

Why should employers encourage smoking cessation?

- Going smoke-free lowers the risk of fires and accidental injuries and can *reduce property insurance premiums*.
- Going smoke-free *reduces cleaning and maintenance costs*.
- Going smoke-free *reduces potential legal liability* from disability claims filed by non-smokers who claim harm due to second-hand smoke.
- Going smoke-free *eliminates second-hand smoke*, resulting in healthier workers and lower costs in smokers from illnesses and absences caused by conditions made worse by smoke.
 - Exposure to secondhand smoke increases the risk of developing heart disease and lung cancer by up to 30% and therefore leads to high direct and indirect costs for nonsmoking employees.¹
- Going smoke-free *reduces absence rates and increases productivity* by reducing smoking breaks, hospital stays and illnesses, like flu, extended due to smoking.
 - Smokers take almost eight days more of sick leave compared to employees who do not smoke.²
 - Absenteeism decreases and workplace productivity increases over time when employees quit smoking.³
 - Tobacco use is the leading contributor to worker lost production time, more than alcohol consumption, family emergencies, age, or education, according to a national study of the American Productivity Audit data of the U.S. workforce.⁴
 - Lost productivity costs are about \$4,430 per year for current smokers compare to \$3,246 per year for former smokers and \$2,623 per year for nonsmokers.⁵

In sum, *smoking cessation is cost-saving and has a positive health impact*. Effective cessation programs generally include counseling and medication and a combination of the two improves success rates even more. Addressing tobacco use is an area in which employers can make a positive impact on the health of employees and the health of their organization.

(Sources: Centers for Disease Control and Prevention, *Save Lives, Save Money: Make Your Business Smoke-Free*, June 2006

1,2 U.S Department of Health and Health Services. *The Health Consequences of Involuntary Exposure to Tobacco Smoke: A Report of the Surgeon General*, Atlanta, GA: U.S. Department of Health and Human Services, Centers for Disease Control and Prevention, Coordinating Center for Health Promotion, National Center for Chronic Disease Prevention and Health Promotion, Office on Smoking and Health, 2006.

3 Halpern MT., Shikiar R., Rentz AM., Khan ZM.. *Impact of Smoking Status on Workplace Absenteeism and Productivity*. Tobacco Control, 2001; 10: 233-38.

4 Stewart WF., Ricci JA., CheeE., Morganstein D. *Lost Productive Work Time Costs from Health Conditions in the United States: Results from the American Productivity Audit*, Journal of Occupational and Environmental Medicine, 2003;45(12):1234-46.

5 Bunn WB., Stave GM., Downs KE., Alvir JMJ., Dirani R. *Effect of Smoking on Productivity Loss*. Journal of Occupational and Environmental Medicine, 2006;48(10):1099-1108.