

2012

Grantsville City Report

Tobacco Use in the Workplace Survey Results

Abstract: Tobacco use is the leading cause of preventable illness and death in the United States and is responsible for 443,000 deaths per year.¹ One study found that the implementation of a smoke-free campus policy in an office workplace that already had a smoke-free policy for indoor settings was associated with an increase in quit rates and a reduction in daily cigarette consumption among continuing smokers.² Further by reducing tobacco use in the workplace, a positive correlation to employee health is observed and thusly decreases overall health related costs. Currently there is little data regarding tobacco use habits in the work force for the Tooele County area. It is, therefore, hard to anticipate tobacco cessation needs for the work force population. Because work place tobacco use is an indicator for general tobacco use and because further social indicators can be used as benchmark statistics, the work force population in Tooele County makes a perfect target group for study. It is the intent of this study to provide initial demographic data in the workforce and also give an impression whether company smoking policies affect user habits regarding tobacco products. The initial results from this study do suggest that strict smoking policies that are known by the employees and enforced do indeed lead to less tobacco use.

TOOELE COUNTY
CHAMBER OF COMMERCE
& TOURISM

TOOELE
COUNTY
HEALTH DEPARTMENT

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Executive Summary:

It is estimated that businesses can save as much as \$3,383 a year for each smoker who successfully quits.³ The inverse is also true; on average, companies spend an additional \$3,383 above the cost of an average tobacco free employee a year in health care costs, lost workdays, and loss of productivity for smoke breaks.³ Based on that information and the Tooele County's 2011 estimated population of 59,615 people, the resulting economic workplace burden would be about \$208,652 annually. *The Tobacco Use in the Workplace Survey* showed that among tobacco users 57% wanted to quit with 13% uninterested in quitting and 30% unsure. It was found that in Tooele County 58% of respondents that tried to quit did so without any help (cold turkey) and according to the Centers for Disease Control and Prevention (CDC) this is the least effective way to quit.

Through the entire study, data showed that strict smoking policies that are known by the employees and enforced are more effective at reducing smoking rates than policies that were either more lenient, not strictly enforced, or where employees lacked knowledge about the policy. The study showed that employer cessation programs are underutilized in their current states, non-existent and not even known by the majority of employees. CDC recommends support networks as a positive way to assist in tobacco cessation. Because employees spend so much time at work, employer programs are an ideal setting for support networks and cessation programs. Employer programs can often act as an incentive of employment.

Education is also a significant factor as it relates to tobacco use. This seems to indicate education as a probable means for developing clear policies with a training component as an effective means of limiting workplace tobacco use. Although no employees currently use tobacco in Grantsville City, the adoption of clear tobacco policies, training and help programs is still recommended to be beneficial for future growth. The majority of employees are not aware of any assistance offered by the company to assist with cessation. It is recommended that programs, if they exist, be clearly reported to employees.

As a final recommendation, it is important to recognize the individual struggles that many tobacco users face. Employers can help by not being intolerant of the individual's needs. It is interesting that though there is no tobacco use currently, a percentage of Grantsville City employees want stricter policies regarding smoking. These employees also have little tolerance for the location smoking would be allowed (See Figure 11). Data suggests that encompassing tobacco policies that are known by the employees and enforced do indeed lead to less tobacco use. Again, though it is noted that Grantsville City does not currently have tobacco users, it is important to have a strong policy in place for future potential employees.

Introduction:

Tobacco use in Tooele County has been shown by the Tooele County Health Department (TCHD) to be higher than the average in most counties in Utah. In 2010 adult smoking was at 13.5% in Tooele whereas the state average was only 8.8%.⁴ The implication is that with the 4.7% difference for every 10,000 people an estimated \$35,000 additional cost burden is accrued. The number of quit line registrations in Tooele represented only 2.4% of the total quit line registrations. The implication is that few people in Tooele County are taking advantage of the provided help which lays the burden of quitting with individuals and employers. The higher numbers of tobacco use in Tooele are alarming also because anti-smoking ads are also run at a higher recall rate than the state average.

The Tooele Chamber of Commerce and the TCHD are partnering together to address tobacco use in the workplace. The purpose is to discover information about smokers and the workforce's current tobacco policy in Tooele County. A study performed by graduate students from Westminster College provided a great opportunity for the TCHD to gather some demographics on the working adult smoker population in Tooele County which was previously unavailable. This has been a tool for your company in determining if you need to create, update, or gather some ideas to help enforce your current tobacco policy.

It is estimated that businesses can save as much as \$3,383 a year for each smoker who successfully quits.³ The inverse is also true. On average, companies spend an additional \$3,383 above the cost of an average tobacco free employee a year in health care costs, lost workdays, and loss of productivity for smoke breaks.³ The following report includes the methodology for collecting the data, pertinent data to Grantsville City and conclusions based on epidemiological principles, bio-statistical analysis and information from TCHD.

Methods:

As a study often requires multiple approvals and conditions in order to maintain highest data integrity and ethical conduct, it was deemed that a survey based study was most appropriate. The Tooele Chamber of Commerce and the TCHD distributed surveys to businesses in Tooele County that had employees of 50 or more, as well as businesses that wanted to participate with the survey. Businesses were solicited through the Tooele Chamber of Commerce monthly paper, the Tooele Transcript Bulletin, and cold calling.

Approval by Westminster Colleges Institutional Review Board (IRB) and TCHD allowed graduate students from Westminster College, in Salt Lake City, to create, collect and analyze the data from the surveys. Surveys were administered through Survey Monkey, an online survey source which logs IP addresses used for data collection and randomly assigns a user ID number to be associated with each individual survey to maintain anonymity. Data was saved as a raw data file that can be traced back to the original Survey Monkey files. The data of the raw file was quality controlled (QC) against Survey Monkey to ensure accuracy. Analysis includes using Statistical Packages for the Social Sciences (SPSS), Survey Monkey, Microsoft Excel statistical software, and Statistical Analysis Software (SAS). Each analysis was QC by the other members of the team to ensure data integrity and correct interpretations by the analysis software.

After collection and analysis were completed, Westminster College graduates formed conclusions based on the data and compiled a report for each of the participating companies including TCHD, Tooele Chamber of Commerce and the Director of Public Health at Westminster College.

Data for Grantsville City:

Grantsville City had a total of 26 employees participate in the Tobacco in the Workplace Survey. Demographic information gathered from the survey is presented in Figures 1-5. The results of the survey show that 100% of the employees at Grantsville City do not use tobacco products (see Figure 6). Because there are no current tobacco users at Grantsville City there is no daily use statistics. The most interesting parts of the study are that 26% of the employees formerly used tobacco products; of those that quit 66% of those quit cold turkey. In addition one third of the company is unsure of the companies' tobacco policy but of those that know the policy the vast majority was satisfied with it. The most significant point of data is where 22 out 26 employees either do not know of any work program or state there is no work programs to assist in tobacco cessation. The importance of this is that 26% of the employees were former tobacco users but none of them knew of any assistance offered by their employer.

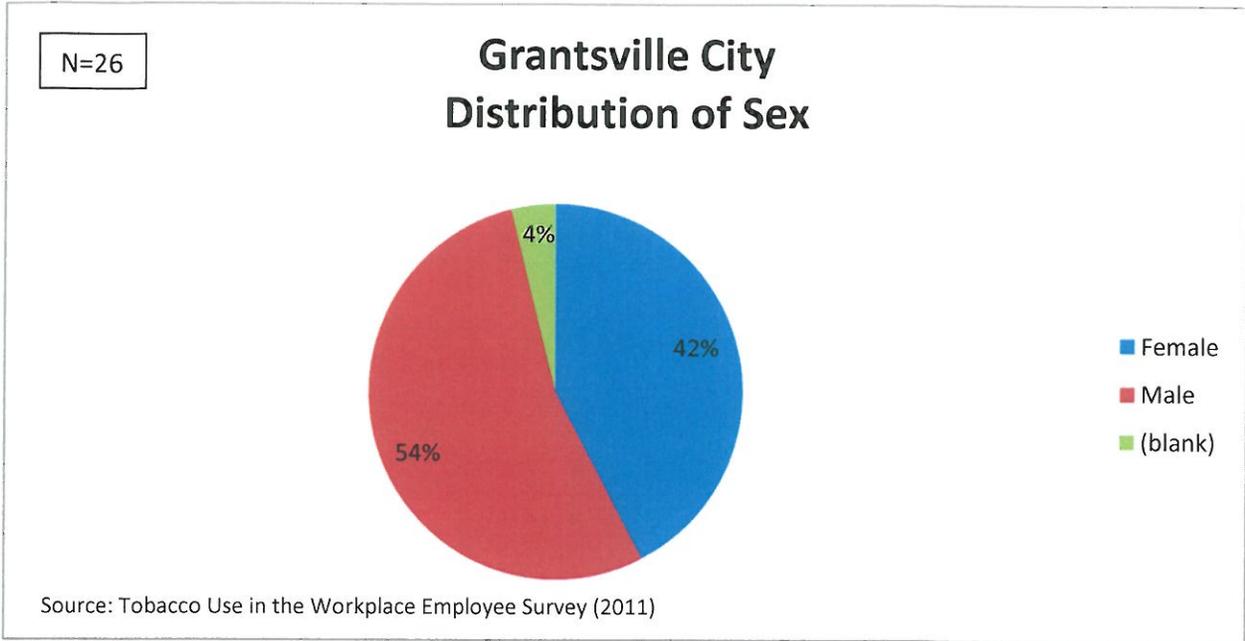


Figure 1: Gender normally distributed, Tooele County, Utah, 2011.

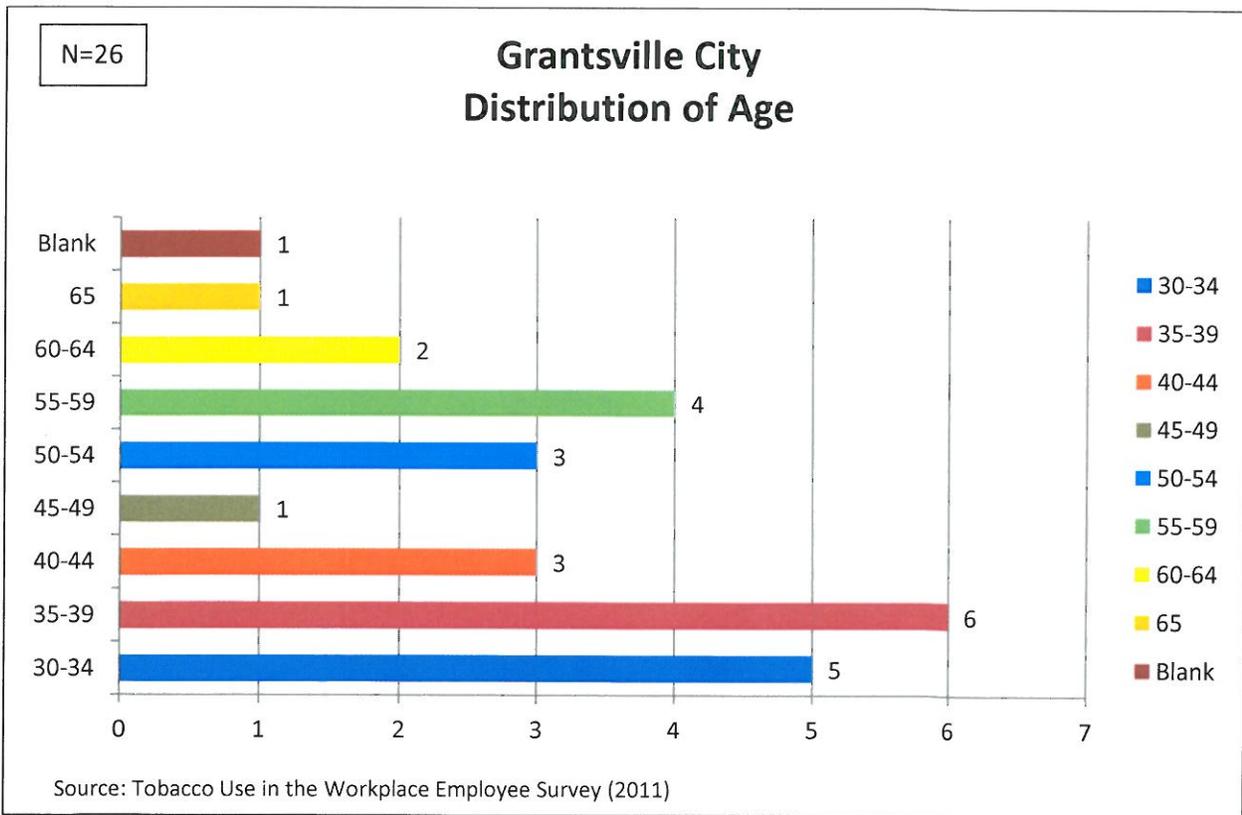


Figure 2: Age has a bimodal distribution and did not have any correlation with tobacco use, Tooele County, Utah, 2011.

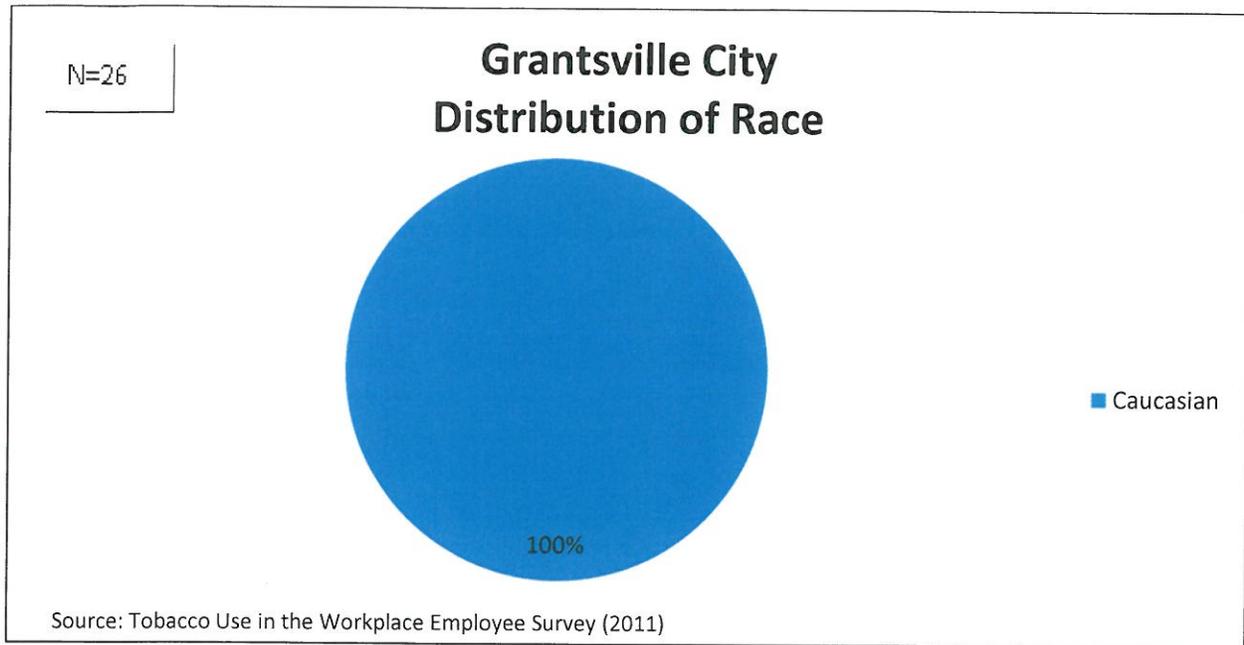


Figure 3: There is no ethnic distribution, Tooele County, Utah, 2011.

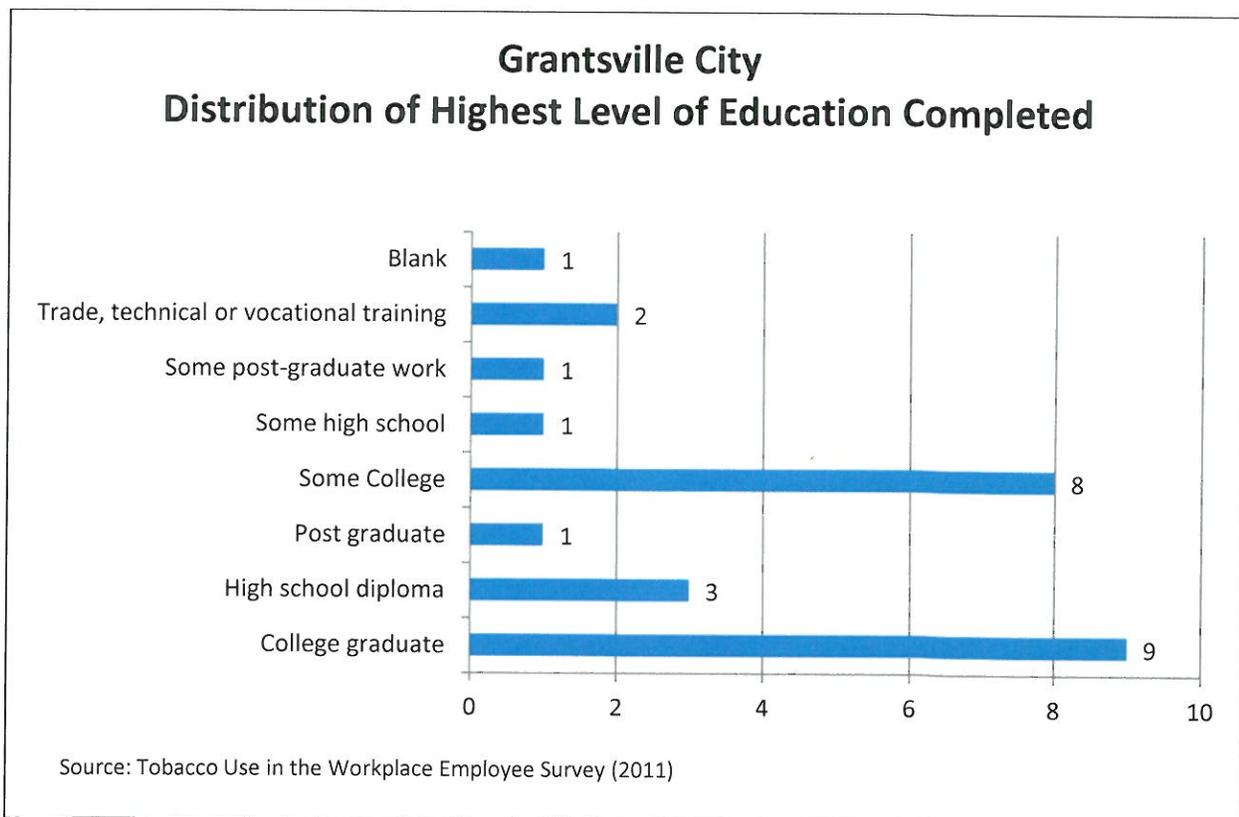


Figure 4: Grantsville City has a high general level of education. Education was a significant factor as it relates to tobacco use which seems to indicate education as a probable means for developing clear policies with a training component and the development of smoking cessation programs. Though there is no tobacco behavior in Grantsville City the adoption of clear tobacco policies, training and help programs is still recommended to be beneficial for future growth or employee cycling events, Tooele County, Utah, 2011.

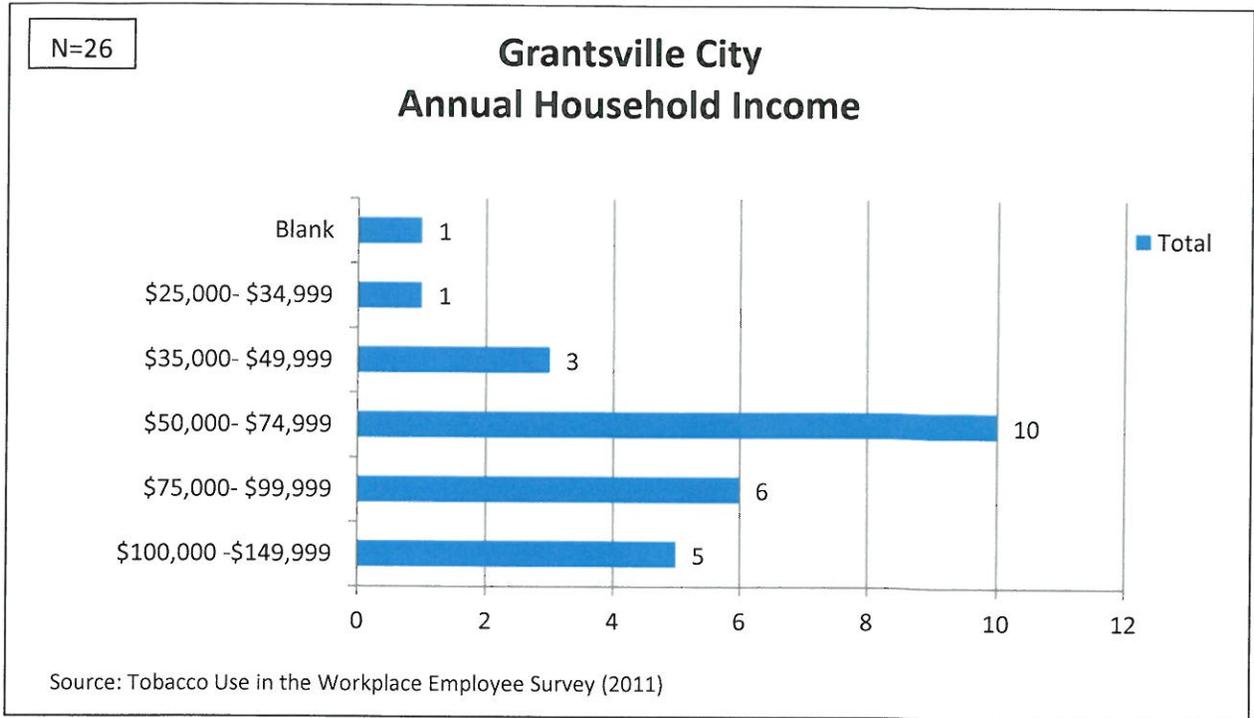


Figure 2: Income normally distributed and slightly skewed in the positive end, Tooele County, Utah, 2011.

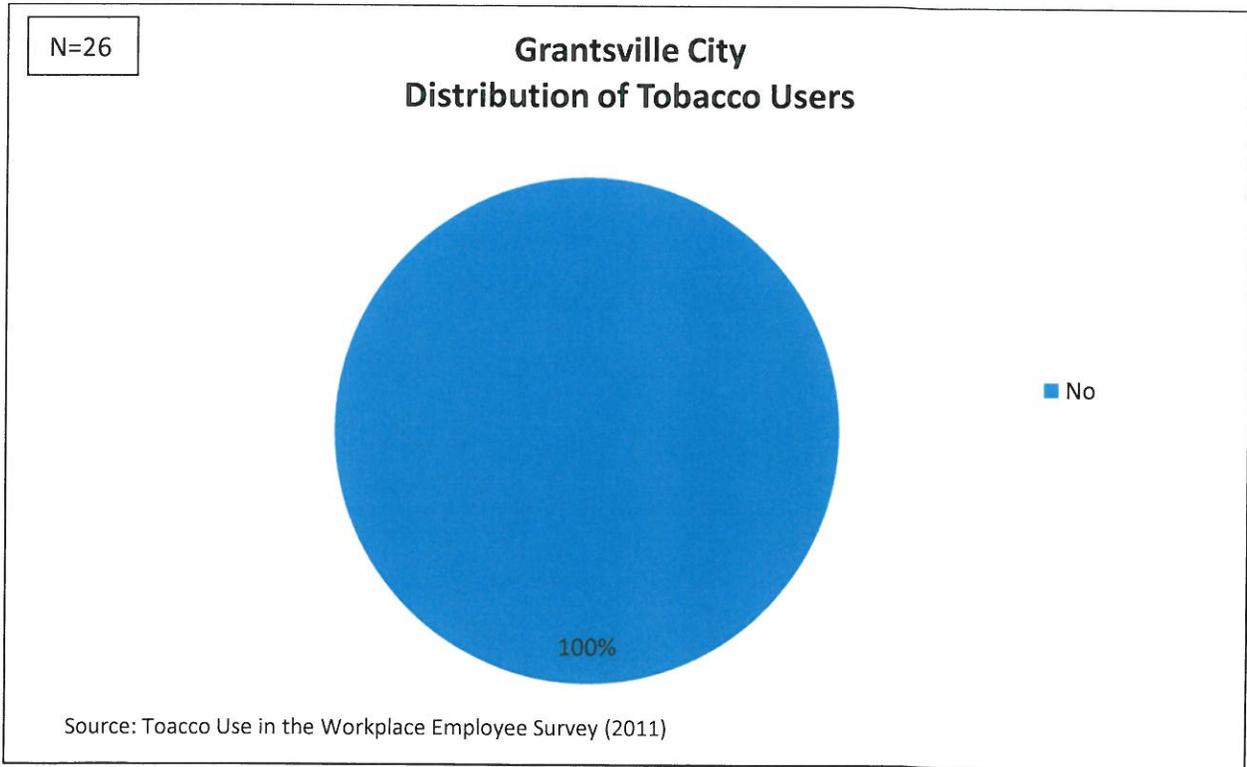


Figure 3 : There are no employees at Grantsville City that currently use tobacco, Tooele County, Utah, 2011.

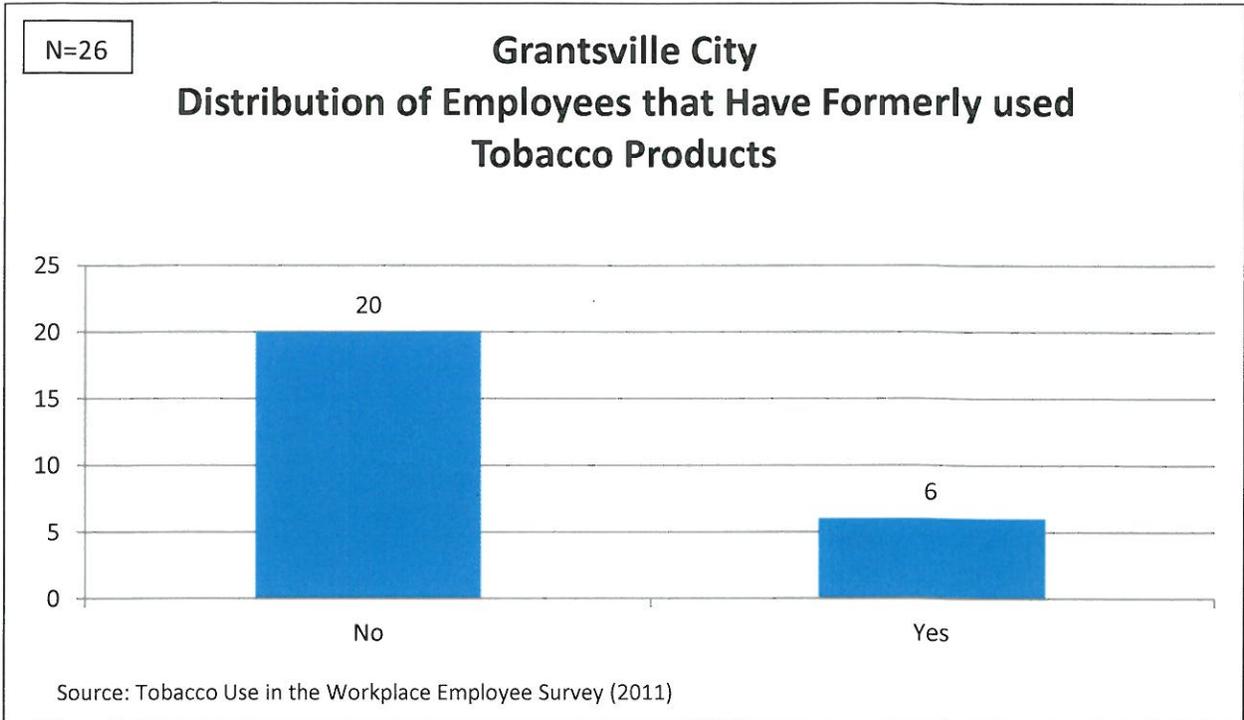


Figure 4: In the past about 1 in 4 used to use tobacco products and all have stopped, Tooele County, Utah, 2011.

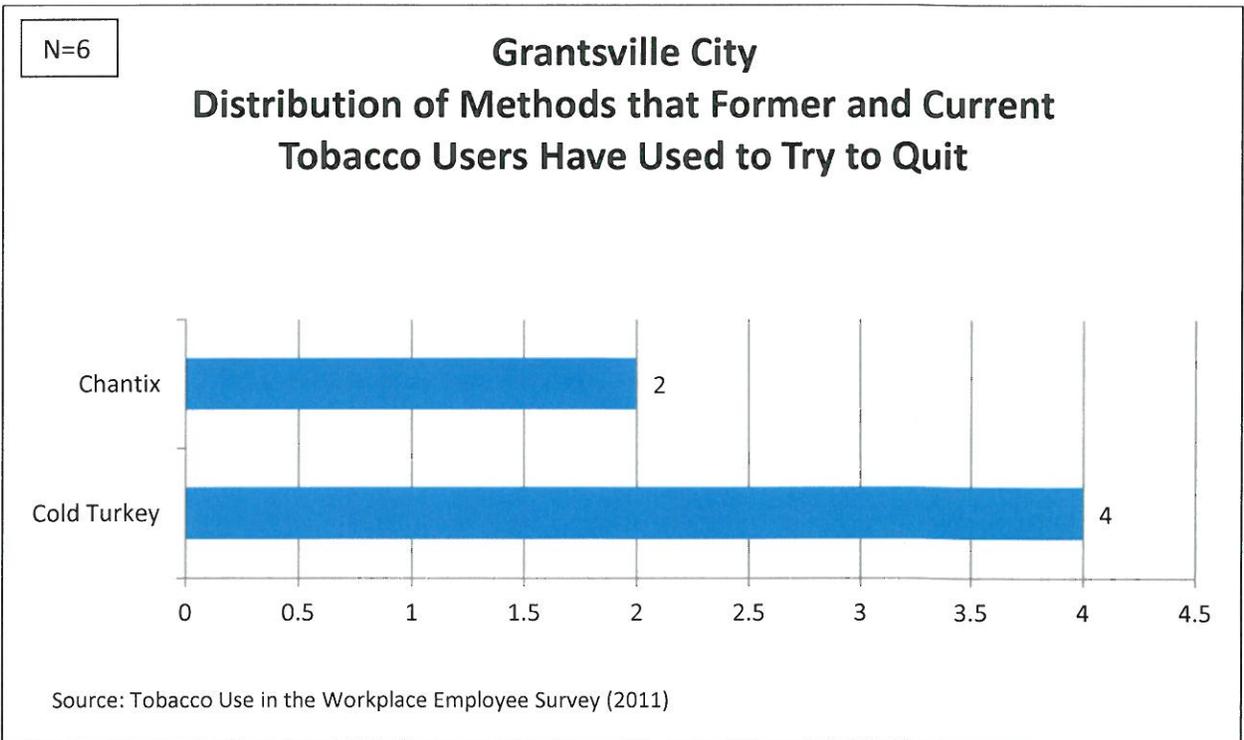


Figure 5: The majority of people that have quit did it cold turkey indicating that the individuals feel that it is their burden. It must be noted that according to the CDC this is the least effective way to quit and maintain a tobacco free life. Though effective here it is recommended to create a cessation program to assist cessation for future potential employees that have cessation desires, Tooele County, Utah, 2011.

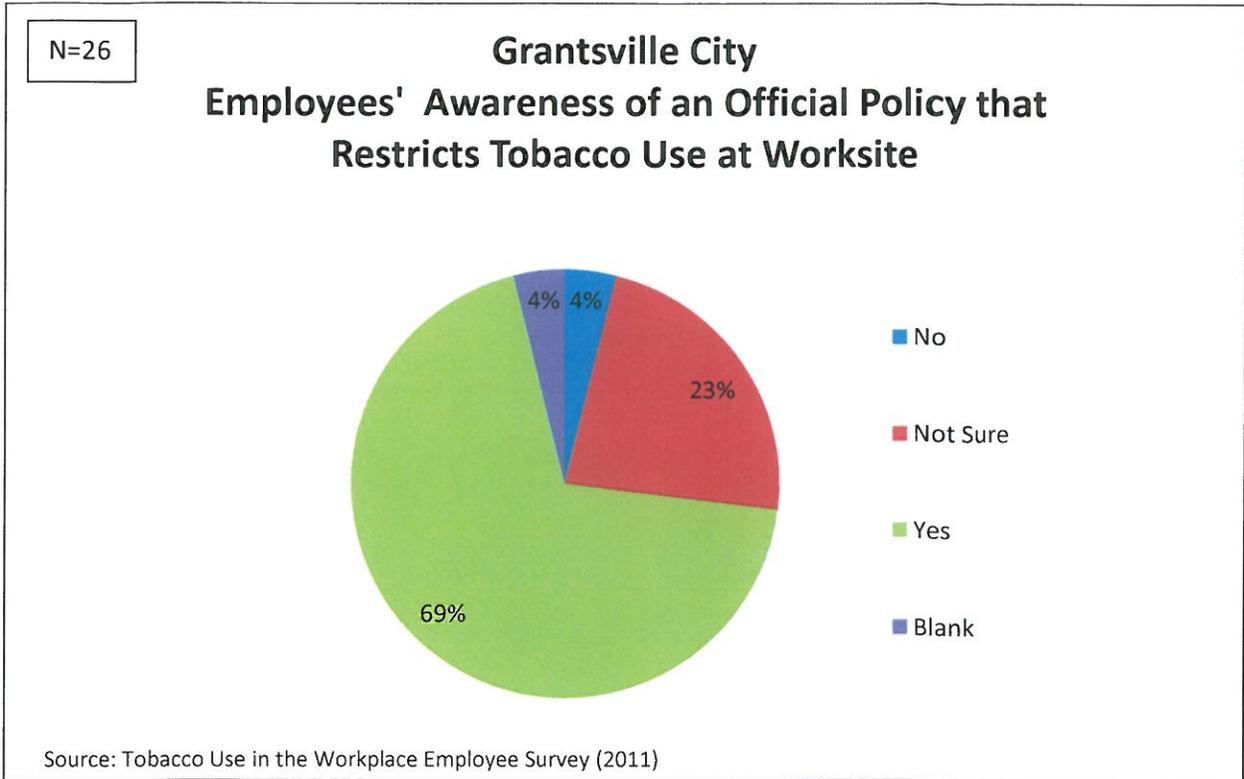


Figure 9: Eighteen of the 26 employees are aware of Grantsville City tobacco policies. It is recommended that policies are updated if needed and conveyed to the employee populace and may need to include training to gain 100% awareness, Tooele County, Utah, 2011.

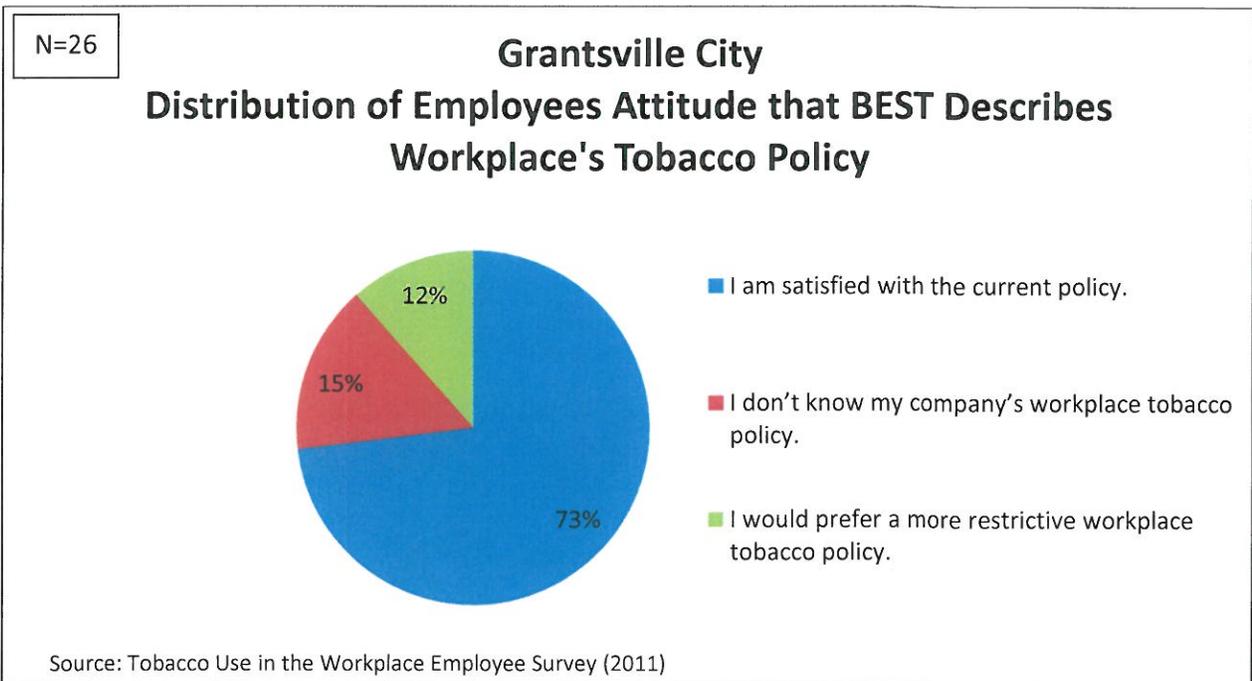


Figure 10: The most interesting thing to note on this graph is though there is no one using tobacco at the workplace in Grantsville City; about 3 people want stricter tobacco use policies, Tooele County, Utah, 2011.

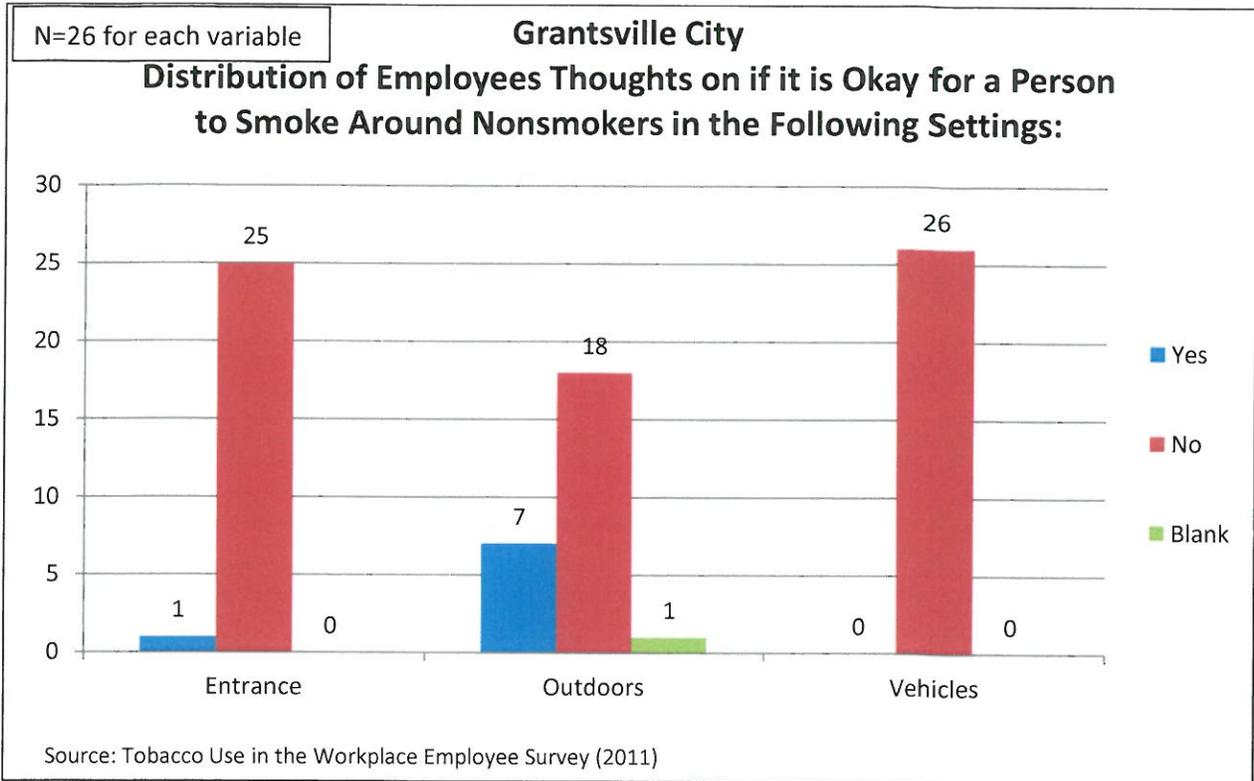


Figure 11: This graph is informative in helping to identify areas that could be modified or addressed in tobacco use policies at the workplace. Again this would require a clear statute as well as education for the employees as well as possible training. It is also interesting to note areas of tolerance, Tooele County, Utah, 2011.

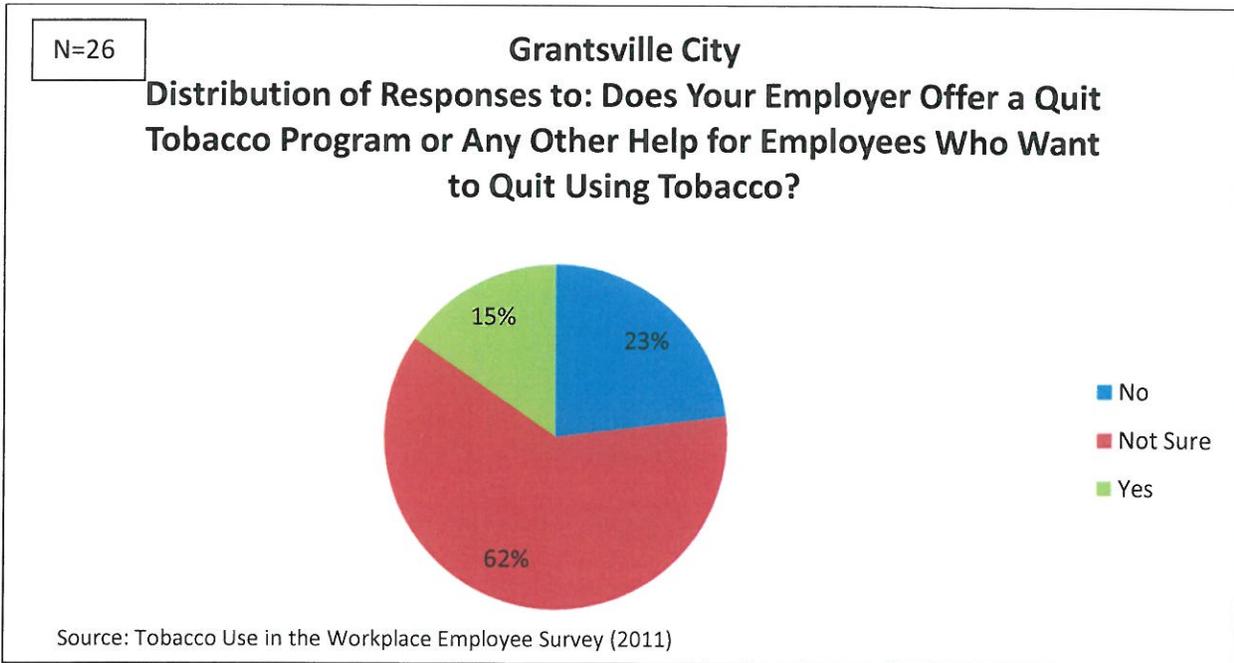


Figure 12: The majority of employees do not know of any assistance offered by the company to assist with cessation. It is recommended that programs are clearly reported to employees if they exist. Further, if no program is in place we suggest one gets implemented as the data suggests a very high probability for success with in your company, Tooele County, Utah, 2011.

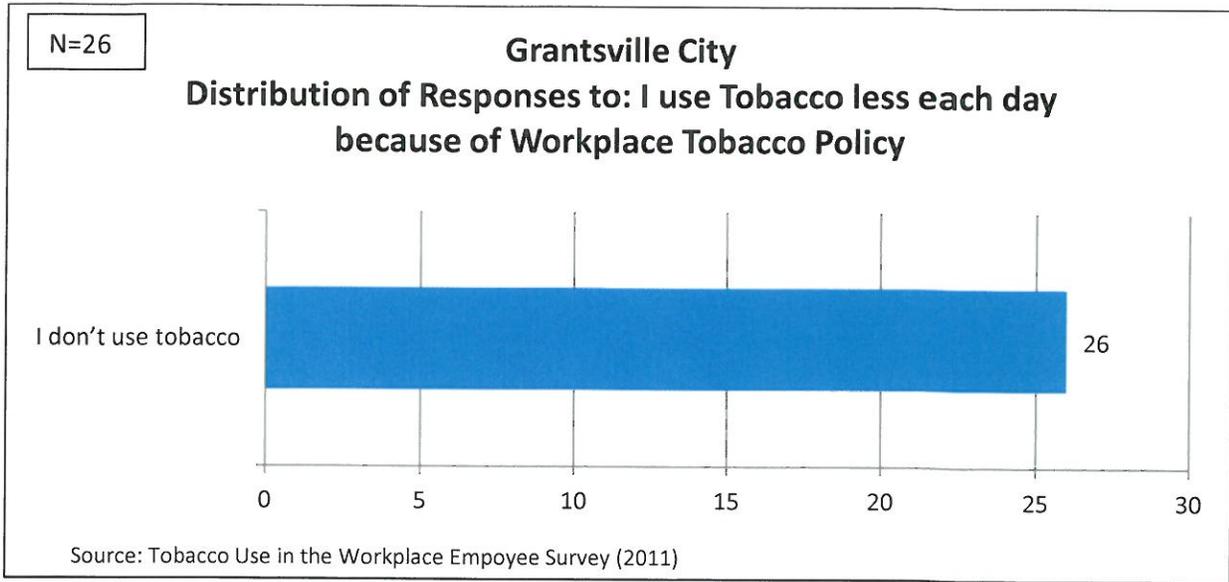


Figure 6: no comment, Tooele County, Utah, 2011.

References:

¹ Centers for Disease Control and Prevention. Smoking-attributable mortality, years of potential life lost, and productivity losses – United States, 2000-2004. Morbidity and Mortality Weekly Report 2008; 57(45): 1226-1228.

² Osinubi OYO., Sinha S., Rovner E., Perez-Lugo M., Jain N.J., Demissie K., Goldman M.; Efficacy of tobacco dependence treatment in the context of a “smoke-free grounds” worksite policy: A case study. American Journal of Industrial Medicine 2004; 46: 180-187.

³ Centers for Disease Control and Prevention . Annual Smoking-Attributable Mortality, Years of Potential Life Lost and Economic Costs. United States 1995-1999. MMWR 2002; 51: 300-30.

⁴ Utah Department of Health Behavioral Risk Factor Surveillance System 2010:
http://health.utah.gov/oph/OPHA_BRFSS.htm