



Passive smoking in the workplace

Passive smoking results from breathing in a combination of other people's exhaled tobacco smoke – the smoke drawn in by the smoker and then breathed out – and the smoke released from the cigarette's burning tip. Together, these are referred to as second-hand smoke.

Second-hand smoke contains over 4,000 chemicals, many of which are known to be cancer-causing agents such as arsenic and benzene. Particles in second-hand smoke tend to be smaller than those in smoke drawn directly from cigarettes, meaning they can penetrate deeper into the lungs¹.

Passive smoking in the workplace

Health Scotland recommends that workplace tobacco policies must address the issue of second-hand smoke². In Scotland, 23% of men and 14% of women who are non-smokers are exposed to second-hand smoke in the workplace³.

Workers in some environments are liable to experience much greater exposure to second-hand smoke and are therefore more likely to suffer ill-effects. Bar staff are an obvious example, but office workers and those in manufacturing industries are also at risk.

Smoking policies in the workplace

The introduction of smoking policies that restrict or ban smoking in the workplace can result in a reduction in the short-term effects of passive smoking and improve the quality of the working environment for all staff. Smoking policies that ban smoking in the workplace have also been shown to encourage smokers to give up smoking, with quit rates of between 12-39%. Those who continue to smoke tend to reduce their intake by three to four cigarettes per day⁴⁻⁷.

In 2000, the Scottish Licensed Trade Association and the Scottish Tourist Forum launched a voluntary charter on smoking in public places, which includes provision of non-smoking areas for customers. In Scotland, it is estimated that seven out of ten pubs still allow smoking throughout their premises⁸.

Ventilation systems are used as a means of reducing exposure to second-hand smoke in workplaces and leisure facilities, but research suggests that the air-flows possible with current ventilation systems are not sufficient to eliminate the health risk associated with second-hand smoke⁹.

Employers' responsibilities

Employers have a responsibility in law to look after the health of their employees. The issue of second-hand smoke is addressed in a number of laws and regulations². For example, Section 2(e) of the Health and Safety at Work Act 1974 requires employers 'to provide and maintain a safe working environment which is, so far as is reasonably practicable, safe, without risks to health and adequate as regards facilities and arrangements for their welfare at work'.

Regulation 6 of the Workplace (Health, Safety and Welfare) Regulation 1992 states that 'effective and suitable provision shall be made to ensure that every enclosed workplace is ventilated by sufficient quantity of fresh or purified air', while Regulation 25 requires employers to make 'suitable arrangements to protect non-smokers from the discomfort caused by tobacco smoke'.

The Management of Health and Safety at Work Regulations 1999 require employers to assess and minimise the risks to the health and safety of their employees.

References

1. National Health and Medical Research Council. (1991) *Standard for the Uniform Scheduling of Drugs and Poisons No 6*. Canberra: Australian Government Publishing Service.
2. NHS Health Scotland, ASH Scotland, COSLA. (2004) *Tobacco at Work* Edinburgh: NHS Health Scotland.
3. Shaw A *et al.* (2000) *Scottish Health Survey 1998*. Edinburgh: Scottish Executive.
4. Brenner H, Fleische B. (1994) Smoking regulations at the workplace and smoking behaviour: a study from southern Germany. *Preventive Medicine* 23: 230-234.
5. Eriksen MP, Gottlieb NH. (1998) A review of the health impact of smoking control at the workplace. *American Journal of Health Promotion* 13: 83-104.
6. Willemsen MC, Meijer A, Jannink M. (1999) Applying a contingency model of strategic decision making to the implementation of smoking bans: a case study. *Health Education Research* 14: 4, 519-531.
7. Fichtenberg CM, Glantz SA. (2002) Effect of smoke-free workplaces on smoking behaviour: systematic review. *BMJ* 325: 188-194.
8. Cassels J. (2003) *Smoking in Public Places: a follow-up survey of the Scottish leisure industry*. Edinburgh: ASH Scotland and NHS Health Scotland.
9. Repace J. (2003) *A Killer on the Loose. An Action on Smoking and Health investigation into the threat of passive smoking in the UK workforce*. London: ASH.