



SMOKING ON CAMPUS

A REVIEW AND RECOMMENDATION

June 10, 2009

The following recommendation represents strong consensus support of both the **Campus Use and Development Committee** and the **Campus Security Committee**. This recommendation stems from what we believe to be the highest and best uses for the campus as well as the practicalities of enforcement.

Members include:

CUDC:

Bill Leach, (Dean, Campus Services)
Sara Alexander, minutes (Campus Services),
Gale DeFontes (Facilities & Information),
Rick True (Art),
Joe Austin (Dean, ITS),
Elizabeth Howley (Horticulture),
Kirk Pearson (Campus Services),
Gordon Hoffman (Campus Services),
George Sims (Environmental Health/Safety),
Sarah Nolan (Full time faculty);
Bill Zuelke (Dean, Student Services Division),
Thomas Frank (Part-time Faculty)
 _____ (Student Representative).

Campus Security Committee:

Dick Ashbaugh, (Criminal Justice Chair)
Bob Keeler (Faculty)
Lisa Nielson (Faculty)
George Sims (Safety and Health Coordinator)
Theresa Tuffli (Dean, Harmony/Wilsonville)
Dean Darris (Faculty)
Ellen Wolfson (Student Services)
Molly Williams (Faculty)
Joyce Gabriel (Wilsonville representative)
Karen Hunt (Classified – ITS)
Pete Kandratieff (Campus Safety Officer)
Bill Leach, (Dean, Campus Services)
 _____ (Student Representative).

Prepared by Bill Leach
 Campus Services Dean

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RECOMMENDATION:

1. **Part One** - Campus Use and Development Committee recommends that the use of all tobacco and tobacco-related products be banned on all Clackamas Community College property.
2. **Part Two** – Develop a comprehensive and proactive smoking cessation and smoking awareness campaign on all campuses.
3. **Part Three** – Campus Use and Development Committee offers to steward the campus-wide processing and vetting of this recommendation based on the format used in the establishment of designated smoking areas.

Background:

Clackamas Community College has a long history of allowing open use of tobacco products on its campuses except within specified distances from building entry doors. Chewing tobacco was banned from inside buildings in 2007 in order to deal with maintenance issues resulting from used tobacco plugging sinks, urinals and spilling onto carpets from containers left on the floors in classrooms.

Campus Use and Development began exploring issues related to secondhand smoke exposure on campus following ongoing complaints each year by students and staff impacted by such smoke. Additionally, there was no enforcement mechanism to deal with the numbers of smokers using tobacco products within the designated no smoke zones in front of building entries.

Campus Use and Development, supported by Presidents' Council, College Council, Campus Security Committee and other committees and campus groups installed smoking areas on campus in the Fall of 2008 with a moratorium on enforcement until spring term 2009. Smoking was banned on all campuses except in these designated smoking areas.

In the interim time period between Fall Term 2008 and Spring Term 2009, Portland Community College has declared its campuses to be "smoke free". Mount Hood CC soon followed with a similar declaration to go into effect as soon as processes for implementation are worked out. Clark Community College had already gone to a "smoke free" campus previously. Additionally, the campuses have become much more aware of the effects of secondhand smoke on non-smoking students and staff.

Reasons for this recommendation:

1. **Health and well-being of all employees, students and community members visiting campus sites.**
 - a. Board Policy 409 Substance Abuse – states, "The college will provide procedures covering each of the following areas as they pertain to use of alcohol, other drugs and tobacco:
 - i. Campus prohibition

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- ii. Educational programs
 - iii. All staff training
 - iv. Prevention programs
 - v. Student assistance and/or referral program
 - vi. Staff assistance and/or referral program
 - vii. Foundation sponsored events
- b. In the United States, five major independent federal and private expert groups have reviewed the science of SHS and its effects on human health and have determined that second hand smoke is extremely hazardous:
- i. Surgeon General, U.S. Public Health Service, Department of Health and Human Services (DHHS)
 - ii. U.S. Environmental Protection Agency (EPA)
 - iii. National Research Council (NRC) (National Academies: National Academy of Sciences, National Academy of Engineering and the Institute of Medicine)
 - iv. California Environmental Protection Agency (CA EPA)
 - v. National Toxicology Program (National Institute of Environmental Health Sciences of the National Institutes of Health (NIH) (NIEHS/NIH), Department of Health and Human Services (DHHS)
- c. National authorities and organizations, including the Surgeon General, U.S. Environmental Protection Agency (EPA), National Research Council (NRC), California Environmental Protection Agency (CA EPA) and National Toxicology Program, have concluded that second hand smoke (SHS) **is a highly toxic waste product of tobacco combustion and that there is a causal relationship between exposure of non-smokers to SHS and premature disease and death.** Elimination of SHS or significant reduction in exposure to SHS improves health and decreases risks for disease and death.
- d. These findings regarding the human health hazards of exposure to SHS have also been formally endorsed by National Academy of Sciences (NAS); Institute of Medicine (IOM); Centers for Disease Control and Prevention (CDC); National Institute of Occupational Safety and Health (CDC/DHHS); Occupational Safety and Health Administration (OSHA), U.S. Department of Labor.
- e. The following groups are among those who either have conducted their own studies or who have endorsed the findings of human health hazards of exposure to second hand smoke: American Heart Association (AHA), American Lung Association (ALA), American Cancer Society (ACS), American Medical Association (AMA), British Medical Association (BMA), American Public Health Association (APHA), American Thoracic Society (ATS), American College of Preventive Medicine (ACPM), American Academy of Pediatrics (AAP), and others.
- f. Key scientific and medical conclusions of scientists and public health experts on the prevalence of secondhand smoke and its toxicity for humans:
- i. Tobacco use and exposure to SHS are leading causes of preventable death in the U.S.
 - ii. Secondhand smoke is the third leading cause of preventable death in the U.S. and kills **800 non-smoking Oregonians** each year.
 - iii. The U.S. Environmental Protection Agency (EPA) has classified secondhand smoke as a Group A carcinogen--proven to cause cancer in humans.
 - iv. In 1986, the U.S. Surgeon General concluded that exposure to SHS can cause disease, including lung cancer, in non-smokers; simple separation of smoker and nonsmoker within the same air space does not eliminate exposure of nonsmokers to secondhand smoke.

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- v. In 1992, the EPA reported that secondhand smoke annually causes 8,000-26,000 new cases of asthma, 200,000 pediatric asthma attacks, and 150,000-300,000 cases annually of lower respiratory tract infections in children up to 18 months old. In adults, SHS causes 3,000 lung cancer deaths annually.
- vi. In 1997, The National Cancer Institute estimated that exposure to SHS resulted in more than 10,000 annual cases of low birth weight and more than 2,000 cases of sudden infant death syndrome.
- vii. In 2002, the U.S. Public Health Service's National Toxicology Program issued its 10th Report on Carcinogens, stating that SHS is a known human carcinogen, and that there is a cause and effect relationship between exposure and human cancer incidence.
- viii. In 2002, the International Agency for Research on Cancer (IARC) stated that "epidemiological studies have demonstrated that exposure to SHS is causally associated with coronary heart disease" and estimated that "involuntary smoking increases the risk of an acute coronary heart disease event by 25-35%.
- ix. In 2005, the California Air Resources Board reported a causal link between SHS exposure and pre-term delivery; asthma induction in adults; breast cancer in younger, primarily premenopausal women; and altered vascular properties.
- x. There is widespread exposure of Americans to SHS; 88% of non-smokers show detectable levels of cotinine (a metabolite of nicotine) in their blood.
- xi. The Centers for Disease Control and Prevention (CDC) has determined that the risk of acute myocardial infarction and coronary heart disease associated with exposure to tobacco smoke is nonlinear at low concentrations of SHS, increasing rapidly at concentrations commonly experienced in public settings where smoking is allowed. The CDC has warned persons with an increased risk of coronary heart disease or known coronary artery disease to avoid indoor environments that permit smoking.
- xii. Outdoor SHS concentrations, including fine particles (PM 2.5) and carcinogenic polycyclic aromatic hydrocarbons (PPAH) are detectable in outdoor environments at levels which are sometimes comparable to indoor concentrations of SHS.

2. There is strong support for a campus-wide smoking ban not only among CCC students but among community college students statewide.

- a. In March 2007, Clackamas CC student Susan Clayburgh randomly surveyed 100 students on campus for a report on smoking. Her survey concluded that 80% of the students supported the concept of designated smoking areas rather than the concept of designated non-smoking areas in place at the time.
- b. In 2007, upon a recommendation by the Campus Use and Development Committee, the college banned smoking at or around the Family Resource Center so we would be in compliance with ORS 756A.260 and OAR 414-300-0070(8).
- c. A survey of students conducted among selected Oregon community college campuses in June 2007 was commissioned jointly by Oregon Community Colleges and Workforce Development, Oregon Council of Student Services Administrators and the American Lung Association of Oregon. The survey concluded:
 - i. Two-thirds of community college students would prefer to attend a smoke free campus.
 - ii. Three-quarters of the students surveyed said it is OK for colleges to prohibit smoking on campus to keep secondhand smoke away from students and staff.

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- iii. Most students, regardless of age, gender, educational attainment, or race/ethnicity prefer a smoke free college.
 - iv. One-third of students said they were exposed to secondhand smoke on campus every day.
 - v. One in five students said they have experienced some immediate health impact from exposure to secondhand smoke on campuses.
 - vi. Four out of five college students do NOT smoke.
 - vii. More than half of the students who smoke claimed to have tried to quit in the past year.
 - viii. Most students – including two-thirds of smokers – agreed that even small amounts of secondhand smoke are hazardous to health.
- d. In spring 2008, Lane Community College conducted its own survey with 5,219 respondents. That survey found a similar level of student preference for a smoke free campus. Additionally, 807 employees participated in the LCC survey with the following finding:
- i. 69% of college employees said they would choose a smoke free college over one that allows smoking.

3. Reducing cost of operations and potential risk and liability on Clackamas Community College campuses

- a. Reduced risk of fire – each year the college responds to fires in bark dust caused by cigarettes being tossed carelessly into planters. These fires sometimes smolder for hours before igniting with visible flames and endanger buildings. We also have had a number of cigarette urns smolder and burn.
- b. Eliminate the risk of ADA accessibility challenges related to tobacco smoke exposure by people who have susceptible medical conditions. The Americans with Disabilities Act requires colleges to maintain accessible campuses, including reasonable accommodations for students and staff with asthma or other medical conditions that are triggered by secondhand smoke.
- c. Avoid potential legal liability.
 - i. For example - Students and staff with asthma can have their medical condition aggravated by exposure to secondhand smoke.
 - ii. By going tobacco-free the college can address the liability risk associated with permitting exposure to a known health hazard on its premises.
 - iii. The studies cited elsewhere in this document conclude, “There is no risk-free level of secondhand smoke exposure; even brief exposure adversely affects the cardiovascular and respiratory systems.
- d. Reduce the cost of maintaining facilities and grounds. Currently, many hours of custodial and maintenance personnel time is invested in cleaning up cigarette butts from designated smoking areas. Going smoke-free eliminates this cost.

4. A smoking ban at Clackamas is consistent with community college trends not only in the metro-region but also statewide.

- a. Clark Community College is a “smoke free” campus.
- b. Portland Community College has declared its campuses to be “smoke free”.
- c. Mount Hood Community College has declared its campuses to be “smoke free” and is currently developing an implementation strategy.

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5. Enforcement of the smoking ban except is “designated smoking areas” is not consistently enforceable at Clackamas.

- a. Clackamas Community College has the highest student-to-officer ratio of any of the regional community colleges.
- b. Limited staffing allows only one officer on duty for all three campuses during any one shift.
- c. Campus Safety officers provide policing and rule enforcement for the approximate 35,000 students who attend classes and deal with a variety of immediate and critical issues. Requests to deal with smoking enforcement issues regularly take a “back seat” to the more critical requests the officers deal with each day.
- d. Smokers who use the designated smoking areas often do not stay within the delineated confines of that smoking area. A number of the smoking areas are heavily used and students tend to spread out around the smoking area rather than in the smoking area. This continues to expose staff and non-smokers going between buildings to second hand smoke.
- e. A ban on smoking campus wide – except in personal vehicles in parking lots – streamlines the rule and promotes enforcement by empowering staff (other than Campus Safety Officers) to speak to the offending individuals.

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