

Non-Smokers' Health Act

Let us not forget that there are benefits to non-smoking. Non-smokers pay lower life insurance premiums because they are less likely to shorten their life expectancy.

Madam Speaker, I do not want to overlook the major consideration that the cost per capita to the Canadian community is enormous. In the United States, for instance, a smoker costs his or her employer \$5,000 a year from losses due to absenteeism, morbidity, insurance costs, reduced productivity, maintenance, furniture and equipment depreciation, as well as employee morale. Not to mention risks of fire: the Hon. Member for Hull—Aylmer (Mr. Isabelle) reminds me that smoking is a fire hazard. These data can be found in a letter from Ottawa resident Michel Ouimet which was published in the daily newspaper *Le Droit* on June 9, 1986. I thank Mr. Ouimet for his information on the high cost of smoking which is indeed a fact.

Madam Speaker, you are indicating to me that my time is running out. I am sorry because I would have liked to have provided other examples to convince the House to adopt this Bill at second reading. All we want is to refer this Bill to a committee for a detailed item by item study, as well as an in-depth consideration of a Bill which deserves to be adopted while contributing to the education of the Canadian people in general by pointing out the dangers of tobacco smoking.

• (1640)

[English]

Mr. Bill Tupper (Nepean—Carleton): Madam Speaker, I am delighted on behalf of my constituents in Nepean—Carleton to rise and address Bill C-204, a Bill to regulate smoking in the federal workplace and on common carriers, and to amend the Hazardous Products Act. It is a Bill introduced by my colleague, the Hon. Member for Broadview—Greenwood (Ms. McDonald).

Madam Speaker, and colleagues, the human and economic dimensions of the cost of smoking are horrendous. When we think about the damage to health, the loss of time in the workplace, the anguish of the families who are involved, and about the cost of medical expenses in the course of time that may be in place, it is a horrendous cost for Canadians and for mankind in general.

Every year cigarette smoking results in over 30,000 premature deaths. It is the single most important cause of preventable illness and death. Thirty per cent of cancer deaths, 30 per cent of heart disease, and 90 per cent of chronic obstructive lung disease deaths are caused by tobacco and its effluents.

Mounting awareness of the health hazards associated with smoking and "passive" smoking keeps the question of smoking in the workplace in the centre of controversy. Research has shown that side-stream smoke, or smoke in the atmosphere, in

some ways is as dangerous as smoke inhaled by the smoker. Smoke from the burning end of a cigarette has high concentrations of many noxious compounds. Results of some international studies indicate that non-smokers, who were exposed to cigarette smoke in the workplace, had as much lung function impairment as if they had smoked up to 10 cigarettes per day. Colleagues, think about that. At least 500 non-smokers die each year in Canada from lung cancer that may have been caused by tobacco smoke in the workplace.

• (1650)

Maternal smoking can result in fetal injury, spontaneous abortion, and low birth weight. Parental smoking is a major contributor to respiratory illness in children. Involuntary exposure to cigarette smoke is particularly a problem for those who are regularly exposed to smoke at work.

Increasingly, public institutions and private companies are moving toward the creation of a smoke-free work environment. More and more private businesses are introducing no smoking policies in the workplace, and municipalities are enacting by-laws to prohibit or cut down on smoking in public places.

We have excellent examples of this in the City of Ottawa, the City of Kanata, and the City of Nepean. Municipalities across the land are recognizing this, as has the federal Government to a certain extent.

Treasury Board has issued guidelines to government departments and agencies outlining measures which should be taken in order to minimize the effects of tobacco smoke in the workplace. The guidelines are as follows. Managers should consult with their employees in order to designate, where desirable and possible, non-smoking areas in the workplace. Areas where smoking is permitted should, if possible, be located near air vents. The following should be designated as non-smoking areas—elevators, stairwells, change rooms, computer rooms, clinics, health units, service wickets, service counters, and any other location where the public is involved. In addition, Departments may also designate as non-smoking areas all or part of cafeterias, waiting-rooms, lounges, hospitals, and theatres. Smoking should not be permitted during meetings unless there is a consensus among all who are present. Persons who occupy private offices or have shared workplaces may designate their offices or workplaces as non-smoking areas.

This initiative is to be complimented. However, many of my constituents share with me the concern that these guidelines are not being adhered to, that managers in the Public Service are not identifying and designating non-smoking areas in the workplace as it was thought they would. Thus, other initiatives will have to follow to bring this about.