

What do we know about the success of smoke-free workplaces, homes and cars?

There is legislation in all states and territories that requires workplaces to be smoke-free, and in most of Australia smokers are not allowed to smoke in cars with children (the age limit varies from 16 to 18 years old)¹. In some hospitals and other health services, smoking is banned on the entire grounds².

Studies have shown that making workplaces, homes and cars smoke-free^{3,4}:

- ✧ decreases the numbers of cigarettes that people smoke;
- ✧ increases the quit attempts that smokers make;
- ✧ reduces the number of relapses that smokers have;
- ✧ increases the numbers of people who quit; and
- ✧ decreases the exposure of others to second-hand smoke (environmental tobacco smoke)

Having smoke-free homes also lowers the chances that children will take up smoking⁵.

Making areas like workplaces, homes and cars smoke-free is a cost-effective way of reducing smoking in communities. These measures have worked in the general Australian community, and are likely to also have an impact on smoking rates in Aboriginal and Torres Strait Islander communities.

Although it can be very difficult to negotiate smoke-free spaces, many Aboriginal communities have been successful in doing health promotion or implementing policies to encourage smoke-free workplaces, homes and cars. Unfortunately, we mostly do not know whether these have been successful in reducing smoking, or increasing quit attempts. Hopefully we will start getting more evidence on this in the next few years.

All Aboriginal Community-Controlled Health Organisations must be smoke-free indoors (otherwise they are breaking the law), but not all have special smoke-free policies. Going smoke-free might include different approaches, like:

- ✧ smoking is only allowed in a 'smoking area';
- ✧ separate smoking areas for staff and clients;
- ✧ smoking only during award breaks;
- ✧ no smoking on the health organization grounds at all;
- ✧ staff are not allowed to smoke in front of clients



while working (both in the organisation and in the community);

- ✧ no smoking by staff in uniforms; and
- ✧ no smoking in health service cars.

Some organisations have found it difficult to put the smoke-free policy into practice for a range of reasons. Sometimes the staff and/or community have not been properly consulted about the policy and what is in the policy. Often it is difficult to confront people about smoking where they shouldn't be.

For some ideas on how to implement smoke-free workplaces, see the Induction Training Manual and the Information Sheet, "Top Tips to implement smoke-free workplaces and public community spaces".

To find out more about Aboriginal projects that have developed smoke-free policies as part of their activities, see the CEITC Project Register at <www.ceitc.org.au/project_register>

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References

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This brochure was produced with funding from the Commonwealth Department of Health and Ageing under the *Closing the Gap in Indigenous Health Outcomes – Tackling Smoking Initiative*.