

## LOCAL HEALTH-CARE LEVEL

Apart from encouraging cessation work with patients, national health professional organizations could ensure that their members take individual action in other ways in the wider community.<sup>xxxii</sup> Local branches could nominate a health professional to take special interest in tobacco control and work towards action on as many of the ideas as possible:

- Explore the benefits of visiting schools to discuss the impact of tobacco and industry tactics with students, staff and even with parents
- Organize campaigns to establish smoke and tobacco-free schools, hospitals, restaurants, offices, shops, public transport and leisure premises
- Organize a special day to encourage and assist people to quit tobacco
- Persuade local governments to ban tobacco advertising
- Organize campaigns to increase compliance with existing laws, such as a ban on sales to minors
- Organize campaigns to make sports events tobacco-free
- Invite politicians to meetings where the harsh realities of tobacco are being explained and the policy solutions discussed, and explore favourable press coverage of the event
- Engage in professional advisory roles on, for example, occupational health and environmental health to educate the public and to influence public opinion on the specific aspects of tobacco control by submitting regular contributions to medical and scientific columns in local newspapers and by appearing on local radio or television
- Contribute to research by monitoring tobacco use among population groups, by monitoring the incidence of tobacco-related disease, by informing and educating the public, by monitoring industry tactics, and by exposing the potential damage to public health of academic institutions

accepting tobacco money

- Support litigation by testifying as expert witnesses about the proof of tobacco as a cause of disease and providing opinions about smoking as a cause of an individual's ill health.

## INDIVIDUAL HEALTH PROFESSIONAL LEVEL

- Health professionals should be tobacco-free role models and peers could encourage one another to this end. By providing supportive, non-judgmental care, health professionals can assist one another in their cessation efforts and their goal of becoming tobacco-free role models.
- Health professionals should help one another understand that tobacco dependence is a disease and not a moral issue and that the smoker is not a weak-willed person but a human being that has a health problem and needs treatment with a human and empathic approach.
- Health professionals should use every opportunity to incorporate some aspect of cessation counselling into their practices. This counselling should be stimulating and non-judgmental.

### An example of involvement at local level

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The Ontario Dental Association (ODA) and its 6400 members are committed to providing exemplary oral health care. The ODA is a voluntary professional association representing more than 80% of Ontario's dentists. As Ontario's primary source of information on dental health and the profession, the ODA has been improving public awareness of the importance of oral health since 1867. The ODA works with health-care professionals, governments and the private sector to attain the highest possible quality standards of health care for the people of Ontario. In 1987, the ODA established a strict workplace non-smoking policy while advocating for a total ban on tobacco product advertising, smoke-free public and work places as well as government initiatives for Ontario tobacco farmers to switch to growing crops other than tobacco. This has been followed up with more recent policies highlighting the risks of second-hand smoke. In 2000, the Ontario Dental Association teamed up with the Ontario Medical Association and the Ontario Pharmacists' Association to offer the Clinical Tobacco Intervention (CTI) training programme to member health-care providers. The CTI educational programmes provide ODA member dentists with the training and the resources they need to provide effective tobacco cessation advice and assistance to their patients. The ODA members are now routinely pointing out to their patients some of the early effects of smoking such as stained teeth, halitosis (bad breath), and periodontal (gum) disease. On the occasion of the National Non-Smoking Week (17-21 January 2005), the Ontario Dental Association has advocated quitting smoking to reduce the risk of oral cancer and other oral diseases.

Source: [www.oda.on.ca/pub\\_1897.asp](http://www.oda.on.ca/pub_1897.asp)

### Opportunities for individual health professionals' involvement in tobacco control<sup>xxxii</sup>

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- Write letters to the Editor or Op-Eds on tobacco control policy proposals at the local, state or federal level
- Write/call/e-mail legislators and policy-makers at all levels to express support for tobacco control proposals
- Get involved with a local tobacco control group or organization
- Create a committee at your workplace to enhance awareness about tobacco control issues, such as integrating smoking cessation into practice
- Advocate for access to and reimbursement for tobacco cessation treatment (behavioural and pharmaceutical)
- Propose that questions on tobacco use be included in all patient records as a part of monitoring vital signs
- Improve the quality of tobacco cessation treatment through adoption of clinical practice guidelines for tobacco use cessation
- Push for government regulation of tobacco products
- Advocate for tobacco tax increases and dedication of funds for tobacco control programmes and research
- Advocate for bans on smoking in all workplaces and public spaces
- Explore alternative avenues for implementing tobacco control interventions, such as paediatric primary care and home health care
- Integrate tobacco interventions into current practice, for example in the areas of maternal-child health, primary care and acute care
- Conduct research on tobacco use prevalence among health professionals, cessation needs as well as effectiveness of interventions in different settings
- Develop and implement tobacco control policies. These might include health-care professional involvement in implementing smoke-free health-care facilities
- Join with other NGOs to promote tobacco control advocacy
- Implement curriculum changes in health professionals' schools to enhance knowledge about and skills in interventions in tobacco prevention, smoking cessation and efforts to reduce exposure to second-hand tobacco smoke.