

Indiana Local Boards of Health

Smokefree Air Supplement

A
Guide to
Passing a
Comprehensive
Smokefree
Air Law



Indiana Association of Local Boards of Health

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Smoke Free Indy

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Introduction

Greetings! As a board of health member you have an amazing opportunity to advocate for **good public health policy** in your community and in the state. The Indiana Local Board of Health Advocacy Guide gave you information and tools to be a better advocate and this supplement gives you useful information about **smokefree air laws** so that you can make a difference in your community.

Secondhand smoke is a health hazard; there is no safe level. Each year 1,240 people in Indiana die from the effects of secondhand smoke. The most effective way to protect your community is by implementing a comprehensive smokefree air law which **protects everyone** — workers, customers, children, entertainers, those with asthma and other breathing disorders.

This Smokefree Air Supplement in conjunction with the Advocacy Guide will give you tools to advocate for such a law locally and at the state level. The first pages of the Supplement lay out a **plan of action** for potential steps your board can take as well as guidelines for your role in support of smokefree communities. Included is a list of websites to check out to gain a better understanding of the issue. The Indiana Campaign for Smokefree Air is a dynamic organization working to pass a state-wide smokefree air law. Their website offers a wealth of information on the topic. Two of their fact sheets (Smokefree air has immediate benefits and Smokefree air is good for business) are included in this folder.

One of the first steps to support smokefree air laws is for your board to **adopt a smokefree air resolution**. A resolution is a formal statement of a decision or expression of an opinion adopted by an organization or board. In the Supplement you will find three sample resolutions including one from the Vanderburgh County Board of Health. Once your board has made the decision to collectively support a smokefree air law, it is important to be able to speak knowledgeably about it. The Smokefree Air Talking Points and Secondhand Smoke Myths and Realities will give you the information you need to **talk with others about the issue** and prepare for opposition.

When your community is at the point of **drafting a smokefree air law** and you are giving input, the Fundamentals of Smokefree Air Policy Development for Hoosier Communities and the Indiana Smokefree Air Model Ordinance (included in this folder) will be of great help to you. Be sure to check them out and reference them often. The model ordinance is the smokefree air law version endorsed by many health organizations and advocates in Indiana as the gold standard on which all ordinances should be modeled.

We hope that the information in this Smokefree Air Supplement will give you the skills and motivation to push for and support a comprehensive smokefree air law in your community and state. You can do it! And **your community will be healthier** because of your efforts!!

Smokefree Air Strategy

Below is an outline of strategies to consider when working to pass a smokefree air law in your community. The resources in [blue](#) can be found either in this Supplement or within the folder.

Believe in your purpose of protecting the health of the public and that you can make a difference

[Board of Health Success Stories: Implementing and Supporting Tobacco Control Laws](#)

Understand your role in with smokefree air laws

[The Board of Health's Role in Supporting Smokefree Communities](#)

Know the facts

- ☐ Review relevant research

[Helpful Tobacco Websites](#)

- ☐ Know the current laws

Reach out and develop relationships with partners that share common visions and values such as your local and state tobacco coalition

[Indiana Campaign for Smokefree Air](#)

Put your position in writing

- ☐ Sign a resolution

[Smokefree Air Resolutions - national, state and local versions](#)

Spread the word

- ☐ Develop talking points

[Secondhand Smoke Talking Points](#)

- ☐ Launch a media campaign to educate the community

- ☐ Write letters to the editors

[Indiana Boards of Health Advocacy Guide](#)

- ☐ Write an Op-Ed piece

[Indiana Boards of Health Advocacy Guide](#)

Draft your ordinance

- ☐ Seek guidance

[Fundamentals of Smokefree Air Policy Development for Hoosier Communities](#)

- ☐ Develop clear definitions and draft policies

[Indiana Smokefree Air Model Ordinance](#)

- ☐ Prepare for opposition

[Secondhand Smoke Myths and Realities](#)

The Board of Health's Role in Supporting Smokefree Communities

Local Boards of Health can be a great ally in support of smokefree communities. As representatives for the health of the community, board of health members can be the tipping point in smoke-free air efforts as many county commissioners look to them for policy advice on protecting the public's health.

The National Association of Boards of Health (NALBOH) adopted a resolution in 2009 to support smokefree air laws that protect ALL individuals from secondhand smoke (including employees from bars, restaurants, private and public workplaces and casinos).

NALBOH as well as many other national and local health organizations (U.S. Surgeon General, Centers for Disease Control and Prevention, American Lung Association, American Heart Association, American Cancer Society, etc.) recognize that there is no risk-free level of secondhand smoke. The use of ventilation or allowing smoking rooms is NOT effective in protecting workers from secondhand smoke carcinogens. A **comprehensive** smokefree air policy (includes all workplaces and does not include any exemptions) is the most effective way to protect everyone from the dangers of secondhand smoke.

**\$390 million =
annual economic
impact of
secondhand
smoke in Indiana**

Recommendations for boards of health in smokefree air ordinance efforts:

1. All members of the board of health should study the research and understand the benefits of a smokefree air policy that protects ALL workers. Contact the Indiana Association for Local Boards of Health (InALBOH) for key resources on secondhand smoke and smokefree air policy (317.221.3138).
2. Identify a champion on the board of health and a champion among the commissioners to work together throughout the policymaking process. These champions should be willing to stop the ordinance if it is less than comprehensive.
3. It is important to have a board of health member introduce the ordinance to the commissioners in order to demonstrate support of the board of health from the beginning. This board member can answer questions that the commissioners may have on the purpose of the ordinance and the value of it being comprehensive.
4. The board of health member who introduces the ordinance should also be prepared to give background information at the introduction and to testify at the hearing to further educate the commissioners on the importance of a comprehensive ordinance and why the board supports one.
5. All board of health members and the health officer should be present at the introductory meeting and subsequent meetings to reinforce their support for the comprehensive ordinance.
6. If the leadership in the county does not seem ready for a county-wide policy, starting with a city ordinance is a good strategy. The influence of the local board of health would be valued at the city level as well.

There is no safe level of secondhand smoke.

Helpful Tobacco Websites

Action on Smoking and Health	www.ash.org
American Cancer Society	www.cancer.org
American Heart Association	www.americanheart.org
American Lung Association	www.lungusa.org
Americans for Nonsmoker's Rights	www.no-smoke.org
BACCHUS and GAMMA Peer Education Network	www.tobaccofreeu.org
Campaign for Tobacco-Free Kids	www.tobaccofreekids.com
Centers for Disease Control and Prevention, Office on Smoking and Health	www.cdc.gov/tobacco
Indiana Tobacco Prevention and Cessation Agency	www.in.gov/itpc/
Indiana Campaign for Smokefree Air	www.smokefreein.com
The Health Education Council	www.healthedcouncil.org
National Tobacco Free Rodeo Project	www.bucktobacco.org
North American Quitline Consortium	www.naquitline.org
SmokeFree Movies	www.smokefreemovies.ucsf.edu/
Tobacco Cessation Leadership Network	www.tcln.org
Tobacco Control Network	www.ttac.org/TCN
Tobacco Scam	www.tobaccoscam.ucsf.edu

Indiana Campaign for Smokefree Air

Who They Are

The Indiana Campaign for Smokefree Air (ICSA) is a statewide coalition comprised of national, state and local health organizations, businesses and faith-based organizations, as well as thousands of Indiana residents committed to protecting all workers from exposure to secondhand smoke. The ICSA's goal is the adoption of a statewide comprehensive smokefree workplace law that covers ALL workplaces.

What They Do

ICSA works on behalf of all workers to ensure no one has to choose between their health and their paycheck. Coalition members lobby lawmakers, conduct polling, compile evidence-based research on the health and economic benefits of statewide smokefree air laws, and work to disseminate information to the public through a variety of activities. In addition, coalition members are also available to provide expert testimony or information to support local smokefree air efforts; however our focus remains to ensure all of Indiana is covered by a comprehensive smokefree air law.

How You Can Help

Each year, more than 1,200 Indiana adult nonsmokers die from exposure to secondhand smoke. Without a statewide law, there is no way to guarantee that Hoosier workers will be protected in their work environments. To join the fight and ensure everyone has the right to breathe clean, smokefree air, visit **worksmokefree.com**, follow ASmokeFreeIN on Twitter or become a fan on our Facebook page.

Partner Organizations

American Cancer Society, American Heart Association, American Lung Association, Campaign for Tobacco-Free Kids, Indiana State Medical Association, Indiana Academy of Family Physicians, Alliance for Health Promotions, American Academy for Pediatrics- IN, Americans for Non-Smokers' Rights, Clarian Health, Coalition for Advanced Practice Nurses, Hoosier Faith & Health Coalition, Indiana Society for Public Health Education, Indiana Tobacco Prevention and Cessation, Indiana University Simon Cancer Center, Indiana Black Expo, Indiana Cancer Consortium, Indiana Dental Association, Indiana Hospital Association, Indiana Latino Institute, Indiana Minority Health Coalition, Indiana Perinatal Network, Indiana Public Health Association, Little Red Door Cancer Agency, March of Dimes Indiana Chapter, Mental Health America of Indiana, Promoting Smokefree Pregnancies of Indiana Coalition and The Leukemia & Lymphoma Society.

Indiana Campaign for Smokefree Air Resolution

The **Indiana Campaign for Smokefree Air** (ICSA) is working on legislation to ensure a smokefree indoor air environment in all workplaces in Indiana, including restaurants, bars and casinos.

Smokefree laws benefit businesses of all sizes, and their employees.

A number of economic studies show that comprehensive smokefree workplace laws have a positive impact on businesses by benefiting the health of workers, decreasing absenteeism, reducing janitorial and maintenance costs, lowering insurance rates and resulting in fewer smoking-related fires.

Smokefree laws keep people alive.

Secondhand smoke is the third leading cause of preventable death in the United States. It causes 35,000 – 40,000 deaths from heart disease every year, including 3,000 lung cancer deaths among otherwise healthy nonsmokers. Secondhand smoke contains more than 4,000 chemicals, including more than 50 known carcinogens. Comprehensive smokefree workplace policies reduce tobacco related illnesses and the costs of treating them.

Smokefree laws protect our most vulnerable residents.

Smokefree policies enable children, the elderly and people with certain health conditions to go about their lives without worrying that their health will be put at risk. Nonsmoking sections and ventilation systems don't eliminate exposure to cancer-causing chemicals, as even the best ventilators are incapable of removing the free-floating poisons of secondhand smoke.



ICSA Needs Your Support

ICSA is currently developing advocacy, educational and media materials, setting up meetings with legislators in their districts and coordinating campaign strategy. ICSA invites you to join our campaign. If your **board of health** would like to formally support this effort and mobilize local activists to educate policymakers, the public and the media about this initiative, **please sign and return this resolution**. To print a new copy visit **www.worksmokefree.com**.

Indiana Campaign for Smokefree Air Resolution

Resolution of the _____ County Local Board of Health

Whereas, The Surgeon General states: "The debate is over, the science is clear, secondhand smoke is a serious health hazard that causes premature death and diseases ..."

Whereas, secondhand smoke is a workplace hazard and no employee should have to choose between a job and their health in order to earn a living; and

Whereas, all credible economic studies show communities with comprehensive smokefree workplace laws have not seen a negative impact on the hospitality industry or any other sector; and

Whereas, smokefree policies decrease absenteeism among non-smoking employees, reduce housekeeping and maintenance costs, lower insurance rates and reduce smoking-related fires; and

Whereas, according to the U.S. Surgeon General, the only way to effectively protect individuals from the hazards of secondhand smoke is to **completely** eliminate indoor smoking;

BE IT RESOLVED, THEREFORE, that the undersigned members of the _____ County Local Board of Health hereby asks the members of the Indiana General Assembly to support comprehensive legislation calling for smokefree air in all workplaces including: restaurants, bars and casinos to protect all employees; and is a supporting member of the Indiana Campaign for Smokefree Air:

Local Board of Health _____
Contact Person's Name _____
Street Address _____
City _____, IN Zip Code _____
Email address _____ Phone _____

Please complete and submit the resolution to Danielle Patterson:

Address —
American Heart Association
6100 W. 96th Street, Suite 200
Indianapolis, IN 46268

Email — Danielle.Patterson@heart.org
Fax — 317.873.3070

NALBOH Resolution on Smokefree Workplaces

WHEREAS, tobacco smoke is a major source of pollution in most indoor air environments, particularly office work sites, and has been classified as a Group A carcinogen by the United States Environmental Protection Agency (1); and

WHEREAS, the toxins in tobacco smoke kill over 438,000 people per year in the United States. Secondhand smoke causes over 3,400 lung cancer deaths annually, as well as exacerbation of lung disease in nonsmoking adults and respiratory problems in children (2,3); and

WHEREAS, involuntary smoking has many non-fatal, but serious effects; breathing secondhand smoking makes the eyes and nose burn, and can cause headaches and nausea in non-smokers (4); and

WHEREAS, use of ventilation systems cannot control secondhand smoke (1); and

WHEREAS, bans on indoor smoking have not had a negative effect on local economies in which they are enacted (5);

WHEREAS, there is no risk-free level of exposure to secondhand smoke (1);

THEREFORE, BE IT RESOLVED that the National Association of Local Boards of Health (NALBOH) supports smokefree policies in all workplaces including bars, restaurants, private and public workplaces, and casinos;

BE IT FURTHER RESOLVED that NALBOH supports clean air laws that protect all individuals from secondhand smoke.

Adopted May 2005; Revised and Adopted June 2009

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2. American Lung Association website. Available at: http://www.lungusa.org/site/c.dvLUK9O0E/b.22937/k.A576/Tobacco_Control.htm.
3. American Lung Association Fact Sheet: Smoking. Available at: http://www.lungusa.org/site/c.dvLUK9O0E/b.39853/k.5D05/Smoking_101_Fact_Sheet.htm
4. California Environmental Protection Agency. Identification of Environmental Tobacco Smoke as a Toxic Air Contaminant. Executive Summary. June 2005. Available at: <http://repositories.cdlib.org/tc/article/1194/type/pdf/viewcontent>
5. Americans for Nonsmokers' Rights. *Economic Impact of Smokefree Ordinances: An Overview*. August 2006. Available at: <http://www.no-smoke.org/document.php?id=219>

**February 11, 2010 Resolution of the
Vanderburgh County Board of Health
In support of 100% Smoke Free Workplaces & Public Places**

Whereas, The Surgeon General states: "The debate is over, the science is clear, secondhand smoke is a serious health hazard that causes premature death and diseases ..."

Whereas, secondhand smoke is a workplace hazard and no employee should have to choose between a job and their health in order to earn a living; and

Whereas, all credible economic studies show communities with comprehensive smokefree workplace laws have not seen a negative impact on the hospitality industry or any other sector; and

Whereas, smokefree policies decrease absenteeism among non-smoking employees, reduce housekeeping and maintenance costs, lower insurance rates and reduce smoking-related fires; and

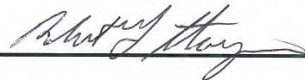
Whereas, according to the U.S. Surgeon General, the only way to effectively protect individuals from the hazards of secondhand smoke is to **completely** eliminate indoor smoking;

BE IT RESOLVED, THEREFORE, that the Vanderburgh County Board of Health supports optimal protection of the public through an ordinance requiring 100% smoke free environments in all workplaces and public places.

Approved this 11th day of February 2010 in Vanderburgh County, Indiana and forwarded to the Vanderburgh County Commissioners, the Mayor of Evansville, and the members of the Evansville City Council.



Ray W. Nicholson, M.D.
Health Officer and Secretary
Vanderburgh County Board of Health



Robert F. Stayman, Esq. Board Chair
Vanderburgh County Board of Health

Smokefree Air Talking Points

Everyone has the right to breathe smokefree air.

Secondhand smoke is a health hazard.

- Secondhand smoke causes approximately 3,400 lung cancer deaths and about 46,000 heart disease deaths among non-smoking adults each year in the United States (1). According to the Campaign for Tobacco-Free Kids, 1,240 adult Indiana nonsmokers die from exposure to secondhand smoke each year.
- Secondhand smoke contains 69 known or probable carcinogens and more than 4,000 chemicals including formaldehyde, arsenic and cyanide (2).
- Exposure to secondhand smoke causes many of the same tobacco-related diseases and premature death as active smoking, including increasing nonsmokers' heart disease, stroke and cancer risk (3).
- In addition to causing lung cancer and heart disease, secondhand smoke increases the risk for sudden infant death syndrome (SIDS), acute respiratory infections, ear problems and more severe asthma (4).

No one should have to choose between a job and good health.

- Dishwashers, wait staff and gaming employees deserve protection from secondhand smoke as much as bankers, lawyers or office workers.
- The workplace is a major source of secondhand smoke exposure for adults, and secondhand smoke exposure in the workplace has been linked to an increased risk of heart disease and lung cancer among nonsmoking adults (5).
- Food service workers have a 50 percent greater risk than the general public of dying from lung cancer, in part because of their continuous exposure to secondhand smoke in the workplace (6).
- Without smokefree policies in effect, bars and lounges have among the highest concentrations of secondhand smoke of all public spaces – exposing bartenders to even greater levels of secondhand smoke than waiters and waitresses (7).
- The evidence shows that implementing smokefree policies has immediate benefits on restaurant and bar workers' health. Indiana air monitoring studies in Bloomington, Fort Wayne, and West Lafayette found an 89-94 percent decrease in indoor air pollutions in workplaces after the implementation of a smokefree air law (8).

Each year 1,240 adult Indiana nonsmokers die from exposure to secondhand smoke.

Smokefree Air Talking Points

There is NO safe level of exposure to secondhand smoke.

- The 2006 Surgeon General's Report on *The Health Consequences of Involuntary Exposure to Tobacco Smoke* concluded that "The scientific evidence indicates there is no risk-free level of exposure to secondhand smoke. (9)"
- Smoke knows no bounds. Nonsmoking sections and ventilation systems do not eliminate exposure. According to the American Society of Heating, Refrigerating, and Air Conditioning Engineers (ASHRAE), "The only means of effectively eliminating health risks associated with indoor exposure is to ban smoking activity... No other engineering approaches, including current and advanced dilution ventilation or air cleaning technologies, have demonstrated or should be relied upon to control health risks from ETS (environmental tobacco smoke) exposure in spaces where smoking occurs...(10)"
- Restricting smoking in workplaces only during certain hours fails to protect the workers who spend an entire workday in the facility. Additionally, smoke does not leave when the smokers walk out the door.

Smokefree air is good for business and the economy.

- A 2010 statewide poll conducted by the American Cancer Society Cancer Action Network (ACS CAN) revealed that 92 percent of Hoosiers would be likely or more likely to visit bars, restaurants, bowling alleys and casinos that are smokefree (11).
- According to the poll, 71 percent of Hoosiers stated that a restaurant's current smoking policy impacts their decision to dine in (11).
- Passing a statewide smokefree air law would keep all establishments on an even playing field, with the possibility of many places seeing an increase in patronage. Less than 10 percent of those polled would refrain from visiting a non-smoking establishment (11).
- One year after the smokefree air law went into effect, New York City bars and restaurants were booming. Data from the New York City Department of Finance show that tax receipts increased by 8.7 percent, or approximately \$1.4 million. Moreover, the New York State Department of Labor found no evidence that restaurants were closing as a result of the smoke-free law, and the rate of restaurant openings remained unchanged since the law went into effect (11).

Secondhand smoke costs Indiana millions of dollars per year.

- A 2009 report from the Bowen Research Center at the Indiana University School of Medicine concluded that secondhand smoke costs Indiana \$390 million per year or \$62 per Hoosier (12).
- The social costs of secondhand smoke are substantial. In 2005, the estimated economic value of lost wages, fringe benefits, and services associated with secondhand smoke exposure amounted to \$4.7 billion per year nationwide (13).

Smokefree Air Talking Points

Broad support exists for smokefree air policies.

- A 2009 poll conducted by the Indiana Rural Health Association (IRHA) in four rural Indiana counties concluded that two-thirds, or 66 percent, of adults in rural Indiana would support an ordinance in a nearby city requiring all workplaces, including restaurants and bars, to be totally smokefree.
- A 2010 poll conducted by the American Cancer Society Cancer Action Network found that 66 percent of, or two out of three, Indiana voters favor a statewide comprehensive smoke-free air law – an increase of two percentage points over the previous year.

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Secondhand Smoke Myths and Realities

MYTH #1: Secondhand smoke isn't *really* harmful to health.

REALITY: Secondhand smoke contains more than 4,000 chemicals and at least 69 carcinogens and is proven to cause lung cancer, heart disease and other serious respiratory illnesses. Secondhand smoke is one of the leading preventable causes of death in the United States. Each year, according to the Centers for Disease Control and Prevention (CDC), at least 38,000 people die because of secondhand smoke exposure. Last year, experts at the CDC advised persons with heart disease – 22 percent of Americans, or more than 64 million people – to avoid settings where smoking is allowed because of the risk that even short-term exposure to secondhand smoke can trigger heart attacks. Children are especially vulnerable to other people's smoke, suffering more bronchitis, asthma and ear infections as a result. A January 2005 study also found that exposure to secondhand smoke has a negative impact on children's performance on tests measuring reading, math and reasoning skills. Numerous studies and the leading public health authorities in the United States and around the world have all concluded that secondhand smoke is a significant threat to health. This conclusion has been reached by the U.S. Environmental Protection Agency, the U.S. Surgeon General, the National Cancer Institute, the U.S. Public Health Service, the World Health Organizations and numerous other public health experts.

MYTH #2: Ventilation and separate sections can solve the secondhand smoke problem.

REALITY: While the cigarette companies, their allies, and others have proposed separate smoking and non-smoking sections and ventilation "solutions" to the health harms of secondhand smoke, the fact is that these options fall short of protecting everyone's health. First, separate sections simply do not work to protect health, as smoke continues to flow freely between the separated sections. The problem with ventilation is that scientific research shows that even the newest technologies under ideal conditions are incapable of removing all secondhand smoke and its toxic constituents from the air. No credible scientific, medical, or engineering authority has claimed that ventilation is capable of protecting people's health from the toxins in secondhand smoke. The evidence is clear that ventilation technology does not serve as an alternative to eliminating exposure to secondhand smoke.

MYTH #3: Smokefree laws are bad for business.

REALITY: Opponents of smokefree laws often fear business losses related to the laws. Because smokefree laws are new to these businesses, their fears are understandable, but also unfounded. The tobacco industry has propagated this false fear, especially among hospitality business owners, because these laws cut into their profits. However, no credible economic study has ever demonstrated a negative impact of smokefree workplace laws on business. Researchers undertook a comprehensive study of the quality and funding of 97 studies on the economic impact of smokefree policies in the hospitality industry that were commissioned by the tobacco industry or organizations not associated with the tobacco industry. They concluded that all of the best-designed studies that used objective measures such as sales tax receipts included data from several years before and after the smokefree policies were implemented, and controlled for changes in economic conditions found that smokefree restaurant and bar laws have no impact or a positive impact on sales and employment. Studies concluding that smokefree policies negatively impacted the hospitality industry were usually based on predictions or estimates of changes and funded by the tobacco industry, and none were published in peer-reviewed journals. The only negative economic impact is on the tobacco industry.

Secondhand Smoke Myths and Realities

MYTH #4: But there's no real evidence that smokefree laws don't harm business.

REALITY: In fact, just the opposite is true. Dozens of studies and hard economic data have shown that smokefree laws do not harm sales or employment in restaurants and bars and may even have a positive impact. The most recent evidence comes from Massachusetts, where a study released by the Harvard School of Public Health last month found that the state's smokefree law did not affect sales or employment in restaurants, bars and nightclubs after taking effect on July 5, 2004. Some of the strongest evidence comes from New York City, where a report found that in the year after the city's smokefree law took effect March 30, 2003, business receipts for restaurants and bars increased, employment rose, the number of liquor licenses increased, virtually all establishments are complying with the law, and the vast majority of New Yorkers support the law. Even among bar and restaurant owners, support for New York's law has grown. James McBratney, President of the Staten Island Restaurant and Tavern Association, was quoted in the Feb. 6, 2005, issue of The New York Times saying "I have to admit, I've seen no falloff in business in either establishment [restaurant or bar]." According to The Times, "He went on to describe what he once considered unimaginable: Customers actually seem to like it, and so does he."

MYTH #5: People choose to work in restaurants and bars. If they don't like the smoke, they can find another job.

REALITY: Everyone has the right to breathe clean air at work. Those workers most affected by smoky air often have less choice in job flexibility and are less likely to have health insurance. Specifically, food preparation and service employees suffer disproportionately from the health harms of secondhand smoke because they work in extremely polluted environments. Today, bars and restaurants in Philadelphia have ten times the level of indoor air pollution as those in New York City, which requires that all workplaces be smokefree. But that's not all. A study published in the Journal of Occupational and Environmental Medicine found that just 43 percent of the country's 6.6 million food preparation and service employees and just 52 percent of all blue-collar workers are covered by smokefree workplace policies, while more than three-fourths of white-collar workers are covered. Fewer than 13 percent of bartenders and 28 percent of waiters and waitresses have the benefit of a smokefree workplace. These findings are cause for serious concern, as all workers should have the right to breathe clean air while on the job.

MYTH #6: Smokefree laws discriminate against smokers.

REALITY: Smokefree laws do not prohibit smokers from smoking; they simply place limitations on where smokers cannot smoke in order to protect everyone from exposure to secondhand smoke. Polls from across the country have demonstrated overwhelming public support for smokefree laws. Additionally, according to a national Gallup Poll conducted in July 2004, a majority of Americans would favor a ban that would make it illegal to smoke in all workplaces, restaurants and bars. And, more than half of smokers (57%) feel the increased restrictions on smoking in public places ARE justified, while just 39% feel they unjustly discriminate against smokers. These findings are consistent with results for this question over the last decade. Smokefree laws don't outlaw smoking; they just ask people to restrict their smoking in public places where it can affect the health of the people around them who have chosen not to smoke.

