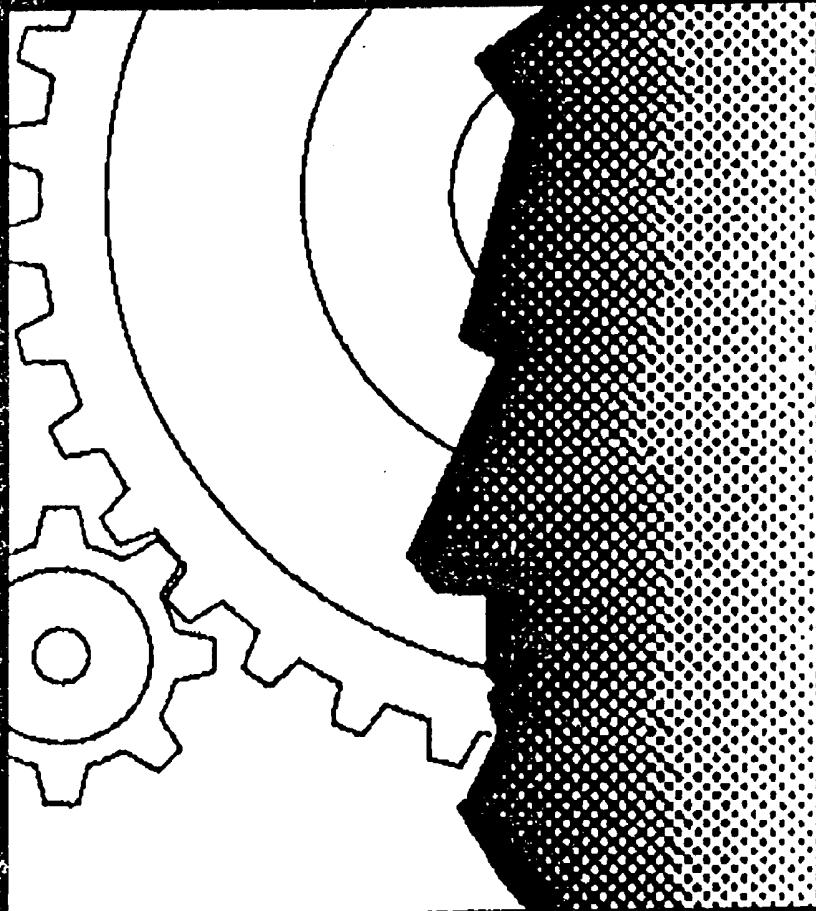


UNIONS WORKING TOGETHER TOWARDS A TOBACCO-FREE 2000:

BEST
COPY

Implications and Innovations



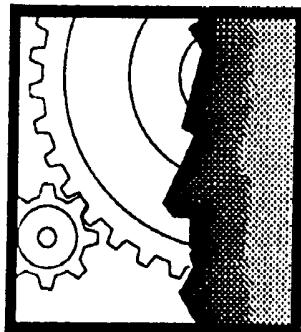
This Guide Prepared By:

**LABOR'S COMMUNITY
SERVICE AGENCY**

51255 6901

UNIONS WORKING TOGETHER TOWARDS A TOBACCO-FREE 2000:

Implications and Innovations



**LABOR'S COMMUNITY SERVICE AGENCY
WORKSITE TOBACCO CONTROL
AND CESSATION PROGRAM**

MAY 1993

51255 6902

Labor's Community Service Agency gratefully acknowledges the cooperation and contributions of the San-Diego Imperial Counties Labor Council Executive Board and it's affiliated local unions, Communication Workers of America (Seattle, WA), United Auto Workers/Ford (Detroit, MI), the San Diego Chapters of the American Lung Association and American Cancer Society, Environmental Improvement Associates (Salem, NJ), Oregon Research Institute (Portland, OR), and the AFL-CIO Human Resources and Development Institute (Washington, D.C.).

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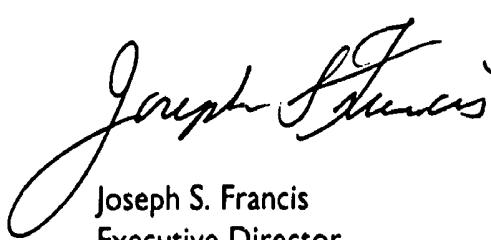
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May 1993

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A handwritten signature in black ink, appearing to read "Joseph S. Francis".

Joseph S. Francis
Executive Director
Labor's Community Service Agency

51255 6903



CONTENTS

Statement of Purpose	1
Preface	2
Labor's Perspective	3
Keys to a Worker-Centered Program	5
Part I. Tobacco Use at Work	
1. Labor's Dilemma Becomes Part of Labor's Agenda	7
2. Implications of Smoking Vs. Nonsmoking at the Workplace	10
3. Limitations and Liabilities	11
Part II. Designing a Worker-Centered Strategy	
1. The Changing Health Care Needs of Workers	13
2. Using Labor/Management Structures	16
3. Collective Bargaining - Issues, Concerns and Examples	18
Part III. Worker-Centered Programs	
1. Details on L.C.S.A.'s Program	23
2. Incentives, Promotions and Learning Principles	26
Part IV. Case Summary	
31	
Part V. Appendices	
A. Employee Guide	44
B. Sample Policies	56
C. Programs and Incentives	62
D. Examples of Pamphlets and Flyers	68
Part VI. Resources	
77	

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STATEMENT OF PURPOSE

Labor's Community Service Agency (LCSA) is a non-profit organization committed to improving the welfare and well-being of working people by providing progressive programs that seek to increase the standard of living, safety of the workplace, and the home environment of union and non-union workers.

The Tobacco Control and Cessation Program is the culmination of five years' experience in human services program development for workers. It is part of LCSA's on-going effort to fulfill its commitment to the labor-force and the community. The purpose is to provide a guide for labor organizations to make use of the established labor/management structures to effectively reduce tobacco use and the disproportionate toll of death and disability it has on hourly workers. The goals of tobacco control and cessation should not be exclusively imposed by the employer. The reason for this was well stated by James L. Turk of the Ontario Federation of Labor in Canada at a 1989 literacy symposium, but the concept applies universally :

...The fact that they are not employers' programs is important. They must be perceived to be the workers' own programs—dedicated to workers' needs....People only learn what they want to learn when they want to learn, not when someone wants to teach them. Trying to impose a workplace curriculum is as bad as trying to impose any other curriculum.

This clearly applies to learning to be a non-smoker and learning healthier habits. When workers are involved in the development and planning of the program, the collaboration will distinctly identify the needs and concerns of the workers. They will believe in the goals and feel complacent about participating, which in turn, will lead to greater success in tobacco cessation.



P R E F A C E

Today's changing work environment poses an urgent challenge to labor organizations: How to use established company structure to influence positive changes in the workplace in order to benefit the working class. Although this involves many issues, the focus of this guide is limited to tobacco use and its relationship to indoor air quality, occupational health, safety, and the welfare of working families. The purpose of this guide is to give you, the trade-unionist, some suggestions for analyzing your own organization policy. It further hopes to assist in the development of an approach that can apply to a variety of issues, as well as to the concerns over the disproportionate tobacco consumption among blue-collar workers. We hope you will be able to use this information to make the reduction of tobacco use part of your union's broader health and safety agenda.

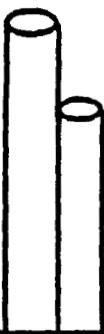
Through the years, the American Labor movement has sought to keep pace with the changing work-place and to use the seeds of change to benefit their members. This has become increasingly difficult. Furthermore, the pace of change has been escalating and it is often unexpected, unavoidable and threatening. Cooperative assistance and education programs through organizations such as the American Cancer Society, can help labor organizations reduce the stress of a changing workplace.

As the matter of worker's health should take priority in every union matter, indoor/environmental air quality and the health consequences of tobacco should be addressed by both union and management. To simplify the union representative's task of coping with the issue of health promotion through tobacco control and cessation procedures, the following topics will be discussed:

- *Suggested contract language for collective bargaining.*
- *Handling the duty of fair representation for smokers and nonsmokers.*
- *Developing worker-centered strategies for improving tobacco use policies and success in cessation rates for blue-collar workers.*

LABOR'S PERSPECTIVE

Most companies already have rules that cigarettes are not to be smoked around equipment, machinery or dangerous chemicals that may be damaged or could interact with the smoke. Likewise, human beings are very sensitive and are harmed by smoke. A judge's decision upholding the rights of a nonsmoking employee stated, "Unlike a piece of machinery, the damage to a human is all too often irreparable. If a circuit or wiring goes bad, the company can install a replacement part. It is not so simple in the case of a human lung or heart. The parts are hard to come by, if indeed they can be found at all. A company that has demonstrated concern for mechanical components should have at least the same concern for human beings..." (Res. 17). Unions should not leave this concern up to the companies. In order to insure that policies include low-cost programs relevant to the nature of work and demonstrating sensitivity to human needs, unions cannot afford to take an impulsive position.



"Unlike a piece of machinery, the damage to a human is all too often irreparable. If a circuit or wiring goes bad, the company can install a replacement part. It is not so simple in the case of a human lung or heart..."

~ Gruccio

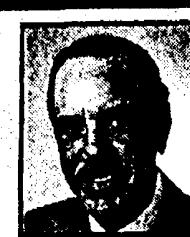
The justification for smoke-free worksites, offices, meetings, boardrooms and cafeterias is similar to the way any toxic chemical is handled. Controlling exposure to asbestos or other toxic chemicals is not done by saying, "Let's take a vote on whether the area will be asbestos free or not", or "Let's move these employees into the area; they won't complain about a few hazardous fumes in the air." In the past, labor and management have worked together to develop on-going health and safety training. Why not include tobacco education and cessation materials in such concerted efforts? Tobacco should be treated consistently with other airborne occupational exposures. It is by no means a "scapegoat" for overall poor air quality or lung hazards at work. It is however, the most prevalent, dangerous and easiest factor of poor health to remedy.

The public health perspective is slightly different from the focus of occupational safety. The point is not whether a person chooses to smoke, but where. Tobacco, as a public health concern, is analogous to drinking and driving. Society says a person cannot drive a car after drinking. Similarly, public health advocates seek to encourage people not to use tobacco.

They maintain that a person can smoke all they want, but not where the smoke can be hazardous to others. This model demonstrates a matter of great importance to both unions and employers. Everyone shares the burden of the disease and disability tobacco causes in the form of higher health care costs.

The perspective that is often overlooked and misunderstood is labor's perspective. Labor is sensitive to the issues already highlighted, but it is more complicated than safety and health-care cost containment. Labor's perspective and labor's dilemma will be addressed with respect to these two topics.

Unions' health, safety and skills development programs are rooted in the needs of their membership; both the participants and learners. These programs are worker-centered. This means that workers, through their union, have a central role in developing the programs. Their input determines how the program is designed, what is included, and how they are taught. This strategy recognizes that learning, changes in the workplace, and individual behavior should be democratic, inclusive, and open in process.



Q & A

with **Joseph Francis**

Dear Mr. Francis:

I often receive calls from union members who have been asked to help develop a smoking policy for their work site. Some of them want to know what direction they should offer. What should I tell them?

**Don Wanamaker, Member
Joint Health and Safety Committee
National Steel and Shipbuilding Co.
Area Shop Steward
Ironworkers Union, Local 627**

Dear Mr. Wanamaker:

Reducing smoking in the workplace can bring tremendous rewards to the employer and worker alike. Some of these benefits include improved employee health, productivity and morale; enhanced labor-management relations; and reduced occupational lung disease risk, absenteeism and health care costs. When planning policy, management should work jointly with labor from the start to develop and implement the company's new smoking regulations. Because tobacco smoke is considered an occupational hazard, it is also wise to invite members of the Joint Health and Safety Committee to policy planning meetings.

The company's goal should be to promote a healthier work environment in a way that is sensitive to the employees and their families. Encourage management to adopt the new tobacco use policy in gradual stages and with ample notice to employees. The policy should include a philosophy statement and spell out work site-specific guidelines.

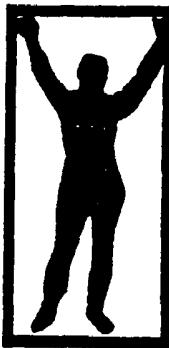
It is important for the company to make the policy as easy for employees to live with as possible. The best way to do this is to subsidize convenient quit-smoking classes for employees and their family members who smoke. Management might consider offering free cessation classes to employees as part of the company's health benefits.

Labor's Community Service Agency offers policy development assistance at no cost. Call 283-5981.

• • • • •

Joseph S. Francis is the Executive Secretary-Treasurer of the San Diego-Imperial Counties Labor Council, AFL-CIO, an organization whose affiliates include 110 local unions representing approximately 120,000 members.

(Reprinted Courtesy of County of San Diego Dept. of Health)



KEYS TO A WORKER-CENTERED PROGRAM

The approach starts from workers' strengths, not their deficiencies. Each person brings a range of experience and knowledge to smoking cessation classes that must be used to build confidence. It also recognizes that everyone has something to contribute and tries to draw this out for the benefit of all participants. For instance, if people have tried to quit in the past, they should be given credit for this and asked to relate what they have learned.

Worker-centered learning addresses the needs of the person. The goal is not just to create more productive healthier workers, but to look at overall lifestyle factors that contribute to smoking. An effort is made to enrich their capabilities and be role models as individuals, family members, and trade unionists.

Workers and unions are active in developing and planning cessation programs. Worker involvement is crucial to gain workers' support of the goals and methods. This also can prevent workers from feeling threatened by their choice to participate or not. In essence, this is laying the groundwork for a successful program, thus preventing the results of poor planning, such as grievances.

Decision-making in a worker-centered program is participatory. A "bottom-up" decision-making structure provides programs that cover the views and concerns of workers, which might include other occupational lung hazards or overall indoor air quality.

Worker-centered programs, within the limits of funding and available resources, allow for broad access regardless of income level, hourly or salaried status, or shift schedule.

Curriculum content and cessation methods should reflect the diverse learning and lifestyles of workers which will require varying degrees of support.

Tobacco cessation should be considered a "stepping stone" into a larger agenda for health promotion and disease prevention projects. This is part of a strategy to control the rising cost of health care.

PART•ONE

TOBACCO USE AT WORK

INCLUDED IN THIS SECTION:

Labor's Dilemma Becomes Part of Labor's
Agenda

Implications of Smoking Vs. Non-Smoking

Limitations and Liabilities

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Labor's

DILEMMA

becomes part of

Labor's

AGENDA

The challenges facing today's labor organizations are unparalleled. A number of these concerns are elections, free-trade, job security, wages, dependent health care coverage, economic conversion and job re-training. As critical as these issues are, the point must be made that without good health, none of these concerns would carry weight. Undulated with rising health care costs, labor organizations are forced to recognize health-related issues that directly affect employees, specifically smoking in the workplace. Moreover, personnel selection policy trends indicate that preferential hiring for non-smokers may become a reality, given the pressure to control health care costs. There are basically only two choices with respect to the issue of tobacco use or any other disease prevention effort at the worksite:

- To take action on behalf of the membership, or
- To let the employers implement a program, letting labor organizations take the blame when employees are not satisfied.

In the past, many unions have viewed tobacco control measures as a "no-win" situation and have chosen not to take a stand. For practical reasons, this is not a wise approach to adopt today. A proactive stance on issues of health and welfare is vital to maintain union's visibility and strength in today's labor organizations.



AMERICAN
LUNG
ASSOCIATION®

WORKERS, THROW OFF YOUR CHAINS!

51255 6911

If a smoke-free policy imposed by management already exists and assistance has been offered, it is not too late for labor organizations to have a positive influence (see Appendix B). Evaluation of the current policy will undoubtedly demonstrate shortcomings, pave the way for improvements, and strengthen the labor-management relationship and image of the union. This is easier than one may first assume. The task involves a three step plan:

STEP ONE

Review the company policy and contract language. Then ask:

- Is it in the employee's interest?
- Does it reduce exposure to and use of tobacco both on and off the job?
- Why are hourly workers less likely to participate in smoking cessation programs?
- Why are hourly workers less likely to successfully quit smoking?
- How can the program or policy be improved?

STEP TWO

You probably have language to build upon, so consider simple revisions and/or additions to the current contract language. Keep in mind that joint agreement and worker-centered approaches are crucial to the success of the policy. It must be perceived as being in the workers', not the employer's, interest. Here is one basic example (Res. 9):

GENERAL:

A work environment free of all recognized occupational health and safety hazards shall be provided for all employees.

SPECIFIC:

In common areas (and break-room eating areas if only one is available) which two or more employees are assigned or must share, there shall be the right to have smoking prohibited in the work environment upon the company's receipt of written notice by the distressed employee(s), to the effect that the toxic substances in tobacco smoke are having an adverse effect upon his/her health.

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STEP THREE

Negotiating the funding is as important as developing appropriate language to maintain continuity and flexibility in the program. Here are some examples of options:

- Some unions bargain for health enhancement and skills development programs as a fringe benefit. The cost becomes part of the negotiated benefits package. Annual or semi-annual quit smoking programs could be arranged with the unions' input to accommodate workers when they are ready.
- Another approach is the negotiated apprenticeship and training trust. The agreements between the individual unions and their signatory contractors/employers establish a training fund and contribution level. In conjunction with the health and safety topics and materials discussed in the apprentice classes, the curriculum could be modified to devote a percentage of time to second-hand smoke, the importance of tobacco cessation, and the increased risk for workers in certain trades.
- Other unions have sought special programs and incentives through impact bargaining, whereas labor and management determine ways to lessen the impact of policies that affect the terms and conditions of work. The decision to go smoke-free may not be negotiable under a typical contract or according to current labor law. However, unions can negotiate ways to make sure workers take advantage of the new policy and programs to reduce any potential stressful impact for them.

Implications of

SMOKING VS. NON-SMOKING

At the Workplace

There are approximately 45,000 published studies establishing the relationship between tobacco use and disease. Kaiser Permanente Medical Group of Southern California, "Smoking Cessation Statistics" (1990) estimated that each smoker costs their employer \$4,789 per year. The costs are broken down as follows:

Annual Cost Per Smoker

Increased absenteeism	\$220
Increased medical care	\$230
Increased lost earnings	\$765
Increased insurance costs (excluding health)	\$90
Increased on-the-job time lost	\$1,820
Increased property damage & depreciation	\$500
Increased maintenance and cleaning costs	\$500
Problems caused by second-hand smoke	\$664
Total Costs per Smoker per Year	\$4,789

A similar study published in the American Journal of Public Health (January 1992) confirms the validity of these numbers. In brief, the study found that workers who smoke tend to have 30% higher risk of occupational accidents, 40% higher risk of job injuries, and 34% higher rate of absenteeism. The study, based on analysis of secondary research, reportedly controlled for factors such as sex, age, race, drug use and exercise. It was the first report on workers who smoke to control for these factors.

A more positive way to analyze the effects tobacco use has on workers is to look at the numbers associated with smoking cessation and changes in behavior that result from effective worksite programs. The journal of Occupational Health and Safety (December 1989) described a study on the relationship between stopping smoking and absenteeism at a pharmaceutical company employing 1400 workers. The data revealed that ex-smokers' absentee rates dropped considerably and showed a significant difference between smokers and ex-smokers. The report supports the need for worksite health promotions and tobacco cessation programs to minimize sick leave and increase productivity. Labor and management clearly benefit from such outcomes. Labor and management share the responsibility of bringing programs to the worksite to promote the health needs of workers.

LIMITATIONS and LIABILITIES

Increasingly, unions that fail to protect members from involuntary exposure to tobacco smoke on the job, force potential legal action. In order to prevent liability and/or complaints from nonsmokers, many unions have agreed to go smoke-free at the worksite. If the labor contract has included language establishing smoking breaks or areas designated as smoking, it will have to be re-negotiated to create a smoke-free workplace.

...If indeed, the air quality building code standard is exceeded and workers are knowingly exposed to this excess, employers may be liable for failure to provide a safe workplace...

In most cases, even in union settings, arbitrators have generally upheld reasonable rules imposed by management. A smoking rule is considered reasonable if it is related to legitimate objectives such as improved safety, health, and productivity. Furthermore, arbitrators have ruled total bans are reasonable, particularly when the employer phases in smoking restrictions over time. Arbitrators have upheld grievances of employees who were discharged for violating no-smoking rules where mitigating or extenuating circumstances existed.

The California Fair Employment and Housing Commission (FEHA) determined that an employee's sensitivity or allergy to smoking that significantly affects the employee's functioning and comfort can constitute a physical handicap under FEHA. However, the reverse is not true. Regulations pursuant to the FEHA exclude narcotics addiction as a handicap. There does not appear to be any legal impediment to bans on smoking nor are there any substantive legal remedies for smokers in any collective bargaining agreement. Given all the statutes and regulations, even breach of contract or past practices that an employee could allege would be unenforceable as contrary to public policy.

Employees and unions must make sure that their policies are not contrary to public policy and that they are not exceeding the air quality standards set by the U.S. Occupational Health and Safety Administration (OSHA). If indeed, the air quality building code standard is exceeded and workers are knowingly exposed to this excess, employers may be liable for failure to provide a safe workplace.

PART TWO

DESIGNING A WORKER-CENTERED STRATEGY

INCLUDED IN THIS SECTION:

The Changing Health Care Needs of
Workers

Using Labor/Management Structures

Collective Bargaining Issues, Concerns,
and Examples

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The Changing HEALTH CARE NEEDS of Workers

In the 19th century most of the major diseases were viral or vector related. Discoveries of the causes, vaccines and cures have eradicated or at least allow for the cure of diseases and illnesses that were once commonplace. Today, the causes of death and disability are quite different. The causes cannot be specifically pinpointed, conditions are multi-factorial, the onset of disease starts long before any symptoms appear, and the health problems are chronic, but highly preventable. According to the American Cancer Society, 60% of all cancers are attributable to lifestyle and could be prevented by eating a healthy, high-fiber diet, exercising and not smoking.

As early as the 1950's, unions like the United Auto Workers (UAW) negotiated to make pre-paid medical group practices available to members as an alternative to standard plans. The attraction to these precursors of today's health maintenance organizations was the emphasis on health promotion and disease prevention. Similarly, the focus on occupational health and safety was aimed at preventing disability, premature deaths, and therefore, workers' compensation claims.



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ECONOMICS OF SMOKE-RELATED ILLNESS

	Heart Disease	Cancer	Stroke	Injuries
OVERALL MAGNITUDE	7 Million with Coronary Artery Disease 500,000 Deaths/Year 284,000 Bypass Procedures/Year	1 Million New Cases/Year 510,000 Deaths/Year	600,000 Strokes/Year 150,000 Deaths/Year	2.3 Million Hospitalizations/Year 142,500 Deaths/Year
TREATMENT	Coronary Bypass Surgery	Lung Cancer Treatment	Hemiplegia Treatment and Rehabilitation	Quadriplegia Treatment and Rehabilitation Hip Fracture Treatment and Rehabilitation
COST PER PATIENT	\$30,000	\$29,000	\$22,000	\$40,000 \$570,000 Lifetime

(Res. 24)

Unions and employers, in concerted efforts to promote prevention and early detection of disease, have developed innovative benefits packages covering prenatal care, outpatient mental health care, substance abuse treatment, and more. Nonetheless, Donald F. Elphin, Vice-President of the UAW International Union, stated:

...We and the employers have not done enough. There is great need for creativity, experimentation, and innovation. We need the help of the professional community, including scientists and officials of the Department of Health and Human Services. And we need to work together in true partnership, with full respect for our respective roles, if we are going to make meaningful progress.

Unions are always looking for ways to revise their plans for servicing their members with respect to their changing needs. Risk reduction, health promotion, education and training, are all part of a broader agenda to assist the members. Tobacco cessation clearly must be a part of this broader focus. The "Economics of Smoke-Related Illness" chart illustrated above, contributes to the explanation of why the reduction of tobacco use is such a high priority today.

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THE DEVASTATING EFFECTS OF TOBACCO USE

Tobacco use is responsible for more than one of every six deaths in the United States and is the single most preventable cause of death and disease in our society. Tobacco use is a major risk factor for diseases of the heart and blood vessels; chronic oral cavity, esophagus, pancreas, and bladder; and other problems such as respiratory infections and stomach ulcers. Moreover, cigarette smoking accounts for about 390,000 deaths yearly, including 21 percent of all coronary heart disease deaths, 87 percent of lung cancer deaths, and 30 percent of all cancer deaths.

Cigarette smoking during pregnancy accounts for 20 to 30 percent of low birth weight babies, up to 14 percent of preterm deliveries, and about 10 percent of all infant deaths. Passive or involuntary smoking also causes disease, including lung cancer, in healthy nonsmokers and severe respiratory problems in young children and infants. In addition, middle-ear infection, the most common illness requiring medical treatment among children, is considerably more common among children whose parents smoke.

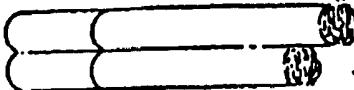
BLUE-COLLAR SMOKERS: Taking Extra Risks

Smoking rates among some workers have decreased. For example, smoking among white-collar men dropped from 37 percent in 1985. However, smoking rates for blue-collar workers remain substantially higher than those for white-collar workers. A recent survey estimates that among blue-collar workers, 42 percent of men and 35 percent of women smoke cigarettes; among white-collar workers, 26 percent of men and 28 percent of women smoke.

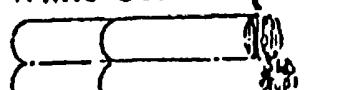
Source: National Health Interview Survey, 1985, National Center for Health Services

Percent of Workers Who Smoke

Blue-Collar

 42 (M)
35 (F)

White-Collar

 26 (M)
28 (F)

Source: National Health Interview Survey, 1985, National Center for Health Services

Many smoking-related deaths occur before age 65, striking people in the prime of their lives. Not surprisingly, nearly one third of all adults in the United States continue to smoke. The decline in smoking has been substantially slower among women than among men. The prevalence of smoking also remains disproportionately high among blacks, blue-collar workers, and people with fewer years of education.

Additionally, 36% of blue-collar workers smoke. The minority populations, increasingly becoming a major part of the blue-collar workforce, have even higher percentages and therefore, greater risk. The significance of smoking is compounded in outrageous proportions. " (Res. 24)

Using LABOR / MANAGEMENT Structures

The joint problem-solving mechanism of collective bargaining gives unions an equal voice in addressing health problems through workplace programs. By bringing workers' views to the table through their union, the process supports the principle of democracy in the workplace. For employers, involving labor representation in the planning process is good management. It can minimize disruption and productivity losses by involving the effected workers through their union. For a union, an agenda that includes tobacco cessation as part of a comprehensive health and safety program is one way to support the fundamental mission of providing services to its members. Referring back to the tremendous consequences of tobacco use, unions have much to gain politically and economically by helping and encouraging tobacco cessation. The following are some guidelines to assist in establishing policies for any workplace health program.

Lay the Groundwork

Health promotion, combined with tobacco cessation, should be planned as part of broader and emerging services to union members. The first objective is to agree on the philosophy and principles of the program. With the support of the employer, this can be articulated to workers. Then, outline union/management intentions in a joint letter of intent (Ex. 3.1).

STATEMENT OF PHILOSOPHY

The philosophy of (Company) and its labor organization(s) is that health is paramount, and that it is in everyone's best interest to reduce all hazardous occupational exposures, to the maximum extent feasible.

Whereas, environmental tobacco smoke is classified as a Class A Carcinogen and a significant contributor to hazardous occupation exposures, it is the intent of (Company) and its labor organization(s) to reduce exposure to and consumption of tobacco smoke at the worksite. The goal being to increase productivity, reduce the incidence of tobacco-related illnesses, costs, and ultimately, improve the health and safety standards.

(Company) and its labor organization(s) plan to aggressively promote tobacco cessation, and education efforts on the dangers and costs associated with tobacco use at work.

Innovative, well-planned programs will be developed in conjunction with a variety of health promotions organizations, including Labor's Community Service Agency. The program provided by L.C.S.A. includes, but will not be restricted to, developing policies appropriate for collective bargaining, technical assistance in negotiations, coordination of onsite "Stop-Smoking" seminars, information and referrals to low-cost tobacco cessation programs, dissemination of educational and promotional materials, and articulation of tobacco control policies to the labor organizations.

The undersigned approve of this philosophy and agree to pursue its goals.

NAME

TITLE

Ex. 3.1

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Do Your "Homework"

Identifying your members' health concerns, needs, access or financial problems to tobacco cessation health promotion services is critical to the success of the program. Everyone has diverse reasons for wanting or not wanting to quit smoking. Not surprisingly, they may not agree to participate in an activity that helps prevent future health problems. By involving the workers, your union can help them define their goals, thus making health care cost control a universal goal in which everyone takes part in the responsibility. There are two ways your union can assess the needs of its members in order to provide them service. One way is to conduct a survey. This can be done by contacting the affiliated Central Labor Council in your region, using that forum to conduct a survey. For example, the San Diego-Imperial Counties Labor Council surveyed its affiliates to assess their position on smoke-free workplaces to determine if they had a smoking policy (Ex. 3.2). The second option is to take a proactive role in advocating community and/or state policies to prevent the harms of tobacco use. Some ways in which LCSA and the San Diego-Imperial Counties Labor Council have successfully influenced tobacco control and cessation efforts on a broad scale are: writing letters to local and state elected officials to encourage support of tobacco taxes or regulations, participating in community tobacco control/resource coalitions, and seeking funding for program development.

EMPLOYEE NEEDS ASSESSMENT SURVEY

All information will be kept confidential.

Please return completed survey to _____ by _____.

1. Do you currently smoke cigarettes?

- () Yes
() No (If no, skip to question 8)

2. Do you use other forms of tobacco? (Check all that apply)

- () Chewing Tobacco () Cigar
() Pipe () Snuff
() Other: _____ () N/A

3. Are you interested in quitting at this time?

- () Yes
() No (If no, skip to question 8)

4. As a smoker, which of the following programs would you prefer?

- () To quit on my own.
() A self-help program with incentives (i.e.- only 2 meetings, t-shirts, drawing for participants, prizes for successfully quitting).
() A Quit Smoking Clinic/Group program, that could include non-smokers (i.e.- 8 sessions, 1 1/2 hours, 4 weeks).
() A shorter/less intense group program (i.e.- 6 sessions, 3 weeks, 2 hrs. long).

5. To increase commitment, participants should (check only one):

- () Initially have to pay for all or part of the cost and then be reimbursed for attending all the classes.
() Pay for all or part and be reimbursed only if they successfully quit.

() Participants should not have to pay anything initially, but should receive various incentives based on signing up, completing the courses and extra incentive prizes for quitting.

8. Does anyone in your immediate family smoke?

- () Yes
() No (If no skip to 10)

9. Are they interested in quitting at this time?

- () Yes
() No

10. Are any of your co-workers/friends who are smokers interested in quitting at this time?

- () Yes
() No

11. Should incentives/rewards be offered to both participants?

- () Yes
() No
Suggestions:

12. (OPTIONAL) Have you tried to quit before?

- () Yes
() No

If yes - please tell us how or what program you tried and what your experience was:

Thank you for your time and cooperation.

Please return this form to _____
by _____.

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Ex. 3.2

COLLECTIVE BARGAINING:

Issues, Concerns, and Examples

Reducing occupational hazards is a primary objective of unions. Focusing on the hazards of smoking should not be used as a "smoke screen" to avoid properly protecting workers from other hazardous industrial agents. When it comes to health and safety, one issue can't be prioritized over another, especially when tobacco smoke combined with cotton dust, radiation, asbestos, solvents, or various organic chemicals increases the risks of cancer. The goal is to combine strengthened safety standards with increased worker awareness of all occupational hazards.

Concerns about alienating a block of members by taking sides on the smoking issue are not as problematic as once perceived. Numerous surveys demonstrate that a majority of workers favor smoking restrictions. Although unions are faced with the duty of fair representation, there is no such thing as a right to smoke at work, especially since the EPA has declared second-hand smoke a Class A carcinogen.

In order to protect the concerns and rights of all workers, the AFL-CIO Executive Council opposes smoking bans mandated by the employer. The Council believes the issues should be worked out in individual workplaces between labor and management, and become part of a contractual agreement. The anti-smoking efforts endorsed by the Council were voluntary programs which offer smoking cessation to workers who seek assistance to quit smoking.

Contract language should be clear, concise, and fair with respect to air quality. If it is obsolete or leads to unhealthy situations, simple revisions can resolve the concern. For instance, consider using this general contract language:

"...A work environment free of all recognized occupational health and safety hazards should be provided for all employees."

Contract language should include a non-retaliation clause to protect non-smokers if they report violations or file a complaint. For example, the clause could read:

"...No employee will be coerced to enter such program. Supervisors will take into consideration any temporary stress and trauma which may be experienced by employees who are making efforts to quit and the necessity of those who do not smoke."

Information as to how to make a report/complaint should be readily available to workers, even if it is the boss who smokes (See Appendix A). This allows employees to feel they can

exercise their rights without fear of losing their jobs. Similarly, contract or policy language has to protect the employee who chooses to continue smoking on their own time or in non-restricted areas. Policy language could state:

"...The fact that an employee may or may not elect to smoke should not reflect adversely on their employment."

To help ensure workers will be comfortable participating in a smoking cessation program, employees should be guaranteed no loss of seniority, rate of pay, promotion, or other benefits as a result of participation and/or outcome of a program. For example:

"...Smoking Cessation programs will be offered to all employees. Participation is voluntary. Success or lack of success will not effect employment."

Although second-hand smoke is receiving a great deal of attention lately, indoor air quality in sealed, poorly ventilated buildings, whether tobacco smoke is present or not, needs to be given greater consideration. Due to the alarming increase and variety of illnesses caused or aggravated by chemical pollutants, contract language should recognize this and prevent them as ecological illnesses.

Since there is no legal right to smoke while at work, and it is not an acquired trait, employers can not be considered discriminatory for not hiring smokers. With intense efforts to contain health care costs, many employers are considering this option. Unions should be aware of this possibility and prepare accordingly, based on what is in the best interest of the labor organization. Also, remember that in any work environment, the right to breathe clean air supersedes the right to smoke. This is a public health and cost containment issue, not a threat to individual autonomy.

As mentioned earlier, labor's dilemma is the duty of fair representation for both smokers and non-smokers. This issue does not need to be a defeating situation for elected union representatives. By clearing the air and negotiating a well-planned, smoke-free policy and cessation program, both sides win a healthier environment and lifestyle.

In all policies, unions are in a better position if they are progressive and proactive rather than reactionary. Filing a work compensation claim or grievance is too late. Undeniably, it is easier said than done. But labor's input and participation is vital to the success of any policy or program, be it employee training or no-smoking programs. Decisions coming solely from management are regressive. After all, who knows best what is in the workers' interest and how to achieve it, than the workers?

The toll on workers, their families, and unions cannot be described by numbers and dollar signs. The bottom line is blue-collar workers smoke more, waste more money on cigarettes and suffer higher rates of cancer and heart disease primarily due to tobacco. The challenge is to put an end to preventable death and disability.

When the Naval Supply Center of San Diego opted for a tobacco-free worksite in 1991, Labor's Community Service Agency assisted in Labor/Management negotiations between the Center and the American Federation of Government Employees, Local 1399. The result was a policy which addressed the concerns of both smokers and non-smokers, taking the difficult transition period for smokers into consideration, and satisfying the need for a tobacco-free work environment for all employees. (Ex. 3.3).

**MEMORANDUM OF UNDERSTANDING
REGARDING
IMPLEMENTATION OF NSC SMOKING POLICY**

The undersigned parties herein agree to the following matters relative to the implementation of the Commanding Officers' limitations on smoking at the Naval Supply Center, San Diego:

1. Any agreement reached between the parties will be in the form of a Memorandum of Understanding and will be disseminated to all employees of the Center.
2. The center will provide and inform all employees of smoking cessation classes and or/programs, including times, dates and locations. Employees who desire to participate shall be granted time during duty hours to do so. No employee will be coerced to enter such program. Supervisors will take into consideration any temporary stress and trauma which may be experienced by employees who are making efforts to quit and the necessity of those who do smoke.
3. Smokers will only smoke in designated "smoking areas" or outside the building. The fact that an employee may elect, or not elect, to smoke shall not reflect adversely on their employment.
4. The attached Smoking Policy shall be distributed to all employees at least ninety (90) days in advance to allow all current employees a reasonable opportunity to acclimate to the new smoking restrictions.
5. Smoking areas will be designated inside the Broadway cafeteria and the outside patio adjacent to the 32nd Street Snack Bar. All other smoking areas will be outside NSC buildings.
6. The parties agree to establish a team consisting of one smoker from each NSC location to study and make recommendations to management on canopy overheads by _____.
7. All smoking areas will be completed and ready for use prior to implementation.
8. The NSC Smoking Policy will be released to employees on or after _____.

FOR AFGE LOCAL 1399
PRESIDENT

DATE: _____

FOR THE NAVAL SUPPLY CENTER
DIRECTOR, LABOR RELATIONS

Ex. 3.3

PART THREE

WORKER-CENTERED PROGRAM

INCLUDED IN THIS SECTION:

Details on LCSA's Program

Incentives, Promotions, and Learning
Principles

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Details on L.C.S.A.'s PROGRAM

Program Description:

Through the development of partnerships between labor and management, LCSA's Tobacco Cessation Program seeks to create a healthier and safer workplace, labor force, and community through the following activities:

- Provide technical assistance to labor organizations in developing tobacco use policies appropriate for collective bargaining.
- Coordinate tobacco cessation programs for union members and their dependents.
- Outreach through L.C.S.A.'s Executive Board, general Union and Labor Council meetings.
- Establish media, information and referral network with brochures, posters, bulletins, and newsletter articles with the cooperation and assistance of union business representatives, shop stewards and publication editors.

Funding:

LCSA's Tobacco Control and Cessation Program was funded under a competitive grant process. The California Department of Health Services-Tobacco Control Section sent out requests for proposals to distribute revenues collected under Proposition 99, the 1988 Tobacco Tax Initiative. Assembly Bill 75 mandated that these funds be reinvested in the community to prevent the harms and costs of tobacco use.

Outreach:

Outreach to the labor community is maintained through a variety of channels and resources. LCSA's Executive Board consists of representatives of various local unions which provides the Agency the unique opportunity to work with organized labor. The program began with approval and input from the Executive Board. After funding was awarded, the next step was to promote the technical assistance, information, and referral services. Initially, the program was introduced at the monthly Labor Council meetings. Also, each of the affiliated unions received information and encouragement to take advantage of the services. Bulk mailings to the affiliates reminding them to promote smoking cessation, refer their members to LCSA, and to place news media in the halls and worksites still continues on a periodic basis (See Appendix D). Utilizing the organized labor structure is the primary and most advantageous method to promote and develop worksite programs. LCSA staff attends general union meetings, makes presentations, and requests assistance and suggestions from union members. This is a successful means of reaching workers and establishing the appropriate labor and management contacts to assess the potential for policy and program changes. A meaningful way to influence the workers is to use trade/union publications. These publications can convey information, educate, and make a call to action with regard to the problems of tobacco use.

Program Service Report:

As a result of labor organization outreach activities, LCSA provided 240 clients with information on quitting and referrals to tobacco cessation services (Sep.-Mar. 1992). Thirty-eight presentations were given, offering consultations and program development assistance. These services helped increase direct support to workers and expanded their opportunities to participate in cessation programs. An important part of any service program, especially tobacco cessation, is to follow-up with individual progress once services have been rendered. LCSA has and will continue to provide follow-up support to the extent feasible. In the labor community, LCSA is a recognized service agency that will continue to offer resources and support, even if funding is discontinued. L.C.S.A. has an accumulation of smoking cessation materials the staff has organized to loan or distribute as requested.



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Comments, Responses, and Results:

L.C.S.A.'s program offers a unique approach to smoking cessation in the workplace. The combined involvement of labor and management is what makes the program so distinct and effective. The success of this program is evident by the testimony of those who have been involved in the program.

"In most cases local management simply modifies it's company policies to accommodate local ordinances on smoking without treating the problem of smoking itself as a health and safety issue. Your program offers labor an alternative which could well be called a 'breath of fresh air'. We can all hope it works."

Peter Zschiesche,
Business Representative, Interna-
tional Association of Machinists

"I thank you again for the help you have provided me in your packet. In a week and a half I have reduced my smoking by two-thirds."

Lisa Rosene,
H.I.P. Quit Kit Recipient
Spouse of United Food and
Commercial Workers, Local 135
member

"I know I need to quit and my son is after me all the time. But "their" program wasn't for us. I think it was offered just to say it was done and to have a way of 'blaming the victim' - the smokers who haven't quit yet... I'd like to try one of the quit kits and send a teammate kit for my son."

Homer Price, member
American Federation of Govern-
ment Employees, Local 1389

"I just called to let you know that your classes really helped. I haven't had a cigarette in three months. I thank you and so does my daughter."

Twylla Hobbs, member
Bus Drivers Union, Local 1309

"People aren't always willing, ready or able to quit smoking because the employer thinks they should and prohibits smoking at work. As elected representatives of our unions, we have a big role to play in developing and encouraging ways to help workers quit smoking. After all, what good is a decent retirement or pension plan if they aren't around to enjoy it?"

Tony Stimus,
Business Representative
International Association of
Machinists, Local 685

"The support and encouragement I received from LCSA and the American Lung Association were invaluable. I couldn't have done it without them."

Carlos Fernandez,
Dispatcher, Secretary-Treasurer
Longshoremen, Local 29

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INCENTIVES, PROMOTIONS, and LEARNING PRINCIPLES

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Orksites which offer smoking cessation programs for smokers desiring to quit are providing the first steps for these employees to become non-smokers. The most effective programs offer an incentive to encourage the smoker to define and achieve specific goals.

An incentive is both an inducement to act and a reinforcer. If there is no behavior change sought, then it is not an incentive. Common problems for incentives are that they are usually only offered by the provider, and that health promotion/disease prevention programs have not asked participants what is an incentive for them. If the target audience doesn't value what is offered, it is not an incentive. All too often, good incentives are just targeted for the wrong population.

T

here are two basic types of incentives: *tangible* and *intangible*. Tangible ones include money, goods, products, services, and an opportunity to win or earn something. The forms which tangible incentives can take are direct payment, price reduction, and reduced response to cost. Intangible incentives include public recognition, fulfilling a public or private commitment (i.e. contract), public or private feedback on meeting goals, and praise. The key is not to over-emphasize the tangible and neglect the importance of the intangible rewards. The two should be well-paired. Equal time and energy needs to be given to the actual program as well as the incentives. The goals of incentives are to attract new participants and help initiate behavior change.

Here is a suggested plan for an incentive program:

- Provide a promotional item to enlist in the program.
- Provide a series of small incentives for initial changes (i.e.- reducing smoking, quitting smoking on target quit date).
- Provide a series of larger incentives or getting back on track after a lapse or for a year anniversary of abstinence.

T

here are some concerns to be aware of when using incentives. Participation by persons interested only in the incentive and not in changing their behavior may diminish the effectiveness of the program and can influence the attitude of all participants. Persons only marginally interested in behavior change can also effect the success of the program. In consequence , there may be more participants, but more failures. The potential for people to get caught up in the enthusiasm of group support is a benefit of

incentive programs. However, this need not be the only benefit, as there are ways to avoid the aforementioned problems. For instance, have the participants demonstrate a commitment to change at program entry, such as a written pledge or public commitment. Other qualifications for program entry or receipt of an incentive may be to have already tried to quit or to have cut back in the amount smoked.

Worksite classes and programs differ from the traditional classroom setting in that they deal with adults not students, who will be motivated for a variety of reasons to attend. The Principles of Adult Learning may offer additional insight as to what motivates people and what will lead to a successful program for behavior modification:

- **Adults like to determine their own learning experiences.**
- **Adults enjoy small group interactions.**
- **Adults learn from other's experiences as well as their own.**
- **Adults hate to have their time wasted.**
- **Some adults like some lectures but all lectures won't be liked by all adults.**
- **Adults are motivated to learn when they identify they have a need to learn.**
- **Adults are motivated to learn when societal or professional pressures require a particular learning need.**
- **Adults are motivated to learn when "others" arrange a learning package in such a manner that the attraction to learning overcomes the resistance.**
- **Adults draw their knowledge from years of experience and don't change readily.**
- **Adults want practical answers for today's problems.**
- **Adults like physical comfort.**
- **Adults enjoy practical problem-solving.**
- **Adults like tangible rewards.**

There are several ways to choose incentives that will increase program effectiveness. At various times, L.C.S.A. took the opportunity to try each of the three most common methods: Lottery, Matching/Alternative Responses and Modeling.

A lottery is a fun attention getter and reduces the likelihood that people will participate just for the incentive. Simply, participating or meeting a program milestone can give the participants a chance to win a prize. Since not everyone can win, smaller intangible rewards must be emphasized, so as not to diminish the importance of quitting. A two-nights' stay, double-occupancy at the Hyatt Islandia, San Diego (a union employer) is an example of a lottery prize L.C.S.A. used in promoting a program coordinated for the Machinists Union.

Matching/alternative responses is a technique that offers rewards which are incompatible with smoking. In return for publicity, businesses donate incentives to be earned by those trying to quit smoking. Examples of items or services incompatible with smoking are: free dinners in non-smoking restaurants, stays in non-smoking hotel rooms, movie passes, tickets for comedy club smokeless shows, non-smoking bowling nights, a trial membership or passes to health clubs, or t-shirts that convey a message such as "Smoke-Free and Proud of It", or "Member-Better Breathers' Club!"

The modeling strategy uses local media (newspaper or television) or specific employee/union publications to highlight a successful participant's story and the rewards, both personal and programmatic, that were earned by participating in the program.

Labor's Community Service Agency is fortunate to have strong support from the labor community and their employers. When only limited resources are available, this cooperation and commitment helps reach the workers and develop incentives. Generous donations from labor employers provided rewards to participants so that they could feel proud of their efforts and because it demonstrated support for the work other unions were doing. Examples of the incentives LCSA has offered due to the positive labor/management relationships are: brunches, meals, hotel accommodations, bowling passes and San Diego Padres tickets. The incentive program need not be limited to only union employers. The community in general has much to gain by promoting healthy lifestyles and no-smoking activities at their establishments. LCSA's experience demonstrated that movie theaters, comedy clubs and public museums are generally pleased to provide free passes to introduce their particular activity as a non-smoking activity.



DEATH® Cigarette Playing Cards (Res. 26)

Other considerations to increase effectiveness are to make sure the provisions of the program are clear and of appropriate magnitude. Immediate delivery and making the award a public event are also important factors. A comprehensive program that includes not only cessation, but also environmental and lifestyle changes, are key to long-term success.

Incentives can be tailored for different levels of intervention. Interpersonal and organizational levels are applicable to unions and worksites. Interpersonal levels involve a cessation group receiving incentives based on meeting specific goals.

At an organizational level, employees who successfully stay off cigarettes gain a choice of benefits. Examples of this could be lowered health insurance premiums (if a difference for smokers and non-smokers exists) or company subsidized spouse participation in a smoking cessation program.

PART FOUR

CASE
SUMMARY

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CASE SUMMARY

Labor's Community Service Agency and the Seven Crafts Unions worked collectively with the National Steel and Shipbuilding Company (NASSCO) to develop a successful worksite smoking policy (Ex. 4.1). The Seven Crafts Unions represented were: Machinists Local 389, Carpenters Local 1300, Electricians Local 569, Painters Local 333, Teamsters Local 36, Ironworkers Local 627, and Operating Engineers Local 12.

NASSCO is one of only two functioning shipyards on the West Coast. During the past 15-20 years, shipyards have suffered tremendous losses at the hands of foreign competition, politics, and loss of consumer demand. The employees of NASSCO were determined to protect their jobs so they opted for an employee stock owners' plan to gain partial ownership of the company and save the shipyard from closure.

The initial step in the development of this policy was to gain the commitment of NASSCO and the Seven Crafts Unions to incorporate a tobacco-free worksite in a comprehensive health and safety program. The joint Labor/Management Health and Safety Committee representatives collectively bargained to implement a worksite smoking policy based on the issue of cost-containment. The goal of the policy was to gain a healthier workforce and to reduce the high costs of medical insurance, workers' compensation, and disability. Since NASSCO is largely employee-owned, the savings in these areas would no doubt have a direct effect on employee stock holdings.

Two individuals were designated as the responsible authorities for coordinating all meetings and events related to the smoking policy implementation: the LCSA Program Coordinator and the union representative from each of the Seven Crafts Unions. Further coordinating involvement came from the union-appointed Health and Safety Committee members. The combined input from NASSCO and these coordinators produced a Statement of Philosophy which was agreed upon by all parties to finalize the purpose of the worksite smoking policy (Ex.4.2).

Labor's Community Service Agency's program coordinator gave presentations at union meetings to announce the strengths of a tobacco-free workplace and to emphasize cooperation with the Seven Crafts representative. Workers were also familiarized with tobacco cessation through union publications (Ex. 4.3). An article in the "Shipbuilder" newsletter was printed to make workers aware of the hazards associated with tobacco smoke in the workplace (Ex. 4.4). This was also done in preparation of announcing tobacco cessation classes for those workers and family members who smoke. Flyers were then circulated to determine employee level of interest for cessation classes (Ex. 4.5). An information booth was set up during the lunch hour so that employees could learn more about smoking cessation and the reduction of tobacco in the workplace.

Collectively, NASSCO, LCSA, and the Seven Crafts Unions reviewed possible tobacco cessation vendors to select one which most appropriately suited the needs of the employees. Once a vendor

**LABOR'S COMMUNITY
SERVICE AGENCY
TOBACCO CONTROL AND CESSATION PROGRAM**



AND THE

7 CRAFTS

MACHINISTS LOCAL LODGE 389	OPERATING ENGINEERS LOCAL 12
CARPENTERS LOCAL 1300	PAINTERS LOCAL 333
ELECTRICIANS LOCAL 569	TEAMSTERS LOCAL 36
IRONWORKERS LOCAL 627	

MEMORANDUM OF UNDERSTANDING:

The purpose of this memorandum is to provide general guidelines for a pilot Labor/Management Tobacco Cessation Program with _____ This is not meant to be a contract.

The four parties involved would be:

1. Labor's Community Service Agency (LCSA)
2. Company _____
3. The unions at _____

(i.e.- Machinists Local Lodge 389
Carpenters Local 1300
Electricians Local 569
Painters Local 333
Teamsters Local 36
Ironworkers Local 627
Operating Engineers Local 12)

4. Health promo. agency, Stop Smoking clinic provider (i.e.- American Lung Association)

An example of how the roles and responsibilities for each of these parties may be broken down is as follows:

1. LCSA will:
 - A. Pay the clinic provider a designated amount for each participant.
 - B. Reimburse the participants who complete the clinic.
 - C. Assist in the development and dissemination of appropriate promotional materials, preferably through the joint Health and Safety Department/Committee*.
 - D. Facilitate graduation ceremonies and help provide incentives to participants.
2. (Company's) responsibility is to:
 - A. Arrange weekly tax-deductible payroll deduction for participants to pay for enrollment.
 - B. Provide LCSA a final payment based on the number of participants who complete the program, as mutually agreed.

was selected, two class times were agreed upon to accommodate workers on both shifts. Flyers were disseminated with employee paychecks (Ex. 4.6) and at union halls and break rooms (Ex. 4.7) to enlist participants for the upcoming cessation classes. Radio-free NASSCO (the shipyard broadcast network) announced the dates, times, fees, and where to go for information and enrollment for the classes (Ex. 4.8). Employees were offered incentives, such as t-shirts, to encourage attendance , however there was no penalty for not participating (Ex. 4.9).

Upon completion of the classes, NASSCO employees were awarded certificates and the benefit of a healthier, more productive life (Ex. 4.10). The smoking cessation classes offered the employees an opportunity to prepare for the new policy and overcome nicotine addiction. NASSCO's tobacco-free worksite policy was then instituted after the smoking cessation classes were completed.

- C. Provide the facilities and equipment as determined by the enrollment requirements of the program.
- D. Assist in the development and dissemination of appropriate promotional materials, preferably through the joint Health and Safety Committee.*
- E. Sponsor and promote incentives.

3. The role of the union representatives is to:

- A. Recruit and encourage workers and family members to participate.
- B. Assist in the development and dissemination of appropriate promotional materials to employees.
- C. Answer questions and act as peer advocates to the membership.
- D. Sponsor and promote incentives.

4. The selected provider's role is to:

- A. Provide a contractual agreement between the provider, Service Agency (if applicable), and the company specifying services to be rendered.
- B. Provide a trained facilitator and materials for the program.
- C. Assist in the development and dissemination of promotional materials.

*If there is no joint Health and Safety Committee, the company's equivalent or EAP office would be the appropriate departments to handle such a program.

Signed: (for example)

Company	Labor's Community Service Agency
Selected Provider	Carpenters
Electricians	Ironworkers
Machinists	Operating Engineers
Painters	Teamsters

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Ex. 4.1

STATEMENT OF PHILOSOPHY

The philosophy of **NASSCO** and its labor organizations is that health is paramount, and that it is in everyone's best interest to reduce all hazardous occupational exposures, to the maximum extent feasible.

Whereas, environmental tobacco smoke is classified as a Class A Carcinogen and a significant contributor to hazardous occupation exposures, it is the intent of **NASSCO** and its labor organizations to reduce exposure to and consumption of tobacco smoke at the worksite. The goal being to increase productivity, reduce the incidence of tobacco-related illnesses, costs, and ultimately, improve the health and safety standards.

NASSCO and its labor organizations plan to aggressively promote tobacco cessation, and education efforts on the dangers and costs associated with tobacco use at work.

Innovative, well-planned programs will be developed in conjunction with a variety of health promotions organizations, including Labor's Community Service Agency. The program provided by L.C.S.A. includes, but will not be restricted to, developing policies appropriate for collective bargaining, technical assistance in negotiations, coordination of onsite "Stop-Smoking" seminars, information and referrals to low-cost tobacco cessation programs, dissemination of educational and promotional materials, and articulation of tobacco control policies to the labor organizations.

The undersigned approve of this philosophy and agree to pursue its goals.

National Steel and Shipbuilding
Company

Tobacco Cessation Provider

Electricians Local 569

Machinists Local Lodge 389

Painters Local 333

Labor's Community Service Agency

Carpenters Local 1300

Ironworkers Local 627

Operating Engineers Local 12

Teamsters Local 36

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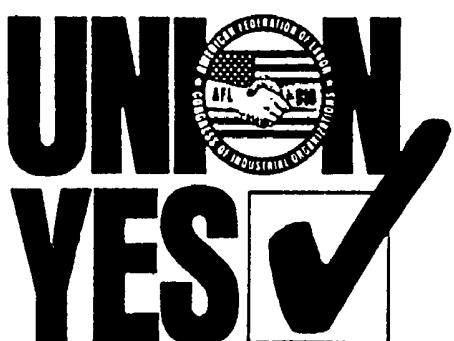
Ex. 4.2



Currently, IAM, Local Lodge 389 and Labor's Community Service Agency is offering a special program for people who want to quit smoking. Many individuals require assistance to eliminate tobacco from their lives. Prohibition at work and unaffordable clinics are not the kind of assistance we have in mind. Unlike other programs, our purpose is to help IAM members, and/or their dependents enjoy the success of quitting smoking. We will be offering convenient, no cost classes to anyone interested in getting a FRESH START on a healthier tobacco-free lifestyle.

For more information or to enroll, contact:

Labor's Community Service Agency
(619) 283-5981



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LUNGS AT WORK

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Tobacco smoke contains hundreds of toxic substances, many of which are also found in the workplace. The following is a list of chemicals found in cigarette smoke that are also regulated by OSHA as occupational hazards. Each chemical on the list has an assigned OSHA Permissible Exposure Limit (PEL), which is the highest average concentration that an employee may legally be exposed to over an eight-hour shift.

Acetaldehyde	Cadmium	2-Methylaniline	3-Nitrotoluene
Acetone	Carbon Dioxide	Naphthalenes	4-Nitrotoluene
Acetonitrile	Carbon Monoxide	2-Naphthylamine	Particulate Matter
Acrolein	Catechol	Nickel	Phenol
Acrylonitrile	Cresols	Nickel Carbonyl	Pyridine
4-Aminobiphenyl	Diphenylamine	Nicotine	Toluene
Ammonia	Formaldehyde	Nitrobenzene	2-Toluidine
Aniline	Hydrazine	Nitrogen Dioxide	Vinyl Chloride
Arsenic	Hydrogen Cyanide	2-Nitrotoluene	
Benzene	4-Methoxyaniline	2-Nitropropane	

A study conducted by Lubrizol Petroleum Chemicals Company concluded that "smoking one pack per day during an eight-hour workday produces exposures ranging from 3,824% to 18,040% of PEL's." If these employees are also exposed to any of the above chemicals while on the job, their health risks are compounded.

Cigarettes may actually help to carry toxic substances into the body. As a person holds and smokes a cigarette, toxic substances may enter the body through breathing, the mucous membranes of the mouth or skin absorption. Also, pesticides in tobacco can be breathed in with tobacco smoke and become 100% absorbed. The National Institute for Occupational Safety and Health (NIOSH) recommends that cigarettes not be kept on a person in the work area, and that workers who must smoke should wash their hands before smoking.

Additionally, the heat generated by burning tobacco can transform workplace chemicals into more harmful substances, which enter the lungs as a worker smokes cigarettes contaminated by the work process or contact with the worker's hands.

Smoking multiplies the harmful effects of occupational exposures among workers. Many of the nearly 4000 chemical compounds in tobacco smoke are cancer-causing or hazardous, jeopardizing the health of smokers and non-smokers.

For these reasons the joint Labor/Management Health and Safety Committee have put together a program with Labor's Community Service Agency and the American Lung Association to help workers stop smoking, reduce second-hand smoke, and reduce the tremendous costs of tobacco use.

Smokers and non-smokers alike are encouraged to find out more about the program by contacting _____.

51255 6937

WANT TO QUIT SMOKING?

NASSCO, the Seven Crafts and
LCSA want to help!



*If you are interested please provide the
information requested below.*

- This is not a sign-up sheet. It is a survey to assess needs and interest.
 - Classes will be held on-site, after work, or as necessary to accommodate shift schedules.
 - Arrangements will be made to cover the cost and provide incentives to employees who complete all the classes.
 - Additional details will be announced based on the level of interest.
-

Please Print:

Name and Badge #

Department

Shift



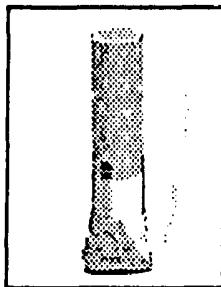
YOUR UNION WORKS FOR YOU

The benefits of union membership bring you much more than a secure income...In fact, a program that can help you have more spending money, reduce health and expenditures, feel better and live longer is offered to you, through Local Lodge 389, in cooperation with Labor's Community Service Agency.

**If you want to quit smoking, or help a friend quit, Call 283-5981
We can help!**



Ex. 4.6



IAM&AW, Local Lodge No. 389 and LABOR'S COMMUNITY SERVICE AGENCY

A program designed to help you stop smoking on your own by providing all the essential information and strategies necessary to direct your own efforts at stopping.

The following topics are covered during the four group sessions:

- Addiction, Habit and Psychological Dependence
- Physiological Effects of Smoking
- Methods of Quitting
- Withdrawal Symptoms
- Stress Management
- Weight Control
- Avoiding a Return to Smoking
- Benefits of Stopping Smoking

SIGN UP TODAY!

DATES: March 4, 7, 11, 14, & 21

TIME: 1:00 - 2:30 OR 4:00 - 5:00

LOCATION: Labor Council Offices: 4265 Fairmount Ave.

COST: \$25 Registration Fee (refundable upon request)



51255 6939

Ex. 4.7

SAMPLE RADIO SPOTS

7 CRAFTS, NASSCO and the American Lung Association say-
.Give your lungs a break--take a breather! Attend a free
introductory class on breaking the habit, and lung hazards at
work. It will be held _____ at _____.
Contact your health and safety representatives or steward for
more information.

It's Quittin' Time!!! Contact your union or the Health and Safety Dept. for more information about the American Lung Association's quit smoking clinic to be held for NASSCO employees, beginning _____.

It's time to clear the air--Occupational lung disease is the number one cause of job-related death and disability. Smoking increases the risks of developing lung diseases and is considered a hazardous occupational exposure for nonsmokers. Join the American Lung Association, NASSCO and the 7 Crafts Unions in helping to clear the air--attend a Free Information session on how to quit smoking and lung hazards at work.

Don't miss the boat--We're in the business of keeping ships "ship-shape"--We'd also like to help you keep your lungs in shape. Attend a free information session on how to quit smoking and lung hazards at work.

We're in this together--We're all members of a team. Let's prove once again that NASSCO is the "can-do" yard--by teaming up for Freedom From Smoking and Occupational Lung Disease. Attend a free information session _____.

Have a laugh on us when you call it quits on tobacco use and occupational lung hazards - Receive free passes to "Smokeless Sundays" at the Improv Comedy Club. Contact your Union Representative of the Health and Safety office to find out how you can get yours.

Ex. 4.8

51255 6940

Incentives Offered To Get Employees To Quit Smoking At Other Companies



PROVIDENT INDEMNITY LIFE INSURANCE COMPANY, proceeding a total ban, altered it's job application to include the policy that smokers would pay the difference between the smoker's and non-smoker's insurance rates out of their own pockets.



BOEING in Seattle, Washington offered company-sponsored programs in convenient locations scheduled before or after shifts. The plan also offered 80% cost reimbursement to maximum benefit of \$160 upon completion of specified requirements.



YOUNGSTOWN STEEL & ALLOY CORP. (Mahoning Culvert Division) asks smokers who quit to contribute 50 cents per day into a pool, beginning at the 1st of the year. It totals \$182.50/year. If after one year the employee is still smoke-free, the company will add \$817.50 for a total to \$1,000 to be awarded to the employee.



PACIFIC BELL in San Francisco conducted a two-year pilot program. Employees and their dependents were able to participate onsite and on employee time. Their approach is not to be zealots and implement blanket policy changes, but to imply that change will come because they cannot support the costs involved with tobacco use at work.



An example of a successful incentive program from the Surgeon General's Report is: A \$5 per month bonus to non-smokers. At the end of the year the owner matched the bonuses paid out over the year. No other efforts were used. By the end of the year 58% of the smokers had quit.

51255 6941

IN HONOR OF YOUR DETERMINATION AND SUCCESS
LABOR'S COMMUNITY SERVICE AGENCY
IS PLEASED TO AWARD THIS

Certificate
of
NONSMOKER

I CHOSE HEALTH, I QUIT SMOKING FOR GOOD

On (Date) _____

Signed: _____

Acknowledged: _____

PART • FIVE

APPENDICES

51255 6943

APPENDIX A:

EMPLOYEE GUIDE

51255 6944

EMPLOYEES ONLY:

Outline for Action If You Don't Have a Smoke-Free Worksite

I. Identify the Hazard

- A.** Document the relevant environmental conditions or occupational lung hazards in your work location: (number of smokers; type of ventilation; physical arrangements of desks; employee interaction, lung hazards such as paint dust, etc.)
- B.** Get other employees to join you in documenting conditions and personal reactions to presence of smoke or combined hazards of machine/construction work and smoke.

2. Educate Fellow Employees, Management, Union Leadership

- A.** Obtain involuntary smoking literature from American Cancer Society, American Lung Association, etc. and distribute it first to all nonsmoking employees to raise their consciousness to the hazard facing them.
- B.** Ask for a formal meeting with management and labor to request a smoke-free environment (include vehicles and construction sites, if appropriate); do this as a joint effort if possible, rather than as one individual.
- C.** Request that management include informational material on second-hand smoke as an occupational hazard in its safety/health literature and meetings.
- D.** Advise management and labor of two important facts:
 - I. The common law of each state (except Louisiana) requires the employer to protect all employees from unhealthy or unsafe working conditions or substances. Now that tobacco smoke is legally defined as a Class A Carcinogen, management must recognize it as hazardous.

51255 6945

2. Management must discuss implementation of smoking regulations with labor but is not prevented from implementing such regulations without union approval, if they have bargained to impasse. This should be noted, especially in the presence of specific contractual language stating the right to smoke in work areas. In non-union situations, management clearly has both the obligation and the right to institute measures to protect employee health.

- E.** Ask the company medical department to include cessation programs for smokers in employee assistance plans, if they haven't already. Have the medical department stress the importance of "quality of life" and "worker wellness" which involves more than not smoking at work.

3. Exhaust All Administrative Remedies

- A.** Contact all regulatory agencies in your area: State Department of Labor, State and municipal Department of Health, and OSHA to determine if local regulations or practices can help you. Fire Department codes occasionally can be invoked to achieve immediate relief.
- B.** Request that your physician write to the company on your behalf, stating the need for a smoke-free work building or work site.
- C.** Submit a formal proposal to management for elimination of the hazard, enumerating prior meetings or suggestion presented in 2A. Submit it in writing to the proper administrative level with copies to top management (to avoid your proposal getting "sidetracked"). Present it with a cover letter specifying your personal problem(s) and circumstances. The proposal should be broad enough to cover the entire work force in your area and it should be kept simple.
- D.** Make requests to health organizations knowledgeable about occupational health and smoking to write letters of support for your proposal.
- E.** Upon receipt of a negative response, or no reply, file a grievance. If not represented by a union, submit a second letter, requesting a reply by a set date. It would be appropriate at this time for your attorney to submit a letter of representation or for an appropriate organization to write on your behalf, with strong emphasis on the legal responsibilities of employers.

F. Employees seriously jeopardized by passive smoking may consider filing a complaint under the "Reasonable Accommodation" clause of the National Handicapped Act, or a municipal or state E.E.O. law.

G. Contact health and safety representatives in your union at every level.

H. If you feel you are not being fairly represented by your union, seek help from the National Labor Relations Board. This is not recommended if any other union avenues remain open.

4. Consult A Lawyer

As a last resort, contact your local Bar Association for referral to a group or individual practices interested in public health or environmental law. The legal clinic or faculty of a law school is often a good place to start to find a lawyer who will truly be interested in your case. Local American Lung Association or American Cancer Society organizations may also be a source of legal expertise.

5. Explore Workman's Compensation

A. If you have incurred medical expenses due to smoke-related-on-the-job illness, discuss filing a claim with your doctor.

B. Retain legal counsel for this action as it may be new ground in your state.



51255 6947

SAMPLE LETTERS TO MANAGEMENT

Sample #1

Date

Name & Title

Department

Company Name & Address

Salutation:

This will confirm the conversations we have had regarding the need to provide me (us) with a work environment free of tobacco smoke. Enclosed is information to support the request to eliminate smoking work areas, and shared break areas.

Also enclosed is a petition signed by employees in our work location. (*If this is an individual request and there is no petition, then use the second paragraph of the same petition in this letter as the second paragraph.*)

As my (our) ability to work is constantly threatened by the unhealthy, toxic pollutants to which I (we) am (are) chronically exposed, I (we) will appreciate your giving this request priority. I (we) would appreciate a response by (date)?

Very truly yours,

cc: (*send copies to whatever level management seems appropriate from verbal contacts, union representatives at local levels, and personal physician.*)

51255 6948

Sample #2

Name & Title
Department
Company Name & Address

Salutation:

As of this date, I (we) have received no reply to my (our) request of (date).

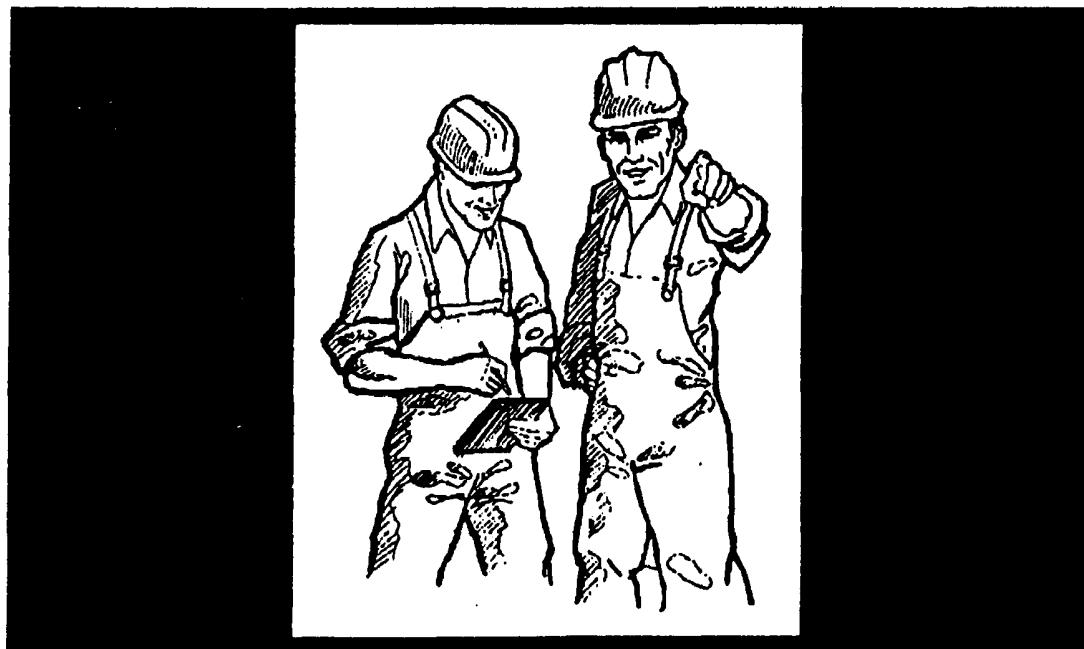
(If temporary or interim measures have been tried but are not successful, identify them here, i.e. - the additional ventilation you have introduced has not been sufficient to clear the air and has caused employees to work in cold drafts. In view of the high cost of energy, it would seem in everyone's best interest to proceed without delay to restricted smoking in work areas.)

To protect my (our) health while in your employ it is vital that you provide me (us) with a smoke-free work area to comply with the common law requirements of this state. I (we) have asked organizations who are expert in this area of occupational health to provide you with additional information on my (our) behalf.

I (we) will be most appreciative of your immediate response to this urgent matter.

Sincerely,

cc: *(send copies to middle management, president of company, and medical director of company; also union representative and personal physician.)*



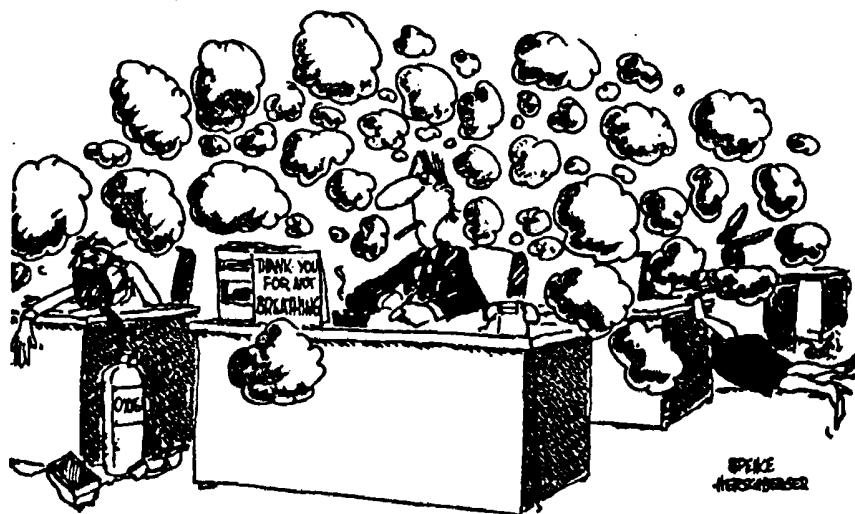
51255 6949

ATTACHMENT TO SECOND LETTER TO MANAGEMENT

Sample: Outline of Work Location & Requests for Smoke-Free Area

Work Location	Address
Date	Brief statement of what transpired
1/1/92	Describe medical condition & work environment, state name(s) of supervisor(s) to whom requests were presented.
1/15/92	Meeting with (name of supervisor). Medical conditions explained. Smoke-free area requested.
2/15/92	Ventilation system turned on 10 minutes each hour. Cold drafts created. No appreciable decrease in smoke.
2/20/92	Medical condition worsened (describe). Letter (petition) presented.
2/27/92	No response. Second letter presented.

The above outline can, and should, contain as much information as possible, presented in chronological order and in very brief form. The purpose will be to acquaint top management with the length of time elapsed in your quest and the failure of supervisors along the line to act. This will also form the basis for your affidavit if litigation is needed.



Cartoon from "Smoking Is No Laughing Matter...BUTT, Have You Seen This One?"
©HEALTH EDCO", Waco TX

51255 6950

Sample

PETITION TO: (*Supervisory name, title, and company or municipal agency name*)

Dated:

We, the undersigned employees, hereby request (or "hereby confirm our repeated verbal requests") that we be granted the same protection afforded sensitive machinery and that smoking be restricted to separate or outside, non-work areas to provide us with a healthy, smoke-free work environment.

The common law of each state requires the employer to keep abreast of new scientific information and protect employees from all recognized hazards. Tobacco smoke has been medically and legally defined as an occupational health standard to everyone sharing the same air supply with a smoker. In addition to our concern about the harm to our health from chronic exposure to second-hand smoke, we also object to the discomfort and irritation inflicted upon the nonsmoker by the smoker and request immediate relief. Alcohol and other drugs are banned from work locations, so why not ban tobacco? The use of tobacco has been defined as addictive behavior by the National Institute on Drug Abuse.

Therefore: We request that adequate and separate lunchroom and break facilities be provided, and that conference or meeting rooms be considered work areas, to be smoke-free.

We also recognize that many employees are unaware of the harm being inflicted upon them and some smokers may also be unaware of the health hazards of second-hand smoke and look to management to provide all employees with the necessary information to insure understanding of the requested restricted smoking policy.

SAMPLE LETTER TO UNION REPRESENTATIVE

Date

Name

Local

Address

Salutation:

This will confirm our conversation concerning the need to have a smoke-free work environment in (work location). Please enter into any appropriate discussion with management on my (our) behalf.

Enclosed is a copy of the petition (letter) presented to management. If I (we) do not have a response by (date) I (we) wish to file a grievance on the grounds that the presence of tobacco smoke in the work environment is harmful to health.

Labor leaders such as Glenn E. Watts, former President of Communications Workers of America, AFL-CIO, have commented that the "decision of the Court is a reasonable compromise of these conflicting interests (rights of smokers and nonsmokers)."

As a matter of health should take priority in every union matter, I (we) trust you will use every means at your command to protect the health of all your members.

Please let me (us) know if we can provide you with further information to assist in making the work environment healthy for us all.

Sincerely,

NOTE: If the union refuses to represent you in a grievance, write a short letter to them confirming exactly what was said to you and reaffirming your request. Send copies of the letter to the appropriate international locations, requesting the refusal be reviewed in light of contractual obligations to represent you. State the courts also require fair representation (VACA V. SPIES 386 U.S. 171 at 194.)

51255 6952

SUGGESTED LANGUAGE for FILING A GRIEVANCE

General

(Leaving remedies open)

The work environment is harmful to (names)'s health because of chronic exposure to second-hand smoke; therefore, it is requested that (he or she) be provided with a smoke-free work environment without adversely affecting conditions of employment or rate of pay.

Specific

(Requesting a specific solution)

The presence of tobacco smoke in (name)'s work environment is deleterious to (his or her) health and to the health of every employee sharing the same air supply. It is therefore demanded that in addition to having smoking restricted in all common work areas, that smoking be restricted to designated lounges during regular lunch periods and breaks or be eliminated.

A statement such as this can also be used in presenting the case:

The "Non-smokers' Bill of Rights" stated that non-smokers have the right to breathe clean air, free from harmful and irritating tobacco smoke. This right supersedes the right to smoke when the two conflict. Contrast this with the company's obsolete, unfair and unhealthy policy which gives smokers the "right to smoke" in the work environment and harm everyone.

(Res. 9)

51255 6953

APPENDIX B:

SAMPLE POLICIES

JOINT STATEMENT OF INTENT TO MODIFY TOBACCO USE POLICIES

(Company name) and its labor organizations is committed to reducing all hazardous occupational exposures. The ultimate concern is to provide a safe, comfortable and productive work environment.

Based on the overwhelming evidence that both mainstream and sidestream (environmental) tobacco smoke are carcinogens in humans of which there is no recognized "no-effect" level of exposure, (Company name) and its labor organizations believe it is in everyone's best interest to provide an entirely smoke-free work environment.

Through cooperative efforts labor and management have developed an implementation plan and comprehensive policy on tobacco use at work, to accommodate this belief.

The effective date shall be _____. Copies of the policy will be given to all employees, before this date.

This policy is being announced _____ months in advance. It will be gradually phased in over this period. The lead time offers an opportunity to prepare for the changes and ensures a smooth transition.

During the transition period, stop-smoking programs will be available for all interested employees. Contact your union representative or the _____ Department for more information.

The policy change and cessation programs demonstrate our concern for health and safety, and the value we place on all personnel.

C.E.O.

Union President

51255 6955

POLICY FRAMEWORK SUGGESTIONS

Effective _____, (Company name) will provide a Smoke-free work environment, to the maximum extent feasible.

Smoking will be prohibited in

NO SMOKING signs will be clearly posted in all buildings and effected areas.

Shared work areas and shared break areas may not be designated smoking areas.

Designated smoking areas will be limited to.....

The policy will apply to all employees, visitors, clients and contractors.

All current employees and future employees will be informed of the smoke-free policy.

Smoking cessation programs will be offered to all employees. Participation is voluntary. Success or lack of success will not effect employment.

Violations of the policy will be handled with the same actions that apply to infractions of other company rules.

MEMORANDUM OF UNDERSTANDING REGARDING IMPLEMENTATION OF NCS SMOKING POLICY

The undersigned parties herein agree to the following matters relative to the implementation of the Commanding Officers' limitations on smoking at the Naval Supply Center, San Diego:

1. Any agreement reached between the parties will be in the form of a Memorandum of Understanding and will be disseminated to all employees of the Center.
2. The Center will provide, and inform all employees of smoking cessation classes and/or programs, including times, dates and locations. Employees who desire to participate shall be granted time during duty hours to do so. No employee will be coerced to enter such program. Supervisors will take into consideration any temporary stress and trauma which may be experienced by employees who are making efforts to quit and the necessity of those who do smoke.
3. Smokers will only smoke in "Designated Smoking Areas" or outside the building. The fact that an employee may elect, or not elect, to smoke shall not reflect adversely on their employment.
4. The attached Smoking Policy shall be distributed to all employees at least ninety (90) days in advance to allow all current employees a reasonable opportunity to acclimate to the new smoking restrictions.
5. Smoking areas will be designated inside the Broadway cafeteria and the outside patio adjacent to the 32nd Street Snack Bar. All other smoking areas will be outside NSC buildings.
6. The parties agree to establish a team consisting of one smoker from each NSC location to study and make recommendations to management on canopy overheads by _____.
7. All smoking areas will be completed and ready for use prior to implementation.
8. The NSC Smoking Policy will be released to employees on or after _____.

For AFGE Local 1399
President

For the Naval Supply Center
Director, Labor Relations

Date: _____

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APPENDIX C: PROGRAMS & INCENTIVES

51255 6958

IT'S H.I.P.: Health Incentive Program for Employees

This program is adapted for employers and labor organizations, from the Tobacco Reduction and Cancer Control projects funded by the National Cancer Institute (NCI). The Health Incentives Program (H.I.P.) is one of five such studies. H.I.P. is the product of a cooperative effort on the part of State agencies, labor and management. The State Employees Benefit Board and Bargaining Units Benefit Board co-sponsored H.I.P., as part of the Tobacco Reduction and Cancer Control project funded by NCI.

H.I.P. as modified to be administered by LCSA for employers and labor organizations is:

- **An incentive-based approach for promoting smoking cessation at workplaces.**
- **An organizational approach to smoking cessation that does not require special counselors.**
- **A way to reinforce smoking cessation through monthly financial incentives, personal initiative and co-worker support.**
- **A way to involve smokers and non-smokers in ongoing efforts to stop smoking over a 6 month to one year period.**
- **A program that does not involve structured group meetings or classes.**
- **A program that will be virtually costless to employers, as it can be arranged for the incentives to be administered by LCSA, from tax-deductible contributions to LCSA.**

At the worksite, employees are invited to sign up monthly to participate in H.I.P. Each month employees will be encouraged to stop smoking on a specified quit date. H.I.P. participants who report no tobacco use between monthly sessions are paid \$10 and are eligible for additional lottery prizes to be determined.

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Non-Smokers can also be involved. As a "good buddy" they are eligible for awards through monthly drawings. Non-smokers are nominated by smokers for being supportive of their cessation efforts. All participants can receive by way of example, either a mug, shirt, or other bonuses as chosen by the coordinators.

At the worksite the human resources director, representatives from health and safety, union business representative/steward or a representative steering committee will be consulted by LCSA to discuss the logistics and awards as mentioned above. An appropriate contact person(s) will need to be identified to work with LCSA on program promotion and implementation. The role of the designated contact(s) will be to maintain employee involvement, keep participant records and in general work with LCSA to modify the program as needed. After the initial development stages the worksite, contacts will meet every two months during lunches (or as convenient) to discuss the program.

The program should be publicized through multiple channels. LCSA has developed brochures, posters, flyers, mailers, paycheck stuffers and other promotional items as recommended by the company/employee contacts. The company should pay for any mailings and the cash incentives. The company and employee representatives should see to it that the materials are placed in the appropriate locations. Additionally, the designated contacts are asked to serve as informal program advocates and to make use of other channels, such as PA announcements, departmental, staff and union meetings, to encourage participation.



No-obligation information sessions could be held during work hours. Employees could receive time off work to attend one of several 1/2 hour meetings or the session could be scheduled during lunch, before or after shifts. Interested employees would have the incentives explained, be provided a participants' folder and invited to take the challenge to quit smoking on their own. The folder contains a quit kit, general information on tobacco hazards, a "Quitters" contract, entry form, (in duplicate for the participant and the worksite coordinator) and notification of the date by which they need to quit to be eligible for the initial month's incentive prizes will be included.

At each monthly check-in, a participant is required to have been tobacco-free since the last quit date to receive a \$10 incentive payment and to be eligible for the Ex-Smoker of the Month Lottery. To verify abstinence participants will be asked to sign an affidavit that they have not used any tobacco products during the past month. A co-signer will also be required. A person cannot receive the \$10 bonus two

months in a row, but if they relapse they may enroll as often as they wish to take part in the group quit date and support. Appropriate lottery prizes are to be determined by the coordinators (i.e.- \$5 into a pool for each abstinent participant). Participants who quit smoking could also nominate one or two "Good Buddies". A "good buddy pot" is also given \$5 for each abstinent participant. Total incentive prize money to be awarded is estimated to be \$600 - \$1800 for one year for a company of about 400 people, using the above recommendations. The program has shown to be cost-effective due to the increased productivity, reduced absenteeism, health care and disability claims. There are substantial benefits to be gained above and beyond the monetary savings. The company support and employee involvement enhance moral, can be good for public relations and can improve the company's and union's image and relationship.

The brief monthly check-ins (10 min/participant) are to be during lunch hours and break times to coincide with regular employee breaks. Employer/employee contacts will suggest the best days of the week to avoid scheduling conflicts. The monthly check-ins will be advertised through HIP flyers as reminders, if deemed necessary. The dates, time, places and quit dates for the coming month will also be advertised on the flyers and posters. The program will have open enrollment for all eligible employees. They will be encouraged to sign up at any of the six to twelve monthly meetings. Participants are asked to check-in whether or not they have quit smoking. An incentive to encourage checking in is recommended, such as one lottery ticket, and being eligible for the Ex-Smoker of the month lottery. At the monthly check-in, for instance, everyone would receive one lottery ticket, abstinent participants would be congratulated and

given \$10 cash, have their name put in HIP pool, for the smoker of the month award. Those who couldn't verify quitting were asked about how their efforts were going and to make a renewed attempt at the next quit date. LCSA staff will provide self-help materials and referrals to free/low cost group programs for anyone interested. The program administrators (LCSA, Human Resources Personnel, Union Reps) will not be required to provide counseling or advice.

Based on the results of the original program, it is recommended that the Ex-Smoker of the Month prize be \$50 and an additional \$25 be awarded to the "HIP Participant of the Month" from all those who checked in, regardless of their smoking status. During the final month, a Grand Prize Sweepstakes may be used to get maximum participation. Everyone who had successfully participated in previous months would be entered into the Sweepstakes for \$100, \$75, \$50 as first, second, and third prizes. The Good Buddy of the Month would be awarded \$50 and could not have previously won. The Participant of the Month award, and the guaranteed payments for people who quit would remain at \$10. Other options to consider as incentives are purchasing sporting event tickets, or movie passes.

The information provided here is a practical means to influence tobacco cessation at the worksite. Above and beyond the advantages of reducing tobacco use, it should be emphasized that if LCSA is designated as the administrator of this project, the costs are tax-deductible and the Agency's relationship with organized labor will enhance union/employee support.

51255 6961

Proposal for Funding an Incentive-Based Worksite Tobacco Cessation Program Through Labor/Management Cooperation:

Labor's Community Service Agency, on behalf of the Labor Organizations, will distribute the incentives and awards to all employees who qualify or win.

The Employer will arrange to make tax-deductible donations, equal to the incentives and awards outlays, to L.C.S.A., as reimbursement for those costs. The donations will be calculated and provided on a monthly basis.

(Note: Costs-benefit analysis suggests that the employer will ultimately recuperate the costs and profit from this program, in terms of increased productivity, reduced absenteeism and disability claims, even if the costs were not tax deductible.)

The monthly donations to L.C.S.A., which will in turn be given to participating employees, will be determined as follows:

- **\$10 X the number of participants who report not smoking for the month and have two co-signers for verification.**

(Hourly employees will need a co-worker's signature and the Union Business Representative's signature.)

- **\$5 X the number of abstinent participants (same as above) will go into a "pool" for the "Good Buddy of the Month" drawing.**

The final month's Grand Prize Sweepstake amounts for consideration are:

- **\$100, \$75, \$50 for Ex-Smokers of the Month drawing.**
- **\$50 "Good Buddy Grand Prize"**

To be eligible to win prizes the same requirements as the previous months will apply, and the same amounts for each abstinent participant and "Participant of the Month" will also be given. (\$1- and \$25 respectively).

Monthly donations to purchase lottery tickets, to encourage check-in and to cover the costs of the materials for the folders (\$2/person) would be necessary.

Range of donations is estimated to be \$600-\$1800/year for company of 300-400 employees.

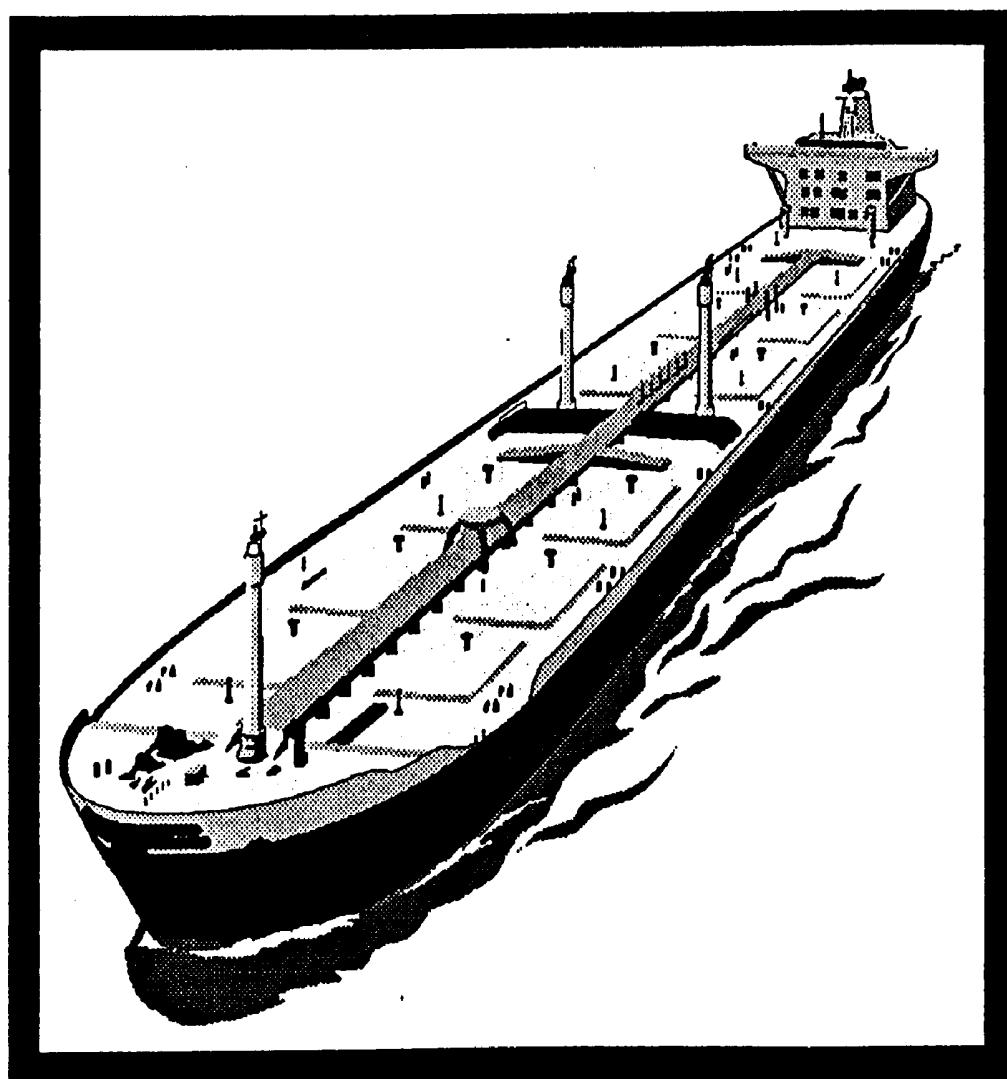
APPENDIX D:
EXAMPLES OF
PAMPHLETS & FLYERS

51255 6963

Signs of the Times

Info - Bulletin

Prepared for NASSCO and the Seven Crafts Unions
by Labor's Community Service Agency
March - 1992



"Because what you don't know CAN hurt you."

Funded by Proposition 99, 1988 Tobacco Tax, Grant #90-10577

51255 6964

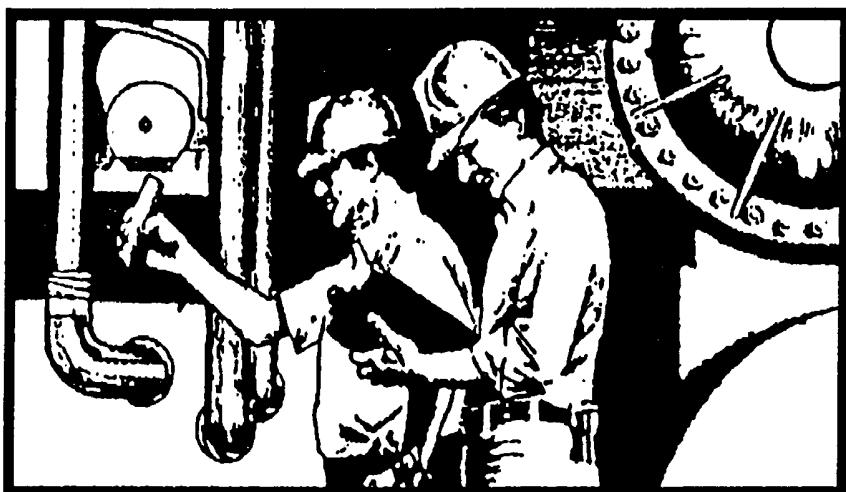


AT THE SHIPYARD

Workers get more bronchitis, asthma or other lung diseases because of working with asphalt, coal tar, chemically-treated wood, paint, metal grinding, welding and other lung hazards. Tobacco smoke adds to those chemicals that hurt your lungs. Plus, the hydrogen cyanide in tobacco smoke damages your lungs' ability to protect themselves against other toxins.

Welding produces carbon monoxide. Tobacco smoke also contains carbon monoxide. The blood normally contains 2% carbon monoxide. The blood can tolerate a 5 to 10% level of carbon monoxide. Smoking just a few cigarettes or being in a smoke-filled room quickly increases the carbon monoxide to these harmful levels. 10 to 20% level causes headaches and makes you abnormally tired. Long term exposure to carbon monoxide weakens the heart. Tobacco smoke and the ferric oxide in welding fumes also combine to multiply the risk of getting cancer.

Dangerous chemicals can enter your body when you breathe them in, swallow them or when they touch your skin. Some chemicals, like lead or cadmium may collect on your cigarettes. Then, when you smoke a cigarette you are also taking in extra lead or other toxins.

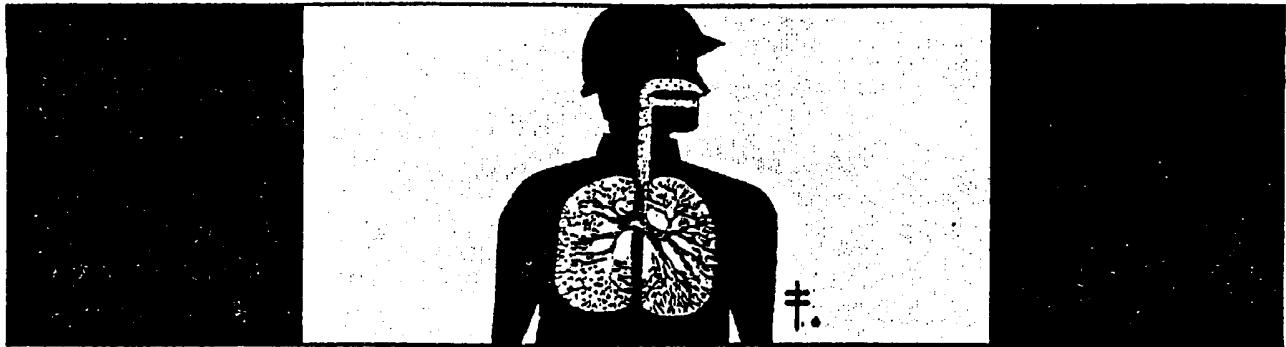


Creating Extra Dangers:

The risk of getting lung cancer if you smoke and are exposed to asbestos is 53 times higher than for non-smokers who are not exposed to asbestos.

A cigarette burns at about 1600 degrees fahrenheit. This heat can change chlorinated hydrocarbons (found in degreasing solvents) into phosphene gas - which is irritating in small doses, and can be fatal in larger doses.

Smokers are more likely to have accidents because of eye irritation, coughing or having one hand occupied. Smoking also increases the risk of fire and explosion. In addition, needing a cigarette may be a source of distraction from work that could cause you to hurt yourself or other co-workers.



RESPIRATORS: WHAT YOU SHOULD KNOW

The type of respirator needed depends on the kind of job being done. For example, when sanding, a respirator is preferable but a double-strap dust mask will work. The double-strap is used so that the mask will fit tightly. This tighter fit will lessen the chance of breathing in dust. If solvents are being used, make sure a respirator is worn: a dust mask is not enough protection.

If you have any questions as to the proper respirator to use, just follow these four easy steps:

1. If you are working with solvents and other chemicals, write down their names from container labels and/or MSDS's.

2. Call one of the sources (below) and tell them which chemicals you are using. They will help you figure out the right kind of respirator to use.

- Your local union's office
- NIOSH: 1-800-35NIOSH
- Occupational Health and Safety Division: 1-800-243-4630

3. Get the suggested respirator.

4. Read and follow all instructions. It has important information on:

- How to fit it properly.
- What kind of jobs you should and should not use it for.
- Warnings about the respirator.

EVERY BREATH COUNTS!

Wearing your respirator is important in protecting your health. There might be times when you don't feel like wearing it because it's too hot or uncomfortable. But remember, every time you wear your respiratory you will lessen your chance of having:

- Short and long term health problems, and
- Accidents on the job from becoming dizzy and disoriented.

KEEP IN THE HABIT OF PROTECTING YOUR LUNGS

- Wear a respirator
- Use proper ventilation
- Don't smoke

Call your local's Apprenticeship Office if you have any questions.



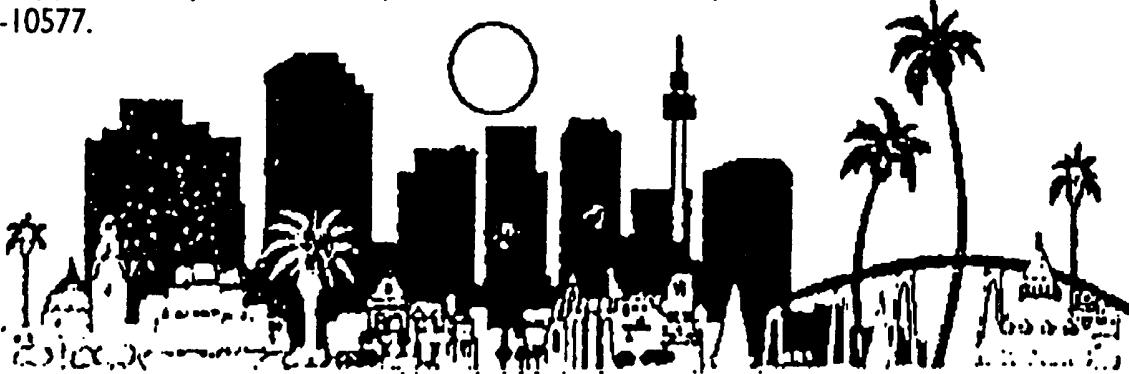
SIGNS OF THE TIMES...

Until recently only a few companies had smoking control and cessation programs. Today we find a growing trend to reduce or eliminate tobacco use at work. The most significant reason for this is to promote better health and welfare for all employees.

Labor unions across the country are working with management in developing these policies. They represent the smokers by negotiating for good health support programs on company time or sponsored by the company, and represent the health of nonsmoking members by clearing the air. The trend is welcomed by smokers who wish to quit or cut down - as well as by nonsmokers. Almost everyone enjoys the far-reaching benefits of a healthier, more productive workforce.

*Materials adopted from Workplace Hazards and Tobacco Education Project - California Public Health Foundation, Berkeley California and Clean Air/Clean Lungs Project, SDSU School of Public Health.

Funding provided by California Dept. of Health Services, Proposition 99 Tobacco Tax Initiative Grant #90-10577.



Don't Waste Your Cash... **KICK ASH!**



Call Labor's Community Service Agency

(619)283-5981

- Free Quit Kits for you or a family member
- Nonsmoker Teammate Kits
- Great Incentives
- Worksite/Union classes arranged
- Videos to loan and more!

Funded by Proposition 99, 1988 Tobacco Tax Initiative Grant #90-10577

JUST DO IT...

the

H.I.P. WAY

CALL (619) 283-5981



A project of Labor's Community Service Agency. Funded by Prop. 99 1988 Tobacco Tax Grant #90-10577
Revised May 22, 1992

51255 6968

WANTED

WORKERS SMOKE-FREE & HEALTHY

**Stop Cigarettes from Robbing You
of Money and Health**



REWARDS: **BETTER HEALTH
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- Teammate Kits
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PART • SIX

RESOURCES

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RESOURCES

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EXHIBIT #61

**VIDEO _ A Witch's brew...
Secondhand Smoke in the Workplace**

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