



Country Reports on Smoke-free Policies in Canada

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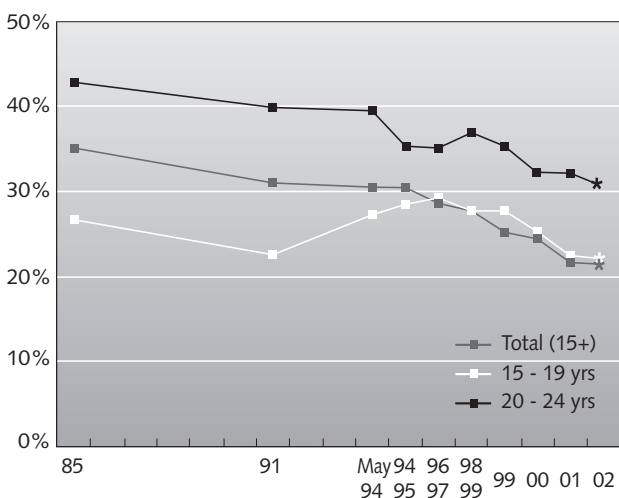
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Introduction

Canada is well known in the tobacco control community for its progressive policies to reduce tobacco use: these include high rates of tobacco taxation, mass media campaigns, school-based education, prohibitions on tobacco sales to minors, precedent-setting package warnings, controls on advertising and promotion, and restrictions on smoking in public places and workplaces. Canada's progress in reducing tobacco use was severely undermined in the early 1990s as a result of a significant smuggling problem which the federal and several provincial governments attempted to curtail by reducing tobacco taxes, cutting the retail price of cigarettes in half in much of the country.

The result was a predictable and dramatic increase in smoking, particularly among youth. (See graph below).(1) Smoking rates among teens aged 15-19 rose from 21% in 1990 to 28% in 1996. After remaining steady at 28% for several years, youth smoking prevalence has once again shown an encouraging decline, dropping to 22% in 2002(2). Tobacco use among the population as a whole also plateaued for several years, remaining at 31% from 1991 to 1995, before beginning a steady decline over the past seven years. Twenty-one percent of the population aged 15 years and older, or 5.4 million Canadians, are current smokers (23% of men and 20% of women).(3)

Trends in the prevalence of current smokers



Tobacco use is the principal cause of preventable death in Canada, claiming 45 000 lives every year.(4) Tobacco use costs the Canadian economy a staggering \$9.4 billion dollars each year, of which \$2.6 billion are absorbed by direct health care costs(5).

Best Practices in Smoke-free Policies

Overview

Canada is a federation of ten provinces and three territories. Although the *Constitution Act, 1867* gives jurisdiction over health care to the provinces, in reality all three levels of government – federal, provincial/territorial, and municipal – share responsibility over health issues. For example, all three levels of government have authority to regulate smoking in public places and workplaces. While this overlapping authority can provide policy-makers with the opportunity to offload responsibility to another level of government, it also provides health advocates with multiple means to the same end – protection of the public from the health risks of exposure to second-hand smoke.

Federal Government

The 1988 *Non-smokers' Health Act*, which controls smoking in federal government workplaces and on inter-provincial and international modes of transport, is the only piece of federal legislation that regulates where smoking can take place. The *Act* prohibits smoking in federal workplaces, except in certain enclosed smoking rooms, and restricts smoking to designated areas on trains, motor vehicles, and ships, as well as in marine passenger terminals, airports, train stations, and bus stations. Smoking on airplanes was phased out completely by 31 August 1994. For buildings constructed prior to 1990, the employer is required only "to the extent reasonably practicable" to ensure that the room meets the regulatory requirements regarding independent ventilation. For buildings constructed after January 1990, the smoking room is to be separately ventilated and exhausted to the outside, in accordance with ASHRAE Standard 62-1989, *Ventilation for Acceptable Indoor Air Quality*.

Provincial Government: British Columbia

Most Canadian provinces have legislation regulating smoking in public places and/or workplaces. In recent years, several provinces have passed laws providing much broader and more restrictive controls on smoking in public



places and workplaces. Some provincial legislation grants enabling authority to local governments to enact broader and/or stricter controls than provided for in the provincial law.

The most restrictive province-wide controls on smoking are found in British Columbia (BC). Rather than pursuing the traditional legislative route, in British Columbia the provincial Workers' Compensation Board (WCB) declared that exposure to second-hand smoke in the workplace should be controlled under the *Occupational Health and Safety Regulation* and mandated that as of 15 April 1998 all indoor workers work in a smoke-free environment. Under a 'sunset clause,' the hospitality industry, long-term residential facilities, and provincial prisons were given an extension until 1 January 2000 to implement the regulation.

After roughly eleven weeks in force, in March 2000 the BC Supreme Court ruled the sunset clause null and void, finding that the WCB had not adequately consulted the parties involved. In response, the WCB published a new draft regulation, held extensive public hearings, and commissioned several new reviews. In September 2001, the regulation went into effect with regard to long-term care and correctional facilities. However, as a result of heavy lobbying by the provincial hospitality association and its members, the provincial government overturned the WCB ruling as it applied to hospitality establishments and replaced it with its own weaker regulation – a move unprecedented in the WCB's 83-year history.

The government's regulation governing smoking in hospitality establishments – restaurants, bars, pubs, lounges, nightclubs, bingo halls, bowling alleys, and gambling casinos – went into effect in May 2002. The regulation requires that workers' exposure to second-hand smoke be controlled either by prohibiting smoking in the workplace or by restricting smoking to separately-enclosed, separately-ventilated designated smoking rooms (DSR) to

which employees have limited exposure. Employees have the right to refuse to work in a DSR; those workers who choose to work in a DSR must not spend more than 20% of their work shift in the smoking room. The percentage of floor space allocated to the DSR is also restricted. Designated smoking rooms must be ventilated either by a non-recirculating exhaust ventilation system, or by an air cleaning system, or by both. Airflows in the designated room must be at a minimum ventilation rate of 35 cfm per person. Air cleaning systems must meet a standard of 95% operating efficiency at 0.3 micro-metre particle size.(6,7)

Local: City of Ottawa

In Canada, the most restrictive controls on workplace and public place smoking are found at the local level, and among these municipal by-laws, the City of Ottawa¹ has the most comprehensive smoking ban.(8) In April 2001, City Council voted unanimously in favour of two by-laws:

- By-law No. 2001-148 prohibiting smoking in all public places, including restaurants, bars, bingo halls, bowling alleys, and billiard rooms.
- By-law No. 2001-149 prohibiting smoking in all workplaces, including limousines and taxis.

Neither by-law allows for designated smoking rooms. Although private clubs are not defined in either the public place or workplace by-law, the combined coverage of both by-laws means that private clubs may allow smoking only if they have no employees *and* they are not open to the public. The rest of this report provides a detailed account of the campaign for implementation of the City of Ottawa's smoke-free by-laws.

Steps to Implementation – The City of Ottawa's Smoke-Free By-laws

The by-law campaign was initiated by the city's Medical Officer of Health (MOH). The impetus came from the fact that, on 1 January 2001, twelve local governments were amalgamated by order of the provincial government to constitute the new City of Ottawa.² Without a new city-wide smoking law, various by-laws passed by councils of the former municipalities with differing controls on smoking in public places would have gone into effect in May 2001.

¹ Ottawa is the capital of Canada, a city in the province of Ontario with a population of approximately 774 000. Taken from http://ottawa.ca/about_ottawa/facts/counts_jan_03/index_en.shtml.

² Eleven former municipalities – Cumberland, Gloucester, Goulbourn, Kanata, Nepean, Osgoode, Ottawa, Rideau, Rockcliffe Park, Vanier, and West Carleton – and the Region of Ottawa-Carleton were unified to form the City of Ottawa. Taken from http://ottawa.ca/about_ottawa/index_en.shtml.



Key Players

A number of individuals and organizations played distinctive and crucial roles in helping to secure passage of the by-laws:

- The city's **Medical Officer of Health (MOH)** spearheaded the initiative both publicly and with the City Council. He was the public face of the by-law and the lightning rod for opposition.
- Staff with the city's **Public Health and Long-Term Care Branch** supported the work of the MOH, preparing educational resources for the public, city councillors, and businesses.
- The **Ottawa Council on Smoking and Health (OCSH)**, a coalition of health agencies, local organizations and individuals played the lead role in mobilizing the public and in lobbying city councillors to support the by-law.³
- The **Chair of the Health Committee** of the City Council took a very public stance in favour of the by-law and helped secure the support of his fellow councillors.
- The **Mayor** was unwavering in his support for the smoking ban throughout the debate and during the difficult transition period.
- The 22 members of **City Council** had the final authority to approve, amend, or reject the proposed by-laws.

Major Steps

Many activities took place during the intensive four-month campaign – from January to April 2001 – for the passage of Ottawa's smoke-free by-laws:

- The "Smoke-Free Ottawa" campaign was launched in mid-January 2001. The campaign was a partnership between the Ottawa Council on Smoking and Health, the City of Ottawa Public Health and Long-Term Care Branch, Ottawa Heart Beat (a coalition of heart health agencies), and Cancer Care Ontario Eastern Region Preventive Oncology Network. The partnership sponsored advertisements on the backs of city buses and on various radio stations to inform the public of the proposed smoking ban and developed a website (www.smokefreeottawa.com) to keep the public informed of campaign developments.

- The Public Health Branch held public consultations in ten centres across the city from late January to late February to explain the proposed by-laws and solicit public input.
- The OCSH developed a postcard campaign both to educate the public about the reasons for the proposed smoking ban and to encourage the public to show their support for the by-laws by sending a postcard to the mayor. About 90 000 postcards were distributed and about 8000 were sent in.
- The Medical Officer of Health wrote to all health professionals in Ottawa asking them to write, call, or fax local councillors to show their support for a Smoke-Free Ottawa.
- The Medical Officer of Health and his staff held focused consultations with key stakeholder groups, including bingo operators and representatives of the charities supported by bingo revenues; bowling alley operators; the local chapter of the Ontario Restaurant, Hotel & Motel Association; a bar owners association; universities and colleges; Legion Hall representatives; and the Ottawa Council on Smoking and Health.
- The OCSH organized meetings between city councillors and a group of 3-4 residents from the councillor's own ward.
- The Medical Officer of Health sent regular one-page communiqués to all members of council on key issues related to the proposed by-laws.
- The Medical Officer of Health and members of the Ottawa Council on Smoking and Health took advantage of every opportunity during the campaign period to make (or defend) the case for the by-laws in the media.
- The OCSH held a news conference on the day before the Health Committee considered the proposed by-laws, featuring local, national, and international experts who addressed the health issues of second-hand smoke exposure, the tobacco industry's involvement in by-law campaigns, the "ventilation solution," and the experience of another Ontario community that had banned smoking in all public places a year earlier.
- The Health Committee held a fifteen-hour meeting, during which five-minute deputations were heard from any individual or group that wished to speak on the proposed by-laws. The OCSH ensured that a broad

³ The author of this paper played a key role in designing and implementing the OCSH advocacy plan.



cross-section of citizens and issues were represented and dumped the 8000 advocacy postcards on Council table as part of our presentation to Committee.

- The OCSH organized calls to about 1500 supporters (those who had signed postcards) in the days prior to the final vote and requested they telephone their City Councillor to urge him/her to vote in favour of the by-laws.
- The OCSH paid for a full-page advocacy advertisement in the three major daily newspapers four days before the final vote by City Council, urging the public to telephone their councillors and ask them to vote for the by-laws.

In sum, Public Health staff worked to ensure that the public and members of City Council understood the rationale for and the provisions of the proposed smoke-free by-laws. OCSH members ensured that the passive majority who supported the by-law became vocal proponents, speaking out by writing letters to the editor, by appearing before the Health Committee, and by contacting their councillors.

Opponents' Actions

Opposition to the proposed by-laws largely came from two sources:

- Bar owners.
- Bingo hall operators.

During the four months of the by-law campaign, members of the hospitality sector (owners, managers and staff) opposing the by-laws were not well organized and did not speak with one voice on the issues. Some wanted to have the option of designated smoking rooms, while others opposed any further restrictions on smoking in their establishments. (Some restaurant owners approved of the proposed smoking ban with no DSRs, since it would create a level playing field between restaurants and bars and among the restaurants themselves.) Under the leadership of an existing business association, a group of bar and restaurant owners took out a half-page advocacy ad in the major dailies a few days prior to the Health Committee meeting, opposing the by-laws and urging hospitality representatives to unite. The phone number on the ad was that of the (now defunct) Canadian Tobacco Manufacturers' Council. In response, a group of owners of small independent restaurants and bars calling themselves BREATHE – Bars Respecting Equal Access to Healthy Environments – came out publicly that same week in sup-

port of a complete smoking ban, provided it was applied uniformly to *all* hospitality establishments. Many hospitality industry representatives appeared before the Health Committee, but because they were in three separate camps (and because the majority of deputations supported a complete ban), the opponents were unsuccessful in their attempts to weaken the by-laws.

Closely following the passage of the by-laws, owners of hospitality businesses that opposed the by-laws formed a new group, PUBCO – the Pub and Bar Coalition of Ontario – to undermine the by-laws. Since its inception, PUBCO has been organized, active, and visible in the local media. PUBCO challenged the constitutionality of the by-laws in court, losing both in Ontario Superior Court and the appeal. For the first year after implementation, PUBCO provided lawyers and paid the court costs of members opposing tickets for violations of the by-laws.⁴ (In all, some 2500 tickets were issued during the first sixteen months after the by-laws came into force.⁵)

PUBCO now has two staff members and a permanent office and has expanded its advocacy to other communi-

⁴ PUBCO did not make public the names or numbers of their members and cheques were not issued by PUBCO; therefore, it is impossible to say how many contested tickets were funded by PUBCO. In mid-August 2002, however, PUBCO ended its practice of paying for the legal counsel to contest tickets issued to members:

“Over the last six months we have defended numerous tickets issued by the city and, apart from a few remaining specific issues on the private club issue, we have exhausted all of the legal avenues. We advised members several months ago that it would be difficult to continue to defend establishments that were still condoning smoking, and this has proven to be the case. PUBCO has managed to negotiate settlements with the city for the vast majority of tickets (well over 200) that have been issued, and we see little to be gained by continually going to court and incurring mounting legal costs to defend cases that will likely be unsuccessful.

Thus, commencing, August 15, it will not be possible for PUBCO to supply legal counsel to defend tickets issued for ‘permitting smoking’ or ‘provision of ashtrays’ or the like, issued after such date. PUBCO will, however, continue to provide advice at no cost as to how such tickets should best be handled in the event that members might still wish to pursue the issue.” (PUBCO Bulletin #10; taken from www.Pubcoalition.com)

⁵ According to the City of Ottawa By-law Services, 442 tickets were issued from September to December 2001 and 2,117 tickets were issued from January to December 2002. (Private communication, November 2003.)



ties across the province that are attempting to implement their own smoke-free by-laws. Local membership in PUBCO, however, has dropped from a stated high of 170 members to around 45, and PUBCO is suing a number of members for failure to pay their fees.(9)

Vocal opposition to Ottawa's proposed by-laws also came from the bingo sector. Bingo hall operators, their patrons (a large majority of whom smoke), and many local charities that raise money through charitable bingos publicly opposed the application of the smoking ban to bingo halls. They were very successful in getting sympathetic media coverage, both during the by-law campaign and after implementation, by highlighting the negative impact of reduced bingo revenues on the local charities.

Responses to Opponents' Concerns

To respond to the concerns raised by bar and restaurant owners, the OCSH focused on getting out key facts on the issue, in particular the health risks to employees exposed to second-hand smoke in hospitality workplaces and the economic evidence showing that the hospitality sector does not suffer from smoking bans. We also worked hard to ensure that those who stood to be affected most by the by-law – the hospitality employees and the owners – spoke out in favour of the proposed smoking ban. We made personal contact with owners and staff and asked them to appear before Health Committee, to submit letter-to-the-editor, and to contact their City Councillors.

We did not successfully address the concerns related to bingos. The issue is a complex one, in part because bingos are regulated by both the provincial and municipal governments. As well, changing demographics and the advent of new forms of legalized gambling have contributed to a steady decline in bingo revenues over the past ten years. Nonetheless, we continued to advocate for a level playing field, with no exceptions. We argued that there were other solutions to the challenges facing bingo operators and the charities they support that did not necessitate a weakening of the by-laws.(10)The charities' fears of revenue losses received strong sympathy from the media and the public, despite the hypocrisy in the fact that many of the charities speaking against the by-law worked with youth, often in physical and/or health education pursuits.(11)

Success of Intervention

Enforcement/Compliance

The Ottawa smoke-free by-laws have been a tremendous success. Almost immediately after implementation compliance was at 95%. One of the key reasons for the high rate of compliance is the fact that the by-laws put the onus on owners/managers to ensure compliance. Owners are responsible for ensuring that staff and patrons are informed of the by-law and that patrons are asked to stop smoking and then denied service if they refuse to stop smoking. If the situation cannot be resolved at this point, owners can call by-law officers and/or the police.

There were difficulties with enforcement and compliance during the first year, primarily with about fifteen bars that continued to flout the by-laws. A series of escalating fines imposed on these establishments during the spring and summer of 2002 brought most of them into compliance. One year after implementation, compliance had increased to about 98%.(12) In October 2002, the City was granted the right to serve injunctions (an order from the Court to comply with the by-law) on six establishments that persisted in defying the by-law.(13) Two establishments complied immediately; for those that defied the court order to bring them into line, penalties include heavy fines of \$10,000-\$20,000 and possible jail time. The enforcement strategy resulted in an estimated 99% compliance by the second anniversary of the by-laws' coming into force.(14)

Impact of the By-law

The public continues to be highly supportive of the smoking ban. A public opinion survey conducted almost a year after implementation showed support remains strong at 70%.(15) Many restaurant owners have publicly stated they would never return to permitting smoking and that their business is better than ever.(16) Employment in the accommodation and food services industry grew in the months after the by-law went into effect, while total employment in the Ottawa area fell during the same period.(17) More than 80 new bar and restaurants opened in the first eight months after implementation and the number of bankruptcies among bars and restaurants was slightly lower than the previous year.(18) Eighteen months after implementation, there were more than 181 new or expanded bars and restaurants in the City.(19)

Despite these many indicators that the by-law has had a positive impact on the public and businesses, PUBCO



continues to make unsubstantiated claims that many of its members have suffered significant financial losses as a result. PUBCO refused to participate in an economic study to be undertaken by a reputable accounting firm on behalf of the City; as a result of the low response rate, it was not possible to estimate, from the survey results, the financial health of the bar and pub industry in Ottawa as a whole.(20)

In terms of the impact of the smoking ban on tobacco use, anecdotal reports from public health staff indicate that there has been an increase in requests for information and assistance with smoking cessation, and the rate of daily smoking among adults aged 20 and over in Ottawa has dropped from 22% to 17%.(21) Further research is needed to determine the extent to which the by-laws contributed to this decrease in tobacco use.

Cost of Implementation

The City budgeted approximately \$800 000 (about \$1 per capita) during the first year of the by-law for awareness activities and enforcement. Additional by-law officers were hired and trained, visiting about 3000 hospitality and entertainment facilities prior to implementation to ensure that operators understood what the law required of them. All businesses were provided with educational kits and signage for their establishments. The City incurred additional costs related to defending the by-laws in both Ontario Superior Court and the Court of Appeals, when PUBCO challenged the law on jurisdictional and other grounds.

Implementation of the by-law imposed no cost on owners or employees. All mandatory signage was provided by the City, and with no allowance for designated smoking rooms there were no related construction costs. There is no evidence of economic harm to the hospitality sector.(22)

Conclusions

The experience of those advocating for a complete smoking ban in the City of Ottawa can be emulated elsewhere. Our policy-makers faced the same fears and concerns that constituents raise in other communities. The amalgamation of eleven former municipalities and Regional Government into one city made the need for a uniform city-wide smoking policy a high priority, but it was the combined effort of many individuals and organizations that resulted in passage of by-laws mandating a complete smoking ban in all public places and workplaces, without exemptions.

In sum, the Smoke-Free Ottawa Campaign was victorious for several reasons:

- The leadership of three credible, knowledgeable, and articulate spokespeople during different times in the campaign: the Medical Officer of Health, the Chair of the Health Committee, and the Mayor.
- The active involvement of a grassroots coalition, the Ottawa Council on Smoking and Health, which ran a sophisticated campaign to get the passive majority to actively support the proposed ban.

The emphasis throughout the campaign on the need for a level playing field, i.e. a uniform ban, with no exceptions, and no allowance for designated smoking rooms. The argument for a level playing field was supported on both health grounds – all citizens deserve equal protection from second-hand smoke – and economic grounds – all businesses operate under the same set of rules, giving no unfair advantage to any.

References

- 1 Health Canada, *Canadian Tobacco Use Monitoring Survey (CTUMS)*, February-December 2002. Taken from http://www.hc-sc.gc.ca/hecs-sesc/tobacco/research/ctums/2002/annual_summary.html. Current smokers include both daily and non-daily smokers.
- 2 Health Canada, *Canadian Tobacco Use Monitoring Survey (CTUMS)*, February-December 2002. Taken from http://www.hc-sc.gc.ca/hecs-sesc/tobacco/research/ctums/2002/annual_summary.html. Current smokers include both daily and non-daily smokers
- 3 Health Canada, *Canadian Tobacco Use Monitoring Survey (CTUMS)*, February-December 2002. Taken from http://www.hc-sc.gc.ca/hecs-sesc/tobacco/research/ctums/2002/annual_summary.html. Current smokers include both daily and non-daily smokers.
- 4 EM Makomaski Illing and MJ Kaiserman, "Mortality Attributable to Tobacco Use in Canada and Its Regions, 1994 and 1996," *Chronic Diseases in Canada* 1999; 20(3).
- 5 Please note that all figures cited are in Canadian dollars. Canadian Centre on Substance Abuse, *The costs of substance abuse in Canada*, 1996. Taken from <http://www.smoke-free.ca/factsheets/pdf/ecocosts.PDF>.
- 6 Ministry of Skills Development and Labour, Government of British Columbia, News Release, "Cabinet Decision Note: Environmental Tobacco Smoke Regulation," 15 January 2002. Taken from <http://www.labour.gov.bc.ca/news/2002/ets-cabsub.htm>.



- 7 *Environmental Tobacco Smoke Regulation: B.C. Regulation 3/2002*. Approved and Ordered January 18, 2002. Taken from <http://www.labour.gov.bc.ca/news/2002/ets-regulation.htm>.
- 8 At time of writing, the City of Ottawa had the most restrictive smoking controls at the municipal level because smoking is banned in all public places and all workplaces, with no exceptions and no smoking rooms permitted.
- 9 Nelly Elayoubi, "PUBCO raising the bar: Despite lawsuits and haggling, by-law-battling organization eyes expanded role," *Ottawa Sun*, 16 November 2003.
- 10 When they approved the by-laws, City Council directed staff to prepare a report to address the concerns of charitable and non-profit organizations that raise money from the operation of bingos. In March 2002, City Council endorsed the recommendations in the staff report, including working with other municipalities to advocate for changes to provincial regulations that would assist the charities and waiving bingo licensing fees for one year and reducing them for a second year. (The City collects a licence fee of up to 3% of the prize value from each bingo operated by a charity, to a maximum of \$105; the total collected in fiscal year 2001 was \$1.36 million. The charities also pay the bingo hall operators for the use of the premises and the equipment). Report to Corporate Services and Economic Development Committee and Council, "Ontario's Declining Charitable Bingo Revenues: A Four-Point Action Plan For Ottawa," 28 February 2002, Submitted by Kent Kirkpatrick, General Manager, Corporate Services Department, City of Ottawa. Corporate Services and Economic Development Committee, Minutes 24, 7 March 2002, 9:30 a.m.
- 11 For a more in-depth discussion of the issue of charitable organizations and bingo, see the website of the Ontario Campaign for Action on Tobacco at <http://www.ocat.org/onlegislation/bingohalls.html>.
- 12 City of Ottawa, By-law Services, Personal Communication, November 2003.
- 13 Caroline Phillips, "Burning to stop by-law breakers: City seeks court order for bars flouting ban," *Ottawa Sun*, 15 May 2002.
- 14 City of Ottawa, By-law Services, Personal Communication, November 2003.
- 15 "Public Support Grows for City's Smoking By-law: No net reduction city-wide in visits to bars and restaurants," *Decima's Ottawa Market Pulse: A Decima Quarterly Report on National Capital Region*, 15 July 2002.
- 16 Read testimonials at <http://www.smokefreeottawa.com/english/news-e.htm>. See also "Ottawa by-law model of how to make smoke-free work," *Edmonton Journal*, 28 July 2003: "But the industry collapse many predicted has not happened, said Steve Monuk, a managing partner of eight Ottawa-area restaurants and bars. In fact, before this summer's dramatic decline in tourism, Monuk's business had exceeded pre-ban sales figures."
- 17 KPMG, *Economic Impact Analysis of the No-smoking By-Law on the Hospitality Industry in Ottawa*, December 2001.
- 18 Jake Rupert, "82 eateries open despite smoking ban," *The Ottawa Citizen*, 6 May 2002.
- 19 City of Ottawa, News Release, "181 new/expanded bars and restaurants since Smoke-free By-laws: City Report," 24 April 2002.
- 20 KPMG, *Economic Impact Analysis of the No-Smoking By-Laws on the Hospitality Industry in Ottawa*, November 2002. Taken from www.ocat.org/pdf/Final_KPMG_report_Nov_2002.pdf.
- 21 KPMG, *Economic Impact Analysis of the No-Smoking By-Laws on the Hospitality Industry in Ottawa*, November 2002. Taken from www.ocat.org/pdf/Final_KPMG_report_Nov_2002.pdf.
- 22 "After accounting for the declining trend [in the ratios of restaurant and bars sales to retail sales], seasonal variations, and other factors, results from both analyses showed no statistically significant impact of the by-law on sales of restaurants and bars." Ontario Tobacco Research Unit, "Research Update: The Economic Impact of a Smoke-free By-law on Restaurant and Bar Sales in Ottawa, Canada," June 2003. Taken from http://www.camh.net/otru/reports_index.html.