



Saint Xavier
UNIVERSITY

**Tobacco-Free Campus Task Force
Recommendations Report**

February 12, 2015

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BACKGROUND

On October 16, 2014 the executive officers of the Saint Xavier University (SXU) Student Council presented a resolution (Attachment A) to SXU President Christine Wiseman requesting that tobacco and tobacco products be prohibited from the campus as of August 1, 2015.

President Wiseman and her Cabinet reviewed the resolution and formed a Task Force with representation from the various stakeholders within the University to address the following questions:

1. Is the policy appropriate as to content, or should it be amended?
2. If the policy or an amended policy issues, what is the process by which it should be implemented at SXU?
3. Other questions as identified by the Task Force.

Task Force Members

The following members were appointed to serve on the Task Force:

SXU GROUP	NAME OF REPRESENTATIVE
Faculty Senate	Arthur Morton
Adjunct Faculty	Josephine Ebomoyi
Resident Hall Assistants, student representative	Abigail Stanula
SXU Student Council	Brandon Swanson* Brooke McInerney
Staff council	Brian Condon Brian Mueller
Public Safety	Jack Touhy
Health Center	Katie Tibbits
Human Resources	Valerie Jackson
Employee Wellness Committee	Kathy Rohan*

*Co-chairs

The Task Force as a whole, as well as subcommittees of the Task Force, met on an ongoing basis from November 2014 to February 2015 (see attachment B for meeting notes) to review the proposed policy change. At the first meeting, the group appointed Brandon Swanson and Kathy Rohan as co-chairs.

METHOD

The Task Force began its work with a discussion about the necessity and nature of a new policy. It explored reasons why other universities and employers have adopted such policies. Research and extensive discussions produced a list of 10 statements of purpose.

Statements of Purpose

1. Individuals have the right to live, work and learn in a healthy environment; there is no safe level of exposure to tobacco smoke for employees, students and guests.
2. A study conducted by the Student Government Association indicated a 67% majority showed support for a smokefree campus.
3. A tobacco-free campus is a more welcoming environment for prospective students and employees and will set a positive example for the community.
4. A tobacco-free campus would discourage the initiation and increased use of tobacco products in young adults, a population primarily served by Saint Xavier University.
5. A tobacco-free campus will encourage users to reduce the consumption of tobacco while on campus and will create a supportive environment for those trying to quit.
6. There are increased costs associated with tobacco use including absenteeism, health care and medical insurance costs.
7. A tobacco-free campus is in alignment with the research based evidence and recommendations of the Surgeon General, Centers for Disease Control (CDC), American College Health Association (ACHA), National Association Intercollegiate Athletes (NAIA), and the State of Illinois Smokefree Campus Act.
8. Tobacco litter negatively impacts campus aesthetics and increases institutional cleaning and maintenance costs.
9. A smokefree campus would improve fire safety by reducing accidental fires.
10. Nicotine dependence is an addiction that is caused by use of all tobacco products.

The Task Force agreed to use these Statements of Purpose as criteria for consideration of options.

Deliberations

Extensive discussions took place about all considerations including options and the advantages/disadvantages of each. See Attachment B for meeting notes.

1. The Task Force agreed that any and all recommendations would be supported by scientific evidence. In order to accomplish this efficiently, subcommittees of Task Force members were formed and members self-selected on which to serve (note: Arthur Morton did not participate on a subcommittee):
 - a. Policy and Final Report – Katie, Kathy, Josephine, Brandon, Brian C.
 - b. Cessation programs – Katie, Valerie
 - c. Compliance – Jack, Brandon, Abigail, Valerie
 - d. Communications – Brian M., Brandon, Brooke
 - e. Budget – Brian M., Kathy

Subcommittees met on their own to conduct research and subsequently presented options and proposals to the whole group. Task Force members brought back feedback from the University constituents they were representing continuously throughout the entire process.

2. Smoker/Tobacco User Rights: The first major discussion that occurred was concerning the rights of tobacco users. Through research, it was found that:
 - a. The most common argument made by tobacco users and non-users alike focuses on personal rights. This argument is based on a misunderstanding of the difference between personal freedoms and constitutional rights.
 - b. The use of tobacco is a personal choice, not a constitutional right. A tobacco-free policy respects an individual's right to use tobacco off-campus and does not eliminate a person's choice to use tobacco products; the policy would merely establish where use can occur. Above any person's personal choices, a University has the duty to first consider the safety and well-being of all.¹
3. Policy Options: Once it was determined that tobacco-use can be legally restricted on private property, deliberations ensued regarding policy options.
 - a. Retain Current SXU Smoking Policy: The current policy (Attachment C) forbids smoking within 15 feet of doorways. This policy is not routinely followed and is difficult to enforce. Many smokers smoke directly in doorways.
 - b. Designated Smoking Areas: This option would ban smoking from doorways and would designate specific smoking areas on campus, either in an open-air area or a constructed building/tent, commonly referred to as a "butt hut." These options have been shown to encourage smoking through socialization incentives.²
 - c. Smokefree Policy: A smokefree policy would ban all tobacco products that emit smoke when they are used. The main goal would be to reduce secondhand smoke. Some of smokefree policies include e-cigarettes, some do not.
 - d. Tobacco-free Policy: A tobacco-free policy takes smokefree one step further to include all tobacco products, including chewing tobacco and e-cigarettes. Tobacco-free policies take into account overall health and ethical behavior of an institution.
4. The Task Force also examined the University's Core Values and Strategic Plan 2017 for guidance.
 - a. SXU Core Values: It was determined that the following core values supported a policy restricting tobacco use:
 - EXCELLENCE: Saint Xavier's commitment to excellence impels both individuals and the University itself to consistently strive for outcomes that are exemplary rather than simply satisfactory.
 - COMPASSION: "...mercy demands....sensitivity."
 - SERVICE: "Service call us to....advance the genuine wellbeing of our community...."
 - LEARNING FOR LIFE: "...encourages us to pursue knowledge and truth...."

- b. SXU Strategic Plan Goals: The Task Force found that a more restrictive policy addressing tobacco use would support the following goals of the SXU's strategic plan:
- Goal 1: Preparing Students for the 21st Century
 - Most SXU students have grown up with policies that restrict tobacco products on public and private property. Many employers have tobacco-restrictive policies; in fact, some employers are now refusing to hire smokers. Therefore the Task Force felt that students would be better prepared for the 21st Century workforce through a more restrictive tobacco policy.

 - Goal 2: Stewarding University Resources
 - The Task Force agreed that the potential for reduced maintenance costs, reduced health insurance claims through reduced tobacco use, reduced fires and the long term advantages of reduced tobacco use would outweigh the costs associated with a tobacco-restricted campus.

 - Goal 3: Developing Supportive Partnerships and Opportunities
 - Multiple opportunities for engagement and service learning exist. The Respiratory Health Association and the American Lung Association are ready and willing to partner with SXU for the implementation of a tobacco-restricted campus. They have offered to hold free three hour training sessions for all students majoring in a healthcare field to teach them the talking points needed to use during patient encounters.

SCIENTIFIC EVIDENCE

There is overwhelming scientific evidence to support SXU adopting a tobacco-free policy. Below is the evidence that supports all 10 Statements of Purpose developed by the Task Force. All references are cited and hardcopies are available upon request.

1. Individuals have the right to live, work and learn in a healthy environment; there is no safe level of exposure to tobacco smoke for employees, students and guests.

The negative health effects of tobacco use have been well documented since the original Surgeon General's report in 1964.³ Cigarette smoking has been proven to negatively affect a person's health, no matter what the type or level of exposure:³

1. Firsthand smoke (Active Smoking): Active smoking has now been linked to twelve separate cancers, as well as numerous chronic diseases such as heart disease, stroke, diabetes, chronic obstructive pulmonary disease, asthma, erectile dysfunction, rheumatoid arthritis, and a general decrease in immune function.³
2. Secondhand smoke (Passive Smoking): The involuntary inhalation of tobacco smoke by nonsmokers has been linked to adverse health outcomes for over 40 years.³ A 2012 report estimated that 7,330 lung cancer deaths and 33,950 deaths from heart disease were attributable to secondhand smoke annually.³ Children, who are more likely to be affected by secondhand smoke due to their inability to voluntarily leave a space where they are being exposed, have been shown to have an increased risk of asthma, chronic cough, pneumonia, and ear infections.³ Simply put, "Secondhand smoke causes premature death and disease in children and in adults who do not smoke".³
3. Thirdhand smoke: The newest area of tobacco research is thirdhand smoke, or the accumulation of secondhand smoke on environmental surfaces that ages with time, becoming progressively more toxic.⁴ Thirdhand smoke is not just the odor that emanates from a smoker's clothes, car, or home, it has now been found to contain just toxic substances as hydrogen cyanide, carbon monoxide, butane, ammonia, and arsenic.⁵

2. A study conducted by the Student Government Association indicated a 67% majority showed support for a smokefree campus.

The Student Government Association conducted a survey about having a smoke free campus. This survey was available to students, faculty and staff to express their opinions from December 2012 to April 2013. It was distributed in the diner and through the SXU list serve. As exhibited in Attachment D, the 2013 survey data collected by the Student Government Association showed that:

- The 413 survey respondents represented all stakeholders: students (resident and commuter), faculty, and staff;
- 82.8% of respondents did not smoke or use tobacco products in the past 30 days of the study; and
- 67.0% showed support of a smokefree SXU.

3. A tobacco-free campus is a more welcoming environment for prospective students and employees and will set a positive example for the community.

Currently, smokers congregate in front of the main entrances to buildings and residence halls at SXU, despite the current smoking policy. Tour guides with prospective students must walk through groups of smokers at the main entrance of the Warde Academic Center in order to continue the tour; parents of prospective students must walk through improperly discarded cigarette butts in front of Regina Hall while deciding if SXU is the right fit for their child. Students, staff, faculty, and community members often must make conscious efforts to avoid certain entrances due to the high volume of smokers and secondhand smoke emissions. Groups of congregated smokers in doorways are often the first impression people have of Saint Xavier University.

As a respected institution of higher education, SXU is invested not only in academic achievement, but also in being a leader in the community. Rather than creating a more admmissive policy, enacting a tobacco-free policy on the SXU campus would not only educate the public, local government and other organizations about the advisability of such a policy, it would demonstrate positive role modeling for the community at large.

As of January 1, 2015 there are now 1,514 100% smokefree campuses in the United States, and of these, 1,014 are 100% tobacco-free; 587 prohibit the use of e-cigarettes anywhere on campus.⁶ Many of SXU's competitors have adopted these policies, including: Aurora University, Chicago State University, Cornell College, Governors State University, Grinnell College, Joliet Junior College, Lewis and Clark College, Loras College, Moraine Valley Community College, Morton College, Mount Mercy University, Olivet Nazarene University, Parkland College, Richard J. Daley College, Rush University, St. Ambrose University, Triton College, and Wheaton College just to name a few. All Illinois State universities will be required by law to be smokefree beginning July 1, 2015. Without a more restrictive tobacco policy SXU may soon be in the minority of schools who do not have such a policy.

4. A tobacco-free campus would discourage the initiation and increased use of tobacco products in young adults, a population primarily served by Saint Xavier University.

According to the most recent Surgeon General's report on tobacco use, young adults aged 18-25 have the highest prevalence of current cigarette smoking at 31.8%.³ A 2012 survey found that of people who had ever smoked daily, the mean age in years of smoking initiation was 15.3, while the mean age of beginning to smoke daily was 18.2.³ Almost one-third of adults who had ever smoked daily began this practice between 18-26 years of age; only 1.5% of cigarette smoking initiation occurred after 26 years of age.³ According to Kathleen Carlson, Executive Director of Institutional Research at SXU, 85% of SXU undergraduates in fall 2014 were 24 years of age or younger.

Studies on smokefree workplaces have shown that teenagers who work in these environments respond to these policy restrictions by decreasing smoking.⁷ This research has also been reproduced on college campuses where it has been repeatedly found that comprehensive school policies produce a reduction in student smoking rates and smokeless tobacco consumption.⁸ A recent study showed that not only did the exposure to smoke decrease significantly over the 4 years following a tobacco ban on a college campus, in that same time period students reported a significant increase in their preference to socialize in a

smokefree environment and were significantly more in agreement with the school policy and enforcement of said policy.⁹

5. A tobacco-free campus will encourage users to reduce the consumption of tobacco while on campus and will create a supportive environment for those trying to quit.

In the United States there has been a decline in prevalence of adults who currently smoke cigarettes from 42% in 1965 to 18% in 2012.³ According to the American College Health Association (ACHA) National College Health Assessment (NCHA) conducted in spring 2011, 85% of college students described themselves as non-smokers (never smoked or having not smoked cigarettes in the last 30 days).¹⁰

More than half of all adults who have ever smoked have successfully quit smoking; there are now more former smokers in the United States than there are current smokers.³ Health benefits of successfully quitting can be realized nearly immediately and can not only subsequently lead to an improved health-related quality of life,³ it has been shown that successful quitters report a better global quality of life, improved mood, decreased stressors¹¹ and increased happiness.^{11, 12}

For those who want to quit, the smell of smoke wafting through the air can be just enough to sabotage efforts to stop. Unfortunately, of the 70% of active smokers who want to quit, only 2-3% succeed each year.¹³ One recent study found that the implementation of a smokefree policy in a workplace was associated with increased quit rates and a reduction in daily cigarette consumption among continuing smokers.¹⁴ When comparing policies that allow for smoking in some areas versus a completely smokefree workplace, numerous studies have shown that the smokefree policies facilitate double the absolute reduction in smoking.⁷ This is not new information; internal research conducted by Phillip Morris reached a similar conclusion in 1992.⁷

6. There are increased costs associated with tobacco use including absenteeism, health care and medical insurance costs.

The economic impact of smoking is substantial. Health care costs in the United States associated with smoking were an estimated \$132.5 billion in 2009, up from \$96 billion in 2004.³ A study by Cowan and Schwab¹⁵ showed that females aged 18-64 who were current or former smokers spent on average \$551 more annually on medical expenses; male current or former smokers in the same age group spent \$628 more per year on health care.

Besides direct medical costs, employers can expect additional expenses due to loss of productivity resulting from sickness and smoking breaks, increased accidents and workers' compensation costs, early retirement due to disability, increased fire insurance costs, increased maintenance and cleaning costs, and increased costs associated with secondhand smoke morbidity.¹⁶ Absenteeism is another issue; many studies have shown that nonsmokers have significantly less work absences than current smokers.^{16,17,18} Smokers have also been found to take longer and more frequent work breaks.¹⁹ The American Productivity audit, a national survey of over 29,000 workers, found that tobacco use was a leading cause of worker lost production time – greater than alcohol abuse or family emergencies. Quitting smoking, or even just cutting back, improves a worker's productivity²⁰ and health.

7. A tobacco-free campus is in alignment with the research based evidence and recommendations of the Surgeon General, Centers for Disease Control (CDC), American College Health Association (ACHA), National Association Intercollegiate Athletes (NAIA), and the State of Illinois Smokefree Campus Act.

- a. Surgeon General: The recently released 50th anniversary report on smoking reiterated the findings of the previous 29 Surgeon General reports: There is a direct link between cigarette smoking and negative health consequences.³
- b. ACHA: In 2011, ACHA published a position statement supporting tobacco-free policies as best practice for university campuses (Attachment E). ACHA supports the health goals of the U.S. Department of Health and Human Services' Healthy People 2020 initiative to reduce the proportion of adults who smoke to below 12% by the year 2020.¹⁰ ACHA's main goal in this position statement is to positively influence America's college students to help them remain or become tobacco-free.
- c. NAIA: The 2014-2015 Official Policy Handbook from the NAIA explicitly prohibits the use of tobacco products by participants, coaches, cheerleaders, trainers, game administrators, and officials in the playing areas during all NAIA-sanctioned competitions and practices for such competitions. Violations of this policy can result in expulsion from the practice, game tournament or events (Attachment F).
- d. State of Illinois: Illinois adopted the Smokefree Campus Act (Attachment G), which required all state-supported institutions of higher education to enact a smokefree campus no later than July 1, 2015.

8. Tobacco litter negatively impacts campus aesthetics and increases institutional cleaning and maintenance costs.

It is not just students who use the SXU campus as a safe place for congregation. The surrounding community views the SXU campus as not only an educational resource, but also as a park in this urban setting. It is common to see area residents pushing babies in strollers, walking their dogs, enjoying a picnic or watching fireworks from the lawn.

Due to this, considerable effort goes into maintaining the property and keeping the SXU campus litter-free. While many cigarette smokers and users of chewing tobacco dispose of their tobacco-related litter properly, it is inevitable that others do not, thereby resulting in the littering of cigarette butts and other tobacco-related packing.²¹ Multiple litter studies have shown that when counting litter on a per-item basis, cigarette butts are the number one littered item on U.S. roadways and waterways.²²

Cigarette butts are poisonous when ingested by children and other living organisms, as evidenced by poison control center data, veterinary literature, and national reports.^{23,24,25} When the remnants of smoked cigarettes and chewing tobacco are discarded in public areas, some of this tobacco waste is carried as runoff into drains, making its way into rivers and ultimately to the oceans, Great Lakes, and beaches.²⁶ SXU has made a significant investment in landscaping its campus and maintaining its property. A campus, free of tobacco litter, will improve the property aesthetics, reduce the time it takes to clean the grounds, and contribute to a sustainable environment.

9. A tobacco-free campus would improve fire safety by reducing accidental fires.

Although incidents of fires related to smoking have improved considerably in the last 50 years due to decreased smoking rates, there were still an estimated 620 deaths due to smoking-attributable residential fires in 2012.³ The smokefree policy in the SXU residence halls has led to an excellent building fire safety report;²⁷ however, Darrell Parks reported that Public Safety was dispatched to two smoldering fires in garbage cans during the Fall 2014 semester alone. These fires were linked to the use of tobacco products outside of SXU buildings. A tobacco-free campus would reduce the chance of fire on all SXU properties.

10. Nicotine dependence is an addiction that is caused by use of all tobacco products.

Nicotine is not just consumed in the form of traditional smoke-producing delivery systems, such as cigarettes and cigars. In recent years there has been a resurgence of chewing tobacco use and the invention of e-cigarettes; both of these are advertised as healthier options and ways to circumvent smokefree policies.

The use of smokeless tobacco, in the form of either chewing tobacco or snuff tobacco, has the highest overall prevalence in the 18-25 year old age group at 5.5%.³ Although the prevalence of smokeless tobacco users aged 18 years and older declined between the years 1987-2000, there has now been an upward trend in the last 15 years.³ Although there is a popular belief that smokeless tobacco is a healthier option to cigarette smoking, it has been proven to be equally harmful to one's health.²⁸ In fact, a study by Hecht et al.²⁸ showed that there were significantly increased levels of powerful carcinogens in smokeless tobacco users' urine when compared to cigarette smokers. Besides causing nicotine addiction, smokeless tobacco has been linked to cancers of the mouth, esophagus and pancreas, as well as periodontal disease and increased incidence of early delivery and stillborn births.²⁹

A relatively new product that is gaining popularity is the electronic cigarette (e-cigarette). Defined as products that deliver a nicotine-containing aerosol, or vapor, to the smoker via a heated solution, they are mainly manufactured in China and have only been mass marketed in the United States since 2009.³⁰ Although nearly exclusively advertised as a healthy alternative to smoking cigarettes, increasing amounts of research are showing the harms of e-cigarettes. The vapor from e-cigarettes has been shown in studies to emit at least 10 human carcinogens³¹ which affects not only the smoker of the e-cigarette, but those breathing in the expired smoke. Most concerning is the fact that adolescent use of e-cigarettes doubled in only a one year span between 2011 and 2012.³ Studies regarding the role of e-cigarettes and smoking cessation have yielded mixed results; currently the FDA does not classify e-cigarettes as a smoking cessation product³¹. Many municipalities, including Chicago, have added e-cigarettes to their existing smokefree policies.³¹

FINAL VOTE

After comparing the Statements of Purpose to existing research, SXU Core Values, and Vision 2017;, the Task Force decided by majority consensus to reject the first two options below. These were rejected based on scientific and anecdotal evidence:

1. Retain Current Policy: The Task Force agreed that the current policy does not satisfy the needs on the group's Statements of Purpose. Additionally, given that research overwhelmingly shows that there is no safe level of tobacco exposure and that nicotine addiction is unhealthy in all forms, the Task Force determined that it could not recommend keeping the current policy intact.
2. Designated Smoking Areas: There were two main concerns when considering this option:
 - a. A study published in the Journal of American College Health showed that “Those who interact with others in the smoking areas find smoking on campus more rewarding than those who smoke alone, they look forward to smoking in their preferred smoking area more, and they visit the preferred smoking area more often. Thus, designated smoking areas on campus are not without unintended consequences. By forcing smokers to congregate together, smokers may develop a conditioned preference to an area that provides the reward of social interaction and nicotine, increasing the reinforcement value. Therefore, although these areas may protect nonsmokers from secondhand smoke, they may also be encouraging smoking behaviors in the students that are using them.”²
 - b. There are no safe levels of secondhand and thirdhand smoke therefore the people responsible for cleaning and maintenance of a “butt hut” would be exposed to dangerous levels of carcinogens. It could be perceived that there is less concern for the health and wellbeing for these employees by creating an area that would expose them to concentrated amounts of second and thirdhand smoke.

The Task Force felt that a designated smoking area did not meet the criteria put forth by the Statements of Purpose.

After much deliberation, a vote was taken:

VOTE:

Tobacco-free campus: 8
Smokefree campus: 1
Abstain from vote: 1

The majority of the Task Force felt that a tobacco-free campus would best satisfy all the items on the Statements of Purpose list, as well as best fulfill SXU's Core Values and Goals.

TASK FORCE RECOMMENDATIONS

Policy Recommendation

Based on the overwhelming supportive evidence, and lack of evidence endorsing any other policy option, the Task Force recommends that SXU adopt a tobacco-free campus policy effective August 1, 2015 (Attachment H).

Exceptions

The Task Force recommends several exceptions to be placed in a Tobacco-Free Policy:

1. Gilhooley's Grande Saloon: Although Gilhooley's is owned by the University and is on SXU property, it was felt that this bar/restaurant should continue to be governed by City of Chicago laws.
2. Private Vehicles: The Task Force recognizes that although a tobacco-free campus policy will encourage smokers to quit, there will be campus occupants that will still choose to smoke. To reduce the number of SXU tobacco users from smoking on the parameters of our campus and increasing the amount of secondhand smoke for our neighbors, the majority of the Task Force supports allowing smoking in private vehicles on SXU property. This does not include SXU owned vehicles.

It should be noted that the Task Force did not feel that this exception was supported by the Statements of Purpose; however, as a compromise the majority felt this was an acceptable alternative to a "designated area" because it would not adversely expose other students, faculty or staff to secondhand and thirdhand smoke.

3. Research: As an institution of higher learning, the Task Force recognizes that tobacco use may be necessary as part of a university sanctioned research project. This would need to be approved by the Provost.
4. Ceremony: Individuals or groups interested in smoking as part of a ceremony in or on campus property must seek advance approval from the Provost.

FUTURE STEPS

Implementation

This Task Force recommends that an implementation team of key individuals responsible for the operation be formed. This should be comprised of individuals from Student Affairs, University Relations, Public Safety, Facilities & Maintenance, Health Center, Employee Wellness Committee, Human Resources, Faculty/Adjunct Faculty, Shannon Center, Staff Council and Student Government. Their task would be to review and refine implementation of the “3 C’s”: communication, cessation and compliance. Input from smokers will guide them in how to help smokers through the transition. The Americans for Nonsmokers’ Rights has developed steps for enacting a tobacco-free college campus policy (Attachment I). The Task Force developed base recommendations to begin this work; however working out further details was premature to the adoption of any new policy.

Communication:

As with any new initiative, a well thought out communication plan will be the key to its success. During spring and summer 2015 semesters, discussions should be held throughout the campus including the President’s State of the Union Address, official university committees and groups, and registered student organizations. These meetings will:

1. Inform members of the campus community about how the decision to become tobacco-free occurred.
2. Provide information about the implementation process.
3. Elicit input to help make the process as gentle as possible.

A list of frequently asked questions will address most inquiries (Attachment J). An informative, user-friendly web page about the policy, its adoption and its implementation will need to be created. Social media outlets, as well as the campus newspaper and radio stations, signage and promotional materials will be a key part of communication.

Cessation:

The Task Force agreed that even though tobacco users are not part of a protected class it is important to be sensitive to their addiction. SXU should not be an environment that is judgmental of individual behaviors; instead the focus of the policy should be on the elimination of secondhand smoke on campus and the encouragement of a healthy life style. Nicotine dependence — also called tobacco dependence — is an addiction to tobacco products caused by the drug nicotine. Cessation support for those who desire to quit is essential. By arming everyone – tobacco users and non-tobacco users – with tools to make change a tobacco-free campus can become a reality.

1. Insurance Coverage:
 - a. Employees: The SXU Blue Cross/Blue Shield plan covers 100% of smoking cessation (medications and support programs).
 - b. Students: The student insurance plan, AIP, covers 100% of the services at the SXU Health Center.
 - c. Others: Many insurance plans cover smoking cessation 100%, particularly smoking cessation medications

2. Courage to Quit: Courage to Quit is a non-judgmental, positively focused program offered by the Respiratory Health Association. Katie Tibbits, nurse practitioner at the SXU Health Center, is a Certified Cessation Counselor in this program. Courage to Quit is structured as a small group support program that meets 6 times over 7 weeks. Participants start the program while they are still using tobacco with week 3 being the quit week. The program can also be supplemented with cessation medication, prescription or nonprescription. This program is reimbursable under most insurance plans and could be offered to students, faculty, staff, and/or community members.
3. Smoking Cessation Medications: The Task Force expressed interest in selling over-the-counter cessation products on campus either through the bookstore and/or the Health Center to make these products more readily available. Prescription smoking cessation products can be prescribed by any of the nurse practitioners at the SXU Health Center.
4. Wellness Initiatives: There are rewards under the newly launched employee wellness initiative sXperience Wellness. Employees who participate in the on-line program through the Illinois Quit Line www.quityes.org. Student incentives could be considered as well.

Compliance:

The Task Force accepted the recommendations from the compliance subcommittee that the policy not be “policed” or “enforced,” but rather be monitored through communication, education, support and existing disciplinary procedures.

1. Communication/Education:
 - a. The campus communication campaign will get the word out about the specifics of the policy.
 - b. A map will be posted on the tobacco-free campus website. This map would help people know how to leave campus if they wish to smoke. It will assist building managers, supervisors, resident directors and others to help people comply with the policy.
2. Existing disciplinary measures: In cases of repeated and purposeful noncompliance, the existing disciplinary measures will be followed:
 - a. Students will be referred to the Dean of Students. The Dean of Students will follow internal discipline procedures.
 - b. Employees will be referred to their supervisor or campus Human Resources. Human Resources will follow internal discipline procedures.
 - c. Visitors will be informed by Public Safety. Violators will be requested to comply or may be asked to leave the campus.
3. Reporting mechanism: People would be able to report noncompliance using a form on our website. Noncompliance can be reported in two ways:
 - a. Location: Anyone can report that tobacco use is occurring at a specific location.
 - b. Individual: Anyone may report a specific individual who is using tobacco.

Additionally, the group recommends that a plan be developed to define how compliance will be measured. It will be important for leadership to set expectations for compliance. Orientation for candidates for employment will

need to be told expectations for compliance. Supervisors, student advisors, coaches and other personnel responsible for working with students will need to be educated on the policy before it goes into effect. A recent study in the Journal of American College Health found that although many colleges and universities have adopted policies prohibiting all tobacco use on campus, there is growing evidence that the lack of explicit enforcement impedes the public health intent of the bans.³²

Policy Review

It is good practice to have scheduled, periodic reviews of all policies and programs. The Task Force recommends that any tobacco policy that is adopted be subject to periodic review. Part of this could also include a survey after implementation. Incentives and award recognition to those who support, and further implement the policy, can also be incorporated. We will need to strategically foster cooperation and compliance to effectively carry out a culture change.

Budget

Signage would be the largest cost for implementation. Pete Skach provided an estimate of \$2,515 plus service fees for standard No Smoking/Tobacco signs (40 interior and 50 exterior). Bob Tenczar secured a quote for 70 customized signs for \$24,000 (Attachment K).

CONCLUSION

The Task Force recognizes that the adoption of a tobacco-free policy will be very difficult for some; however, based on the overwhelming scientific evidence of the effects of tobacco use and secondhand smoke, the Task Force could not in good conscience recommend anything other than a tobacco-free policy.

We thank President Christine Wiseman, and the members of her cabinet, for giving the Task Force this opportunity to serve and represent our constituents on this advisory council. Please contact the Task Force or the Co-Chairs if any clarification is needed. Again, we thank you for your consideration.

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