

## Secondhand Smoke Jeopardizes Worker Health:

### The Need for Smoke-free Laws

More than 40 years after former U.S. Surgeon General Jesse Steinfeld first exposed the potential health risks of secondhand smoke (SHS) in 1971,<sup>i</sup> and nearly 30 years after a subsequent Surgeon General's report stated that SHS causes lung cancer and other diseases,<sup>ii</sup> all U.S. workers still do not have the right to breathe smoke-free air. In the late 1980s, 91.7 percent of Americans had an indicator of SHS exposure in their bloodstream<sup>iii</sup> and, at that time, only 3 percent of workers nationally reported a “no smoking” policy at their place of employment.<sup>iv</sup> Soon thereafter, laws prohibiting smoking in workplaces and other public venues were enacted at the local, state, and national levels to minimize the impact of SHS. Two Surgeon General Reports have concluded unequivocally that there is no safe level of exposure to SHS.<sup>v,vi</sup>

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Today, smoke-free policies have effectively reduced the number of people exposed to SHS in the workplace.<sup>vii,viii,ix,x</sup> The proportion of people who do not smoke with detectable levels of a SHS indicator has dropped from 87.5 percent in 1988 to 20.7 percent in 2018.<sup>xi,xii</sup> This level of exposure is still too high, and unfortunately, not all workers have the same level of protections. Currently, over 77 percent of the U.S. population is covered by 100 percent smoke-free state or local workplace laws, 78 percent is covered by 100 percent smoke-free restaurant laws, and 66 percent is covered by 100 percent smoke-free bar laws.<sup>xiii</sup> However, only 62 percent of the population is covered by 100 percent smoke-free laws covering all three of these types of venues.<sup>xiv</sup>

### Hospitality Workers are at Higher Risk for Secondhand Smoke Exposure

The workplace is a major source of SHS exposure for adults which has been linked to an increased risk of heart disease and lung cancer among nonsmoking adults.<sup>xv</sup> Blue collar and service workers are more likely than white collar workers to be exposed to SHS at the workplace<sup>xvi</sup> and are less likely to be covered by smoke-free policies.<sup>xvii,xviii</sup>

- According to one study, prior to the implementation of a smoke-free law, employees working full-time in restaurants or bars that allowed indoor smoking were exposed to levels of air pollution 4.4 times higher than safety levels established by the U.S. Environmental Protection Agency (EPA) because of their occupational exposure to secondhand smoke.<sup>xix</sup>

Bartenders, servers, and casino workers are particularly unlikely to be protected by smoke-free policies and more likely to breathe SHS even when smoke-free policies are in effect for other types of workplaces.<sup>xx,xxi</sup> Without smoke-free laws, bars and lounges have among the highest concentrations of SHS of all public spaces – exposing bartenders to even greater levels of SHS than restaurant workers.<sup>xxii</sup>

- When there are not smoke-free policies in effect, levels of SHS in bars are 3.9 to 6.1 times higher than levels measured at office worksites and up to 4.5 times higher than levels in homes with one or more people who smoke.<sup>xxiii</sup> Bartenders are more likely than many other workers to report eye, nose, or throat irritation or symptoms.<sup>xxiv</sup>
- A study examining the effects of SHS exposure in San Francisco, CA restaurants and bars before the state's smoke-free law took effect found that 74 percent of bartenders surveyed had respiratory symptoms (e.g., wheezing, cough, etc.), and 77 percent had sensory irritation symptoms (e.g. red, teary, or irritated eyes, runny nose, sneezing, sore or scratchy throat, etc.).<sup>xxv</sup>
- Research has found that individuals who do not smoke and are exposed to high levels of SHS are more likely to experience severe headaches or migraines.<sup>xxvi</sup>

### Casino Workers are Exposed to High Levels of SHS in the Workplace and are at Higher Risk for Developing SHS-related Illnesses

- A study found the amount of SHS was approximately 12 times greater inside casinos that allowed smoking than outside.<sup>xxvii</sup>
- A study comparing SHS in 66 U.S. casinos where smoking is allowed with three non-smoking casinos found that the smoke-free casinos had lower levels of SHS.<sup>xxix</sup> In about half of the smoking casinos, the SHS levels exceeded a level known to increase cardiovascular risk in people who do not smoke after less than 2 hours of exposure, posing acute health risks for patrons and workers. In casinos with a non-smoking section, the ventilation systems and separation were unable to remove SHS while smoke-free casinos reduced fine particles from SHS to the same low levels found outdoors.<sup>xxx</sup>
- Recent studies have shown that unhealthy levels of indoor air pollution were more than five times higher in casinos that permitted smoking compared to smoke-free casinos.<sup>xxxi</sup> Long-term exposure to fine particle air pollution has been associated with cardiovascular and respiratory diseases, lung cancer, and even death.<sup>xxxii,xxxiii</sup>

Research on the health effects of SHS found exposure to SHS increases the risk of ischemic heart disease, stroke, type 2 diabetes, and lung cancer.<sup>xxvii</sup>

### ACS CAN's Position on Smoke-free Laws

Exposure to SHS is an occupational hazard for many U.S. workers, including casino, restaurant, bar, and hotel employees, and a preventable cause of disease and premature death. ACS CAN advocates for the right of all people to breathe smoke-free air. No one should have to choose between their livelihood and their health.

ACS CAN urges state and local officials to pass and protect comprehensive smoke-free laws in all workplaces, including restaurants, bars and gaming facilities, to protect the health of all employees and patrons. These laws should include all forms of smoking, including but not limited to cigarettes, electronic cigarettes, cigars, hookah, pipes and cannabis. Policymakers should reject legislation that weakens smoke-free laws or removes authority from local governments to pass local smoke-free laws.

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