
- complaints with regard to alleged breaches of the policy are dealt with in an expeditious manner;
- it is, in the first instance, the responsibility of managers to seek to resolve any breaches of the policy. While recognising the need for sensitivity with regard to the enforcement of a smoke free workplace policy, the University aims to protect employees, students and visitors from the hazards associated with passive smoking, as set out by the "Smoke-Free Environment Act2000".

Smoking in the Workplace

Enforcement and disciplinary procedures

(Cancer Council NSW)

<http://www.cancercouncil.com.au/editorial.asp?pageid=391>

Clear procedures should be developed taking into account the following:

It should be made clear that compliance with the policy is a condition of employment.

Normal staff disciplinary procedures should apply. It should be noted that the first response to non-compliance by staff should involve counselling, ensuring that the policy and reasons for it are explained in detail.

If customers breach the policy, appropriate staff should be given the duty of politely informing or reminding the smoker that the premises have been designated smoke-free

How another University deals with Smoke Free Policies

In accordance with the Royal Melbourne Institute of Technology Occupational Health and Safety Policy, smoking is not permitted within any University buildings or vehicles.

Staff who decide to stop smoking will be supported by:

- (i) reimbursement of up to \$100 for attendance at an approved stop smoking course or for medical expenses beyond those claimed by the individual under Medicare.
- (ii) allowing time off work to attend approved programs or seek medical attention up to a maximum of eight hours.

The above clauses are effective immediately and apply once only per individual. Cost reimbursement and time off work are departmental responsibilities.

In dealing with an employee who refuses to stop smoking within RMIT buildings and vehicles, management should:

- (i) adopt a sympathetic approach
- (ii) Offer assistance as in 2(a)(i) and referral to internal or external sources
- (iii) be encouraged to see an appropriate counselling service
- (iv) only as a last resort and after discussion with the union concerned, consider commencing disciplinary procedures.

People and Culture will be responsible for ensuring that information to applicants including Employment Advertisements indicate that smoking is not permitted in any buildings or vehicles.

In dealing with a student who refuses to stop smoking, staff (Royal Melbourne institute Technology)

- (i) adopt a sympathetic approach
- (ii) offer assistance by referring to internal or external source
- (iii) refer to an appropriate counselling service
- (iv) only as a last resort after discussion with admin team, consider commencing disciplinary procedures

Penalties:

Develop penalties for breaches of the policy, they should be identified and reviewed depending on existing laws. (Fines for smoking or having someone patrol the University and ask those smoking to stop? Possibly given a certain amount of warnings?)

(Department of Health Government of South Australia 'Your Smoke-free Workplace')

http://www.tobaccolaws.sa.gov.au/Portals/0/WPA_YourSmokefreeWorkplace.pdf

How will the legislation be enforced?

Enforcement of the legislation will be provided by a team of Government Tobacco Control Inspection Officers and supported by Occupational Health and Safety Inspectors at Workplace Services.

Employers or employees can telephone **1300 363 703** (Monday to Friday 9am – 5pm) if they are

having problems enforcing the laws or would like further information.

What are the penalties?

If smoking occurs in an enclosed workplace in contravention of the Act, the employer with responsibility for the workplace is guilty of an offence. The maximum penalty for this offence is \$1,250 and the expiation fee is \$160. Individuals contravening the Act are also subject to a penalty maximum fine of \$200 or expiation fee of \$75.

How will the penalties be applied?

Expiation fees (on-the spot-fines) will most commonly be issued to offenders who are found to breach the legislation on a single occasion. Inspectors will however be able to proceed with the option to prosecute, which will mean an appearance in court, if it is appropriate.

Monitor and evaluate

Monitor and respond to feedback from students, staff and visitors - specifically on implementation and enforcement processes. Identify any areas of non-compliance or confusion and make sure the policy is being applied equitably.

Key indicators to measure and evaluate

- The level of compliance by user groups. For example, are students, staff, managers following the policy? Is signage effective? Are people smoking in the toilets and change rooms?
- The level of satisfaction with policy. For example, is the non-compliance strategy working? Has satisfaction with the policy increased amongst non-smokers, smokers? Do the policy enforcers need more training? Are complaints being adequately addressed?
- Policy outcomes. For example, what percentage of smokers have quit or tried to quit? Are students and staff better informed about tobacco harm? Has support for tobacco-free environments increased? Is there less exposure to second hand smoke?
- Tobacco use on campus?

Debrief the Tobacco-free Working Group and assign duties for ongoing activities including maintaining the monitoring and evaluation plan. {ASHAUST, February 2009 #485} (Example from Royal Melbourne Institute of Technology, 2009)