

## Air Force expands tobacco-free environments at base installations and services

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- In accordance with Air Force Instruction 40-102, "Tobacco Use in the Air Force," tobacco use is prohibited on installations except in designated tobacco areas and housing units.

The instruction, released in March 2012, expands tobacco-free environments, clarifies tobacco use restrictions in training environments and prohibits tobacco sales in Air Force Services establishments.

Tobacco use includes, but is not limited to, cigars, cigarettes, electronic cigarettes ("e-cigarettes"), stem pipes, water pipes, hookahs and smokeless products that are chewed, dipped, or sniffed.



(U.S. Air Force photo illustration/Senior Airman Chad Strohmeyer)

All medical treatment facilities' campuses will be tobacco-free by September 2013. According to the instruction, the medical treatment campus encompasses the facility as well as its parking lots, lawns and "other outdoor areas contiguous with the medical treatment facility."

"Today, more than 3,400 civilian medical centers have established smoke-free campus policies," said Col. John Oh, the Air Force Medical Support Agency chief of health promotion. "Smoke-free policies have emerged as the social norm at medical centers. These policies increase worker productivity; help tobacco users to quit; and protect the health of others, including vulnerable populations."

Tobacco use is also prohibited for Airmen in uniform or during school duty hours in formal training courses to include professional military education, officer training school, technical training and inter-service training programs.

Tobacco free living is one of the strategic priorities of the National Prevention Strategy, which aims to move the U.S. health care system away from disease and treatment and toward prevention and wellness, Oh said. To meet this priority, the Healthy People 2020 objective for tobacco use is 12 percent. Based on the 2008 Department of Defense Survey of Health-Related Behaviors, however, 23 percent of active-duty Airmen smoke compared with 31 percent among all DOD service members.

While meeting the national goal is important, the number one thing Air Force leaders are trying to accomplish with these various initiatives is mission readiness, Oh said. For example, people who use tobacco have recorded slower run times; this means their endurance level is low. Tobacco use also adversely impacts night vision, impairs post-operative wound healing and leads to impotence.

At current tobacco use rates and without cessation, more than 30,000 Airmen on active duty today will ultimately die prematurely of a tobacco-related medical complication. Oh said.

Service members and other TRICARE beneficiaries who use tobacco are encouraged to review resources at DOD's tobacco cessation website, www.ucanquit2.org, which is specifically oriented to DOD service members and veterans, and discuss how to quit with their health care provider and installation Health Promotion team.

"Tobacco free living isn't just a virtue," Oh said. "It's a really critical part of our mission and gets at the sustainability of our DOD enterprise. DOD officials spend \$53 billion per year in health care costs, and these costs are increasing faster than inflation. Tobacco use is the leading source of preventable health care costs. If

we can decrease tobacco use in the Air Force, we can save thousands of lives, help bend the health care cost curve and better ensure we are prepared to fly, fight and win."