

SMOKE-FREE POLICIES

Establishing a Smoke-Free Ordinance to Reduce Exposure to Secondhand Smoke in Indoor Worksites and Public Places



AN ACTION GUIDE



Shaping Policies • Improving Health

TOBACCO CONTROL

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AN ACTION GUIDE

Partnership for Prevention® is a nonprofit organization dedicated to preventing illness and injury and promoting health. Partnership's programs reach policymakers, a wide range of public health and healthcare professionals, businesses, and others who can emphasize prevention.

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Shaping Policies • Improving Health

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Smoke-Free Policies: Establishing a Smoke-Free Ordinance to Reduce Exposure to Secondhand Smoke in Indoor Worksites and Public Places—An Action Guide is a unique tool, translating an evidence-based recommendation from the *Guide to Community Preventive Services (Community Guide)* into implementation guidance. This Action Guide is designed to assist public health practitioners invested in reducing secondhand smoke exposure and using effective community-level strategies to do so. Additional audiences who may benefit from using this resource include advocates, policymakers, educators, business leaders, community-based organizations, faith-based institutions, and others committed to tobacco control in their communities.

Partnership for Prevention®—a national membership organization dedicated to building evidence of sound disease prevention and health promotion policies and practices and advocating their adoption by public and private sectors—developed *Smoke-Free Policies* to help support evidence-based public health practice. Evidence-based public health practice involves the selection and implementation of health-related programs, policies, and services that are supported by evidence and scientific reasoning. Groups such as the Task Force on Community Preventive Services review this evidence and recommend work that should be done to improve health. However, while these recommendations advise on the “what to do,” they do not provide guidance needed to successfully take the interventions “from the page to the field.” Partnership for Prevention is working to bridge this gap between research and practice with the release of *Smoke-Free Policies*.

This Action Guide focuses on a specific approach for putting a smoke-free policy into place—establishing a community-wide smoke-free ordinance targeting indoor worksites and public places. When selecting among interventions effective in reducing secondhand smoke exposure, you should first assess your own resources and health priorities to determine if this approach is appropriate and feasible. Once *Smoke-Free Policies* is deemed suitable and viable for your community’s needs, it can be used to facilitate your activities.

The information on the following pages is intended to be generalizable to a range of communities but you will need to determine what modifications may be needed to meet your local health objectives. Rather than a prescriptive list of required actions, you will find general steps and suggestions to accommodate the unique aspects of communities and their resources. *Smoke-Free Policies* should be used along with technical assistance offered by local or state health experts, public health program managers, researchers, or others with tobacco control expertise and experience in implementing tobacco policies.

Information in this Action Guide is organized under the following main sections:

Section 1: Overview of the Approach

This section provides information on the Task Force on Community Preventive Services’ *Community Guide* recommendation and the supporting evidence; presents the specific approach used in this Action Guide; describes outcomes you may anticipate from implementing the approach; and suggests a role for the reader that is both feasible and maximizes the ability to effect change.

Section 2: Implementing the Approach

This section provides the bulk of implementation guidance by addressing the “who,” “what,” “when,” “where,” and “how” of the activities. Key stakeholders and partners you may want to engage are listed within this section, as well as their main interests and potential roles. Action steps are laid out to follow a general progression, from *Getting Started* to *Moving Forward* and *Looking Beyond*. Although the action steps are numbered, in practice, steps may occur simultaneously or may occur in a different sequence than what appears in the Action Guide.

Section 3: Determining Your Resource Needs

This section provides suggestions on personnel, material, and financial resources that may be needed to successfully plan, implement, and sustain the approach. You must determine what resources are necessary, ways to obtain those resources, and their costs. In the personnel resources subsection, a table presents a summary of tasks to allocate or assign among the main individuals and groups involved. The material and financial resources subsections each contain a list of items to consider based on the activities cited in the Action Guide.

Section 4: Evaluating Your Activities

This section provides questions to help you start collecting data for process, impact, and outcome

evaluations. Potential sources of data relevant to the approach are also included.

Section 5: References and Resources

This section provides a list of references used in the development of the guide and resources that provide information on similar approaches; tools for planning, implementation, and evaluation; and general guidance.

Appendix: Action Guide Terminology

The appendix defines key terms used throughout the Action Guide. Words and phrases defined in this section are italicized in this Action Guide.

Below is a summary of the action steps described within this Action Guide; this summary is also provided as an overview at the beginning of Section 2: Implementing the Approach.

Getting Started

- **Action Step 1**—Conduct a community assessment to learn more about the local policymaking process and the local climate surrounding smoke-free policies.
- **Action Step 2**—Begin organizing the human, material, and financial resources you will need to support a *smoke-free policy effort*, including the evaluation component.
- **Action Step 3**—Begin to engage key partners and stakeholders.
- **Action Step 4**—Bring together committed partners in the form of a coalition to plan and coordinate your effort.
- **Action Step 5**—Establish a database containing contact information for all coalition members and other stakeholders.

Moving Forward

- **Action Step 6**—Educate your community about secondhand smoke to lay the groundwork for your proposed smoke-free ordinance.
- **Action Step 7**—Using public opinion polls and surveys, assess the level of community support for a smoke-free ordinance.
- **Action Step 8**—Once your public education effort on the health effects of secondhand smoke gains traction, find a local policymaker to sponsor and act as a champion for your ordinance.
- **Action Step 9**—Prepare a draft smoke-free ordinance.
- **Action Step 10**—Begin to promote the proposed smoke-free ordinance, targeting the general public, the business community, the news media, and legislators.
- **Action Step 11**—Work with legislators to generate support for the proposed smoke-free ordinance.
- **Action Step 12**—Once the ordinance is introduced, mobilize coalition members and other supporters to show up in full force for public hearings.
- **Action Step 13**—Continue applying positive pressure on relevant legislators through phone calls, letters, e-mails, and other forms of outreach until the legislative body votes on the proposed ordinance.

Looking Beyond

- **Action Step 14**—After passage of a smoke-free ordinance, congratulate all persons who lent their support to the *smoke-free policy effort*.
- **Action Step 15**—Support the smoke-free ordinance by developing and executing a plan for its implementation.
- **Action Step 16**—Continue to work with local officials and enforcement agencies as needed to ensure enforcement and maintenance of the smoke-free ordinance.
- **Action Step 17**—Remain vigilant and closely monitor opposition activity.

Section 1

Overview of the Approach

The Evidence

A smoke-free policy is an effective strategy for reducing exposure to secondhand smoke. Employers, regulatory agencies, and policymakers implement smoke-free policies to eliminate smoking in designated settings. Types of smoke-free policies include voluntary policies implemented by businesses or organizations; regulations issued by accrediting agencies or boards of health; or laws enacted by local, state, or federal governments. Policies are implemented to provide protection from secondhand smoke exposure, to create healthier environments, and to change social norms around tobacco use. They may also have the added benefits of encouraging smokers to reduce their overall tobacco consumption and aiding those trying to quit.

Smoke-free policies are increasing in number in various settings throughout the United States. Although outdoor public places may be targeted, policies most commonly are implemented in indoor worksites and public places to protect employees, patrons, and visitors from secondhand smoke exposure.

The Task Force on Community Preventive Services recommends that policies to eliminate or limit indoor smoking be implemented to reduce exposure to secondhand smoke. This recommendation is based on a strong evidence of effectiveness found through a systematic review of published studies conducted by a team of experts on behalf of the Task Force. Information on their “Smoking Bans and Restrictions” recommendation, published in *The Guide to Community Preventive Services: What Works to Promote Health? (Community Guide)*, is presented in **Table 1**. Related publications by the Task Force and reviews by other organizations are provided under “evidence-based reviews of smoke-free policies” in the *References and Resources* section of this Action Guide.

Table 1: Community Guide’s Recommendation

Recommendation

Smoking Bans and Restrictions—Recommended (Strong Evidence of Effectiveness)

Findings

These policies, regulations, and laws limit smoking in workplaces and other public areas. Bans prohibit smoking entirely, while restrictions allow smoking in only designated places.

Effectiveness

- Smoking bans in workplaces led to an average reduction in exposure to components of environmental tobacco smoke of 72%.
- Studies of smoking bans also demonstrated reductions in the amount smoked.

Applicability

Smoking bans were effective in a variety of public and private workplaces and healthcare settings, and should be effective in most indoor workplace in the United States.

Additional considerations

Preemption, the existence of a state law that precludes stronger local laws, can prevent implementation of smoking bans or restrictions.

Source

The Task Force on Community Preventive Services. *The Guide to Community Preventive Services: What Works to Promote Health?* New York: Oxford University Press; 2005:48.

<http://www.thecommunityguide.org/tobacco/Tobacco.pdf>

Section 1 — Overview of the Approach

The Approach

Smoke-free policies can be implemented through various means. This Action Guide focuses on assisting local public health practitioners in implementing smoke-free policies through the following approach: **establishing a smoke-free ordinance to reduce exposure to secondhand smoke in indoor worksites and public places.** Because enactment of a smoke-free *ordinance* can be achieved through various policy channels, the guidance here is further geared toward passage by members of a government body (e.g., a city council, county commission). Public health practitioners interested in intervening at the local policy level and committed to establishing smoke-free environments in all indoor worksites and public places within their community will find this approach a legitimate and valid option.

Your Role

As a public health practitioner, the most appropriate role for you in implementing smoke-free policies will vary, depending on the needs of your community and the resources and capacity you have to conduct a *smoke-free policy effort*. Successful *smoke-free policy efforts* typically require careful planning and organization; as such, one option for you might be to support and coordinate related planning and educational activities. This role will serve as the focus of this Action Guide.

As you begin your effort, you may wish to consult experienced organizations, programs, and advocacy tools—such as the ones noted here—for information about establishing smoke-free policies.

- Americans for Nonsmokers' Rights (ANR) is the nation's leading *lobbying* organization dedicated to nonsmokers' rights. Order a copy of ANR's citizen action guide, *Clearing the Air*, at <http://www.no-smoke.org> or by calling (510) 841-3032.
- Breath: The California Smoke-free Bars, Workplaces and Communities Program at http://www.breathglobal.org/html/work_index.html offers technical assistance and trainings for communities throughout the nation wishing to implement policies protecting people from secondhand smoke exposure.
- California Department of Health Services has a useful resource entitled *California Lessons in Clean Indoor Air: A Compilation of Campaign Stories, Implementation Tools, and Compliance Strategies*, available at http://www.ttac.org/new/pdfs/california_air.pdf.
- *Smoke Free Environments Guide—North America and Beyond: A Resource Kit of Campaign, Implementation and Enforcement Strategies for Health Advocates Around the World* also offers valuable information for conducting *smoke-free policy efforts*. Contact cptur@phi.org for more information.
- Campaign for Tobacco-Free Kids at <http://www.tobaccofreekids.org> strives for protection from tobacco addiction and secondhand smoke exposure for all children and maintains a clearinghouse of tools and resources related to smoke-free air and general tobacco control.
- The Global Smokefree Partnership promotes effective smoke-free policies worldwide by connecting practitioners and advocates with evidence-based resources and expert assistance. Get more information on enacting and enforcing smoke-free laws at <http://www.globalsmokefree.com/gsp>.
- Tobacco Scam at <http://www.tobaccoscam.ucsf.edu> provides information and resources dealing with the treatment of the hospitality industry by tobacco corporations.

Expected Outcomes

Communities that successfully implement this approach to smoke-free policies might see the following results:

1. A smoke-free policy will be established that applies to indoor worksites and public places within the community.
2. Smokers will comply with this smoke-free policy.
3. Improvements in air quality will be observed in settings subject to smoke-free policy provisions.
4. Secondhand smoke exposure will be reduced among employees, patrons, and visitors.

Implementing the Approach

The order of steps listed below is meant only to suggest an order of activity you might consider in conducting a *smoke-free policy effort*. In practice, there is no exact order to the steps—many activities will normally occur at the same time and the timeline for completion is highly dependent upon a particular community’s circumstances. Use this Action Guide to inform and direct your activities, making sure to seek additional technical assistance in your efforts and realizing that only you know how your community fits within the steps outlined below. **Table 2** below presents a summary of action steps.

Table 2: Action Steps for Establishing a Smoke-Free Ordinance to Reduce Exposure to Secondhand Smoke

Getting Started

- **Action Step 1**—Conduct a community assessment to learn more about the local policymaking process and the local climate surrounding smoke-free policies.
- **Action Step 2**—Begin organizing the human, material, and financial resources you will need to support a *smoke-free policy effort*, including the evaluation component.
- **Action Step 3**—Begin to engage key partners and stakeholders.
- **Action Step 4**—Bring together committed partners in the form of a coalition to plan and coordinate your effort.
- **Action Step 5**—Establish a database containing contact information for all coalition members and other stakeholders.

Moving Forward

- **Action Step 6**—Educate your community about secondhand smoke to lay the groundwork for your proposed smoke-free ordinance.
- **Action Step 7**—Using public opinion polls and surveys, assess the level of community support for a smoke-free ordinance.
- **Action Step 8**—Once your public education effort on the health effects of secondhand smoke gains traction, find a local policymaker to sponsor and act as a champion for your ordinance.
- **Action Step 9**—Prepare a draft smoke-free ordinance.
- **Action Step 10**—Begin to promote the proposed smoke-free ordinance, targeting the general public, the business community, the news media, and legislators.
- **Action Step 11**—Work with legislators to generate support for the proposed smoke-free ordinance.
- **Action Step 12**—Once the ordinance is introduced, mobilize coalition members and other supporters to show up in full force for public hearings.
- **Action Step 13**—Continue applying positive pressure on relevant legislators through phone calls, letters, e-mails, and other forms of outreach until the legislative body votes on the proposed ordinance.

Looking Beyond

- **Action Step 14**—After passage of a smoke-free ordinance, congratulate all persons who lent their support to the *smoke-free policy effort*.
- **Action Step 15**—Support the smoke-free ordinance by developing and executing a plan for its implementation.
- **Action Step 16**—Continue to work with local officials and enforcement agencies as needed to ensure enforcement and maintenance of the smoke-free ordinance.
- **Action Step 17**—Remain vigilant and closely monitor opposition activity.

Look for the following symbols throughout the Action Guide:



—tips, ideas, and web links



—overcoming obstacles

Web site resource links are current as of the guide’s publishing date. If a link becomes unavailable, please check the referenced Web site to find out if the information has been moved or use a search engine to find alternative sources of information.

Section 2 — Implementing the Approach

Getting Started

■ **Action Step 1**—Conduct a community assessment to learn more about the local policymaking process and the local climate surrounding smoke-free policies. The assessment will arm you with data for educating the public and policymakers and may help you to identify potential allies for your work. See **Table 3** for a checklist of the types of information to collect, either by conducting original research or by retrieving data from existing sources.



Refer to the following resources for information on and tools for community assessment:

- Americans for Nonsmokers' Rights at <http://www.no-smoke.org/learnmore.php?id=121>.
- The State Tobacco Activities Tracking and Evaluation (STATE) System of the Centers for Disease Control and Prevention (CDC) at <http://apps.nccd.cdc.gov/statesystem>.
- The Minnesota Smokefree Coalition at <http://www.smokefreecoalition.org/issues/secondhandsmoke/community>.



Before embarking on a *smoke-free policy effort*, determine the preemptive restrictions on the policy in your state. Tools to help with this research can be found at <http://www.protectlocalcontrol.org>, <http://slati.lungusa.org>, and <http://www.cdc.gov/tobacco>.

- “Chip away” at *preemption* by securing legislative *exemptions* from *preemption* for specific settings (e.g., schools, colleges).
- If a preemptive smoke-free law exists in your state and this law offers inadequate protection from secondhand smoke, consider working for a comprehensive statewide smoke-free law, working for a repeal of state *preemption*, or doing both; success will be contingent on adequate support from the public and from legislators.
- In cases where the preemptive provision in your state applies only to certain settings (e.g., restaurants, bars), work for smoke-free policies in other facilities (e.g., worksites outside the hospitality industry).
- Encourage local employers and business proprietors to implement voluntary smoke-free workplace policies. Information to guide implementation of worksite smoke-free policies can be found at http://www.cdc.gov/tobacco/secondhand_smoke/guides/workplace_guide.htm and http://www.tobaccofreeoregon.org/finaltool_kit_document.pdf.

**Table 3: Checklist of Community Information to Collect
When Establishing Smoke-Free Policies**

- ✓ Existing smoking regulations and laws in your community. The American Nonsmokers' Rights Foundation collects information on local smoke-free *ordinances* and local board of health regulations; see <http://www.no-smoke.org/document.php?id=313> for more information.
- ✓ The policymaking process and lines of political authority in your jurisdiction
- ✓ The priority issues, voting records, and personal interests of local legislators
- ✓ The receptiveness of various audiences to smoke-free policies. Consider conducting public opinion surveys to gauge levels of awareness about the health effects of secondhand smoke and levels of support for smoke-free environments.
- ✓ The number of restaurants, bars, and other businesses that have implemented voluntary smoke-free policies
- ✓ The health effects and economic impact of secondhand smoke
- ✓ Previous *smoke-free policy efforts* and information on why these attempts succeeded or failed
- ✓ Other local and state tobacco control policies (e.g., cigarette excise taxes) and any tobacco control initiatives currently under way
- ✓ Organizations or groups that have advocated for smoke-free policies in your community, region, or state
- ✓ Channels for filing citizen complaints about indoor smoke levels and the settings that generate the most complaints

■ **Action Step 2**—Begin organizing the human, material, and financial resources you will need to support a *smoke-free policy effort*, including the evaluation component.

- Personnel, material, and financial resources to consider are outlined in Section 3: Determining Your Resource Needs.
- It is important to plan for the evaluation needs and activities early on as part of this process. For detailed information, see Section 4: Evaluating Your Activities.



Section 2 — Implementing the Approach

■ **Action Step 3**—Begin to engage key partners and stakeholders.

- ▶ Success in this endeavor will depend on forming good relationships with various stakeholders who are invested in the enactment of a smoke-free *ordinance*. In some communities, there may be many stakeholders; in others, only a few. Types of groups with which many communities have chosen to partner are listed in **Table 4**. Refer to this table when considering the potential role each group can and will want to play and how to engage these players.
- ▶ Consider working with organizations and groups that have advocated successfully for smoke-free policies so that you can access their knowledge base.



Pro-tobacco forces (the tobacco industry, smokers' rights groups, etc.) may attempt to generate opposition by reaching out to and mobilizing specific community sectors. You can counter these tactics by proactively forging relationships with groups most likely to be targets of these outreach efforts, such as chambers of commerce, business groups, and racial and ethnic groups.



Some businesses may argue that a smoke-free *ordinance* is an imposition on business and private property rights. You can counter this argument by involving workers affected by exposure to secondhand smoke and emphasizing the government's historic regulation of business to protect the public's health in areas such as worker health and safety, food handling, sanitation, and fire safety.



Youth groups and senior groups are often underutilized in local *smoke-free policy efforts*. Youths can have a great influence on younger students, parents, and other adults, and may be called upon to testify at public hearings on smoke-free policies. The Smokefree Paso Del Norte Coalition in El Paso, Texas empowered a youth coalition to set its own goals for a local smoke-free policy drive. Youth members contributed greatly to the coalition's letter-writing efforts, held a rally on the day of the El Paso Council vote on the smoke-free ordinance, and testified persuasively at public hearings. Senior groups can also be influential because they may include retired nurses, pharmacists, and physicians who are heavily invested in health, as well as individuals with health conditions that make them especially susceptible to the effects of secondhand smoke. These seniors can offer expertise, time, and the necessary passion to help build support for your effort.

Section 2 — Implementing the Approach

Table 4: Stakeholders' Main Interests and Their Possible Roles as Partners

| Stakeholder | Main Interests | Roles as a Partner |
|---|--|---|
| Legislators | <ul style="list-style-type: none"> ■ Level of public support for policy ■ Work done by other jurisdictions and the results of this work ■ Impact of policy on business community ■ Linkage between smoke-free policies and other policy priorities | <ul style="list-style-type: none"> ■ Provide leadership and public support of policy ■ Provide support through sponsorship and votes in favor of strong smoke-free policies |
| Business community | <ul style="list-style-type: none"> ■ Potential impact on revenue and profits ■ Health of workers ■ Healthcare costs | <ul style="list-style-type: none"> ■ Maintain neutrality or take public position in support of smoke-free policies ■ Voluntarily adopt smoke-free policies |
| Community residents, including workers and others exposed to secondhand smoke | <ul style="list-style-type: none"> ■ Unwanted exposure to secondhand smoke and its negative health effects ■ Difficulty quitting smoking in settings where others are smoking | <ul style="list-style-type: none"> ■ Put a human face on the effort to build support for smoke-free policies among the public and among legislators ■ Share personal stories ■ Participate in activities that support passage of a smoke-free policy (e.g., writing letters and e-mails to policymakers) ■ Demonstrated public support for policy |
| Government administrators and enforcement agencies | <ul style="list-style-type: none"> ■ Resources required to enforce smoke-free policies ■ Ambiguity in smoke-free policy language | <ul style="list-style-type: none"> ■ Educate business owners about how to comply with a smoke-free policy ■ Enforce policy, when necessary |
| Health department | <ul style="list-style-type: none"> ■ Improved public health ■ Community health status | <ul style="list-style-type: none"> ■ Provide resources, leadership, and credibility ■ Disseminate scientific evidence on the health effects of secondhand smoke exposure and present proven approaches for controlling this exposure ■ Provide local data on secondhand smoke exposure and extent of voluntary smoke-free policies ■ Provide access to other government agencies to discuss issues related to implementation and enforcement of a smoke-free policy ■ Serve as first line of enforcement |
| Hospitals and medical societies | <ul style="list-style-type: none"> ■ Community health status ■ Linkage among smoke-free policies, public health, and medicine | <ul style="list-style-type: none"> ■ Provide leadership and resources ■ Build support for policy among decision makers and the community by coordinating and/or executing activities ■ Voluntarily adopt smoke-free policies |
| Voluntary health groups | <ul style="list-style-type: none"> ■ Community health status ■ Recognition for role supporting policy ■ Linkage between smoke-free policies and organizational priorities | <ul style="list-style-type: none"> ■ Provide leadership and resources ■ Build support for policy among decision makers and the community by coordinating and/or executing activities |
| Community-based and philanthropic organizations and citizens groups (e.g., youth, senior, faith-based groups) | <ul style="list-style-type: none"> ■ Health issues ■ Linkage between smoke-free policies and organizational priorities ■ Recognition for role supporting policy | <ul style="list-style-type: none"> ■ Build support for policy among decision makers and the community by coordinating and/or executing activities ■ Contribute knowledge relating to grassroots community organizing ■ Provide access to wide base of community members |
| Community organizations working with racial and ethnic communities and other specific populations | <ul style="list-style-type: none"> ■ Health and well-being of populations in question ■ Equity issues ■ Linkage between smoke-free policies and organizational priorities ■ Recognition for role supporting policy | <ul style="list-style-type: none"> ■ Build support for policy among decision makers and the community by coordinating and/or executing activities ■ Contribute knowledge relating to grassroots community organizing ■ Provide information on disparities in secondhand smoke exposure affecting specific populations ■ Provide access to wide base of community members |

Section 2 — Implementing the Approach

■ **Action Step 4**—Bring together committed partners in the form of a coalition to plan and coordinate your effort.

Alternatively, you may be able to collaborate with an established coalition or organization in your community that wishes to prioritize tobacco control.

- ▶ Remember that the size and structure of a coalition will vary; coalitions do not necessarily need to be large to be successful.
- ▶ When forming your coalition, try to secure representation from diverse segments of your community. Membership might include representatives from key institutions that would support a smoke-free ordinance, such as health departments, local pediatric groups, medical societies, hospitals, voluntary agencies, people affected by secondhand smoke exposure, and many of the stakeholders listed in **Table 4**.
- ▶ Consider appointing a coalition coordinator to oversee your efforts. You may wish to establish a small decision-making body or steering committee (as a subset of the larger coalition) to guide your activities. This small group should meet regularly for strategic planning sessions. Many coalitions also create subcommittees that take the lead on carrying out specific activities, such as research and education.
- ▶ Ensure that coalition members agree on coalition goals and understand the health hazards of secondhand smoke and your key messages. Your coalition will likely expand as you move forward. Be sure that you keep all coalition members informed on an ongoing basis.
- ▶ Hold coalition meetings with all members at regular intervals to provide updates, share ideas, and strengthen group cohesiveness. Look to the experiences of successful advocates for stories that will motivate and invigorate your coalition.
- ▶ As community characteristics vary from one location to another, there is no single correct way to delegate the roles and responsibilities

of a coalition. Section 3: Determining Your Resource Needs can provide ideas on assigning tasks and on working with your coalition to tackle the action steps identified in this chapter.



The Praxis Project is a national, nonprofit organization that builds partnerships with local groups to influence policymaking.

Praxis offers the following resource to help communities with coalition building: http://www.thepraxisproject.org/tools/Coalition_Building_2.pdf.



Pro-tobacco forces may allege that health department employees are engaged in illegal *lobbying* activities. Health department employees typically have some restrictions on *lobbying*; however, educating policymakers and the general public about the health hazards of secondhand smoke, the benefits of smoke-free environments, and evidence-based public health interventions to reduce exposure is a legitimate and important function of the health department. Employees who perform in this capacity are simply doing their duty. To avoid claims of prohibited *lobbying*, familiarize yourself with state and local restrictions before proceeding. Identify which individuals involved in your efforts can speak freely and who may be limited in this role. Rely on nongovernmental partners whenever necessary.

■ **Action Step 5**—Establish a database containing contact information for all coalition members and other stakeholders (e.g., public officials, print and broadcast journalists, news media outlets, business leaders, community organizations). Use this database to call on various groups to attend meetings and hearings, to publicize coalition events and your messages, or to otherwise support the *smoke-free policy effort*.

Moving Forward

Now that you have a better understanding of your role in putting a smoke-free policy into place and have begun reaching out to potential coalition members and other partners, what's next? Look to the strategies outlined below to move your efforts forward.

■ **Action Step 6**—Educate your community about secondhand smoke to lay the groundwork for your proposed smoke-free ordinance.

- Focus initially on educating the public about the health issues at stake to build adequate community understanding of the hazards of secondhand smoke exposure, to increase community demand and support for smoke-free environments, and to delay involvement of the tobacco industry.
- Target your educational efforts to the general public, the news media, key opinion leaders, policymakers, the business community, hospitals, schools, professional societies, civic clubs, and enforcement agencies. The formats used to educate community groups are varied and may include presentations, luncheon speakers, and booths at community events.
- Develop messages that describe the health effects of secondhand smoke exposure in layperson's terms. Messages should show compassion toward smokers and should avoid stigmatizing them. Frame the issue around protecting workers' health by emphasizing that all individuals have the right to a smoke-free worksite and should not be forced to inhale dangerous carcinogenic and toxic substances on the job. Nonsmoking community residents should also have the right to patronize businesses without endangering their health. Expect the opposition to argue that a smoke-free policy is a violation of personal freedom. By

casting your messages in terms of the right of nonsmokers to breathe smoke-free air, you are preempting arguments from those who oppose limits on smoking.

- When educating policymakers, focus on the documented health effects of secondhand smoke, the evidence that smoke-free policies do not negatively impact the hospitality industry, and the potential cost savings and economic benefits that these policies offer to employers and the business community. Local data are particularly persuasive, as are data from official sources such as the CDC and your state health department. CDC fact sheets can be found at http://www.cdc.gov/tobacco/secondhand_smoke/index.htm.
- Use your messages to develop appropriate educational materials (e.g., fact sheets). Explore *earned* and *paid media* and other forums for raising awareness. Contact state tobacco control programs or other sources to identify existing television and print advertisements that you may borrow or adapt. Use relationships with news media contacts to help relay your messages and establish your credibility.



For more information on the health effects of secondhand smoke, consult *The Health Consequences of Involuntary Exposure to Secondhand Smoke: A Report of the Surgeon General* at <http://www.surgeongeneral.gov/library/secondhandsmoke>.

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The CDC Media Campaign Resource Center provides a database of television, radio, and print ads that have been developed by state health departments, nonprofit health organizations, and federal agencies on a variety of tobacco control issues, including secondhand smoke. CDC has also developed a manual called *Designing and Implementing an Effective Tobacco Counter-Marketing Campaign*. Access these materials at <http://www.cdc.gov/tobacco>. Information on news media outreach approaches is also available from Americans for Nonsmokers' Rights at <http://www.no-smoke.org/document.php?id=236>.

■ **Action Step 7**—Using public opinion polls and surveys, assess the level of community support for a smoke-free ordinance.

- Community readiness is crucial for success. If you determine that community support for a smoke-free policy is inadequate, focus your energy on continued public education efforts and postpone action on establishing an ordinance.



The *Social Will Index*, a tool for assessing social will for tobacco control in California cities, is based on the premise that the creation of new social norms is a function of community willingness and commitment to support changes in public policy. Developed as part of a large study funded by the California Department of Health Services examining the relationship between social will and the California smoke-free workplace law, the Social Will Index revealed that success in both implementation and enforcement of smoke-free policies was influenced by the readiness of the community for tobacco control measures. The Social Will Index can be adapted for use by local health departments and smoke-free coalitions to assess a community's readiness to support policy change and to help in strategic planning for smoke-free policies. For more information, contact the library within the Tobacco Control Section of the California Department of Health Services at (916) 449-5483.

■ **Action Step 8**—Once your public education effort on the health effects of secondhand smoke gains traction, find a local policymaker to sponsor and act as a champion for your ordinance.

- The ordinance sponsor should have the leadership, credibility, and expertise to influence other policymakers and should also have a track record of getting measures adopted. He or she should be a member of the city council, county commission, or other local government body with the authority to enact the policy that you are seeking. Coalition members may tap their social networks to identify this person.
- If the dynamics of the policymaking body necessitate majority party sponsorship for a proposal to pass, recruit a sponsor accordingly.
- Share your strategy with the sponsor. Articulate your messages to ensure that everyone has a common agenda and that the sponsor will represent coalition goals accurately.
- Meet with the sponsor regularly to keep her or him abreast of coalition activities and to obtain updates on the thinking of the local governing body and its individual members.

■ Action Step 9—Prepare a draft smoke-free ordinance.

- Drafting an effective smoke-free ordinance can be a complex legal undertaking. Your ordinance sponsor may ask a city or municipal attorney to draft the policy. Reach agreement within your coalition on what you are willing to give up and what you are not willing to compromise. Be prepared to demonstrate exactly what the policy should entail. Initially, you may want to set the bar high on the premise that some provisions may be eliminated as part of a negotiating process. Even if the need for compromise is inevitable, the coalition should continue to emphasize freedom from exposure to carcinogens for everyone in worksites and public places. See **Table 5** for points to consider when drafting a smoke-free policy.

Table 5: Characteristics of an Effective Smoke-Free Policy

| |
|--|
| Mandates 100% smoke-free environments to maximize health benefits, minimize confusion, and facilitate compliance |
| Uses clearly defined terms—especially the definitions of restaurant and bar—to ensure easy and unambiguous interpretation by those responsible for implementing and enforcing the policy |
| Contains no or minimal exemptions that undermine the public health protections of the policy and may open it to legal challenges |
| Spells out a clear rationale for the ordinance that cites the documented health risks that secondhand smoke poses to all age groups |
| Specifies procedures, penalties, and funding mechanisms for enforcement |



Experienced advocates suggest that policies be drafted as soon as the coalition attains a critical mass of supporters.

- Begin with model smoke-free policies when drafting your policy to ensure that it is effective and appropriate. Americans for Nonsmokers' Rights has developed carefully worded model policies that draw on lessons learned by hundreds of communities across the country. Access them at <http://www.no-smoke.org/goingsmokefree.php?id=499>. Americans for Nonsmokers' Rights and local legal experts can help you customize these policies to meet the needs of your community and to ensure compatibility with state and local laws and codes. The Tobacco Control Legal Consortium at <http://www.wmitchell.edu/tobaccolaw/tclc.html> also offers resources and assistance in this area.



Your coalition should aim for a policy creating smoke-free environments in *all* indoor worksites and public places within your community.

However, the resources for your efforts and the level of public and policymaker readiness in your community might make this goal of 100% smoke-free unlikely, if not impossible. Under these circumstances, you may want to revisit community education activities to build support for a stronger policy or to work initially for smoke-free policies in specific settings (e.g., government buildings, nonhospitality worksites and public places). Such policies can then be extended incrementally to additional sites over time as community residents become accustomed to these policies and come to appreciate their benefits.

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Some Exemptions That Undermine the Effectiveness of a Smoke-Free Ordinance

After-hours—allows smoking in certain hospitality establishments (e.g., restaurants) after a specified hour. Makes both compliance and enforcement difficult and does not account for the fact that exposure to secondhand smoke is harmful at any hour, and secondhand smoke can linger in an indoor space long after smoking has ceased. May be confusing to the public, resulting in reduced compliance levels even during hours when establishments are required to be smoke-free.

Minors-only—allows smoking in establishments that are off limits to minors. Implies that secondhand smoke is harmful only to minors and offers adults no protection from exposure.

Hardship—allows businesses to apply for a temporary *exemption* to the smoke-free *ordinance* on the basis of documented economic suffering. Reinforces the misconception that smoke-free policies have a negative economic impact on businesses.

Ventilation—allows establishments to rely on ventilation technology, intended to minimize secondhand smoke drift from smoking to nonsmoking areas, as an alternative to going smoke-free. Is costly, does not eliminate hazardous toxins found in secondhand smoke, and can increase the risk of lung cancer among employees and patrons in designated smoking sections.

See http://www.no-smoke.org/pdf/CIA_Fundamentals.pdf for additional *exemptions* that should be avoided.

■ **Action Step 10**—Begin to promote the proposed smoke-free *ordinance*, targeting the general public, the business community, the news media, and legislators.



Some local businesses may oppose a smoke-free *ordinance* because of concerns that it will have a negative economic impact on restaurants, hotels, and gaming establishments. Rely on the following messages to minimize resistance and maximize support from local business owners:

- Peer-reviewed studies that have examined objective measures such as taxable sales revenue and employment levels have consistently found that smoke-free policies do not have a negative economic impact on restaurants and bars (see Glantz and Smith, 1994; Glantz and Smith, 1999; Scollo et al, 2003).
- There are many secondary benefits of smoke-free policies, including reductions in employee smoking and related healthcare costs, improved employee productivity, reduced cleaning and maintenance costs, and reduced fire risk and fire insurance premiums.
- Other local businesses and business leaders support the implementation of smoke-free policies and have already implemented their own voluntary smoke-free policies. Provide appropriate examples (from within your community, if possible) to support this claim.

■ **Action Step 11**—Work with legislators to generate support for the proposed smoke-free ordinance.

- Provide policymakers with brief information packets succinctly summarizing the health and economic benefits of smoke-free ordinances, refuting any false tobacco industry claims, and documenting community support for the ordinance. Support may be demonstrated with survey results, petition signatures, organizational endorsements, and letters from supporters.
- If possible, enlist policymakers in other jurisdictions who have passed similar ordinances to consult with local representatives who remain undecided. Peer testimonials can be very credible and influential, particularly if the communities in question are similar to yours.
- Enlist a network of respected community leaders, who may be part of your coalition or identified through coalition contacts, to help persuade policymakers.
- Check in with legislators at different points throughout your *smoke-free policy effort*

to determine their position and to identify their concerns. Talk with staff members of the local government body to get their read on the ordinance and on potential issues that may arise, and to obtain their input and cooperation. If it looks like support for the proposed ordinance is insufficient, postpone its introduction to allow more time to educate policymakers.

- Assure legislators that they will have help in implementing and enforcing the smoke-free ordinance.



As you proceed, anticipate and prepare for possible opposition, but make sure to distinguish between opposition from the tobacco industry or groups directly linked to it and opposition from local residents and business owners with no known ties to the tobacco industry. In general, all opposition claims and arguments, regardless of the groups involved, should be countered with factual information that sets the record straight.



The tobacco industry may work behind the scenes to derail a *smoke-free policy effort* using *front groups* as cover. Typical tactics include dissemination of claims that businesses will lose money, attempts to discredit the scientific evidence on the health effects of secondhand smoke, calls to insert *exemptions* and other loopholes in the ordinance, and attempts to introduce state legislation that provides few or no meaningful health protections while preempting stronger local smoking restrictions. Whenever possible, expose these maneuvers to the public, because the industry typically has little public credibility. Watch for “outsiders” holding meetings of restaurant and bar owners, forming restaurant and bar associations, circulating petitions, or conducting polls. Work with your partners to track these activities. Also, take proactive action to “inoculate” allies, the news media, policymakers, business leaders, and the public about likely opposition tactics and arguments *before* they surface.

Americans for Nonsmokers’ Rights has assembled detailed information about what to expect from the tobacco industry and how to respond. Consult the following Web sites: <http://www.no-smoke.org/document.php?id=271> and <http://www.no-smoke.org/document.php?id=241>. In addition, consult the ANR Foundation Tobacco Industry Tracking Database at <http://www.tidatabase.org>.

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■ **Action Step 12**—Once the *ordinance* is introduced, mobilize coalition members and other supporters to show up in full force for public hearings.

- Fill public hearing venues with coalition members and other committed community residents. Consider wearing stickers, badges, or matching T-shirts to provide a visual cue to policymakers as to the extent of support present.
- Present prepared testimony in support of the proposed *ordinance* from a range of perspectives (e.g., coalition spokespersons, medical experts, community supporters, hospitality workers, youth, people who have been harmed by secondhand smoke). Plan this testimony in advance to ensure that all key points are covered, including a review of the *ordinance's* benefits and refutation of opposition claims. Hold one or more speakers in reserve to respond to new opposition claims or policymaker concerns that surface during the hearing.
- Be sure to coordinate with legislative staffers on requirements for speaking at the hearing. How many speakers can be accommodated during the hearing? Does each speaker need to register ahead of time? Do they need to bring written copies of their remarks? What are the procedures for parking, building security or other issues that speakers should know ahead of time?
- Determine whether press will attend the hearings, who will produce and distribute press materials, and who will facilitate guiding members of the press to speakers.
- Focus the issue on health and on the right of individuals to breathe smoke-free, healthy air in worksites and public places.

■ **Action Step 13**—Continue applying positive pressure on relevant legislators through phone calls, letters, e-mails, and other forms of outreach until the legislative body votes on the proposed *ordinance*.



Looking Beyond

You and your smoke-free coalition have successfully educated the general public and policymakers about the health effects of secondhand smoke, worked for a smoke-free *ordinance*, and deflected opposition. Congratulations! But the work does not end here. Now that your community has enacted a strong smoke-free *ordinance*, what steps should be taken to maintain the momentum of your efforts? Look to the key strategies below for suggestions.

■ **Action Step 14**—After passage of a smoke-free *ordinance*, congratulate all persons who lent their support to the *smoke-free policy effort*, regardless of the scale of contribution, and publicly thank legislators who voted in favor of the *ordinance*.



If a smoke-free *ordinance* fails to pass, do not be discouraged. Try again. Take time to analyze your efforts and to identify the areas that need improvement in your next attempt. Interview legislators to clarify why they voted against a smoke-free *ordinance*. Assess media pieces and educational materials to determine if the issue was framed appropriately. If possible, conduct surveys with community members.

■ **Action Step 15**—Support the smoke-free *ordinance* by developing and executing a plan for its implementation. The *ordinance* should take effect within 30 to 90 days of passage. However, preparations for implementation should begin well before this point. The more work that is done upfront preparing for implementation, the less work is needed for enforcement down the road.

- Develop enforcement protocols in collaboration with local enforcement agencies. The groups charged with enforcement vary from community to community and may include health departments, environmental health agencies, law enforcement, code enforcement, and restaurant inspection

personnel. Make preparations for how complaints will be received, tracked, and followed up. The health department may serve as the first line of enforcement, providing education or sending an initial warning letter to establishments, but beyond those steps, responsibility for enforcement often rests with law enforcement and other city departments. *Enforcing Strong Smoke-free Laws: The Advocate's Guide to Enforcement Strategies*, at http://www.cancer.org/downloads/AA/Enforcement_Strategies.pdf, may be useful as you work through enforcement issues.

- Plan for continued community education efforts. Self-enforcement of smoke-free policies is contingent upon public awareness. Consider an educational campaign to inform businesses and the public about the provisions of the *ordinance*, to explain how enforcement will be handled, and to tell residents how they can register complaints about violations of the policy.



Smoke-free policies are typically self-enforcing. In other words, most people refrain from smoking in public places once they are aware of policies that prohibit it. Therefore, if the provisions of the *ordinance* are clear and well publicized, and if business proprietors make clear that their establishments are smoke-free, only routine, limited enforcement is likely to be necessary, involving minimal expense and low demands on staff time.

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- ▶ Ask local officials to include information on the *ordinance* in business license applications and renewals.
- ▶ Provide information to help educate the public, business owners, and employees on local resources for tobacco *cessation* services to assist those who wish to quit. Partner with state/local tobacco control programs and health departments to coordinate implementation and *cessation* options. Include *cessation* messaging in all media and business outreach materials on implementation.
- ▶ Determine the types of assistance that businesses may need to implement *ordinance* provisions. Distribute “No Smoking” signs and related materials to businesses. Support businesses in developing policies to accompany the newly passed smoke-free *ordinance* and identify resources that businesses may suggest to their employees for help with smoking *cessation* (e.g., the state tobacco quitline number which can be accessed via 1-800-QUIT NOW).
- ▶ Consider establishing a special telephone line to provide additional information to businesses and individuals about the smoke-free *ordinance* and tips for its implementation.



While smoke-free policies immediately benefit nonsmokers, smokers may also benefit as studies show smoke-free policies help to motivate people to quit smoking. It is estimated that workplace smoking bans reduce smoking prevalence by up to 5 percent. Seventy percent of smokers report a desire to quit. Providing information, resources, and support to employees who smoke during the initial implementation phase of a smoke-free *ordinance* can help those who want to quit be successful.

■ **Action Step 16**—Continue to work with local officials and enforcement agencies as needed to ensure enforcement and maintenance of the smoke-free *ordinance*.

Tasks may include routine assessment of the implementation process and potential adjustment of enforcement procedures.

■ **Action Step 17**—Remain vigilant and closely monitor opposition activity.

- ▶ Remember that even after you have secured passage of a smoke-free *ordinance*, your work is not complete. Pro-tobacco forces may challenge the *ordinance* by launching a petition drive to force a *referendum*, by threatening a lawsuit, by persuading legislators to repeal or weaken the measure, or by waiting until new officials with the power to overturn it are voted into office. Consider the possibility of one or more of these challenges prior to enactment of a smoke-free *ordinance* and be prepared; analyze and understand the experiences of other communities and consider conducting public opinion surveys to demonstrate public support for the *ordinance*. As community residents become accustomed to the *ordinance* and as they recognize its benefits and see that the negative effects predicted by the opposition are not occurring, the *ordinance* will become more and more difficult to challenge. An adequate level of public support can help to prevent the opposition from gaining a victory.



Sustainability Tip: Publication of successes through print, television, or other media in both the short and long term contributes to sustainability of your endeavor. Track the positive effects of the smoke-free *ordinance*. Consider organizing a public event some time after the *ordinance* goes into effect to congratulate the community on being smoke-free or running a newspaper ad on the one-year anniversary of the *ordinance*'s passage or effective date. In addition to demonstrating and further building public support for the *ordinance*, these activities prevent residents from taking it for granted and remind the community of the *ordinance*'s provisions.

Determining Your Resource Needs

Use the following lists of personnel, material, and financial resources to guide your planning efforts for conducting a *smoke-free policy effort*. Remember, the resources needed by your group will depend upon funding and the depth of your involvement in educational and other activities. While *smoke-free policy efforts* do not typically require large amounts of funding to be successful, they do demand considerable investment of staff and volunteer time.

■ Personnel Resource Needs

The personnel needed to carry out the activities associated with a *smoke-free policy effort* may include the following full-time, part-time, paid, or unpaid staff:

- An individual serving as coalition coordinator to oversee and direct activities
- Staff to provide administrative, logistical, and research support

Often the group leading the *smoke-free policy effort* may need or choose to call upon others to assume certain responsibilities. One significant resource is the smoke-free coalition, composed mostly of staff members from relevant agencies and organizations who are serving on the coalition as part of their job and volunteers. As mentioned previously, coalitions can be structured in many different ways. You may decide to organize coalition resources into the following groups:

- Steering committee
- Subcommittees responsible for working with coordinator on specific activities, such as research and community assessment, media and education, or evaluation
- Larger coalition body

■ Material Resource Needs

You will need a variety of material resources throughout the *smoke-free policy effort* and beyond. Basic resources are detailed in the following list. As you move forward with your work, keep in mind ways in which you might acquire or develop some of these materials, using existing resources when possible. Many of these resources can be “in kind” contributions from agencies and organizations participating in the coalition.

- Office space for staff
- Office equipment for outreach and research (e.g., computers, printers, telephones)
- Meeting space for coalition meetings
- Audiovisual and other equipment for delivering training to coalition spokespersons and educational presentations to the community
- Hard-copy and electronic educational and coalition spokespersons training materials
- Materials for coalition and steering committee meetings
- Materials for public opinion and other types of surveys

Section 3 — Determining Your Resource Needs

■ Financial Resource Needs

General, administrative, and personnel costs are the primary expenses for which funds will be needed to support a *smoke-free policy effort*. Be sure to budget for the following:

- Personnel salaries and benefits
- Purchase or development and printing of educational materials and associated copyright fees
- Expenses associated with training of spokespersons
- Staff training costs
- Purchase of *paid media* pieces
- Commissioning of public opinion or other surveys
- Mailings and promotional items used for educational purposes
- Telephone and Internet access costs for outreach and research purposes
- Purchase of equipment for presentations, outreach, and research
- Funds to cover miscellaneous items such as refreshments during coalition meetings and educational presentations

See **Table 6** for a summary of the many tasks that will need to be performed. These tasks may be interchanged among different groups as needed.

Table 6: Personnel and Their Typical Responsibilities

| | |
|-----------------------|--|
| Coalition coordinator | <ul style="list-style-type: none"> ■ Coordinates day-to-day execution of activities ■ Helps to assemble the steering committee and oversees coalition recruitment efforts ■ Oversees data collection and community assessment efforts ■ Organizes testimony for public hearings ■ Develops media pieces and educational materials ■ Works closely with the steering committee to troubleshoot problems and to decide how issues should be addressed ■ Ensures that coalition activities are evaluated and that feedback is used to facilitate ongoing work |
| Staff | <ul style="list-style-type: none"> ■ Conducts research informing community assessment ■ Manages database of coalition members, media, and community contacts ■ Collects information on key political, scientific, social, and legal issues that arise ■ Fields calls from community residents requesting more information on secondhand smoke or the <i>smoke-free policy effort</i> ■ Tracks media coverage and opposition activity including any from the tobacco industry ■ Develops media pieces and educational materials ■ Provides logistical support for coalition meetings ■ Provides appropriate assistance to the designated enforcement agency in responding to public complaints about possible <i>ordinance</i> violations |
| Steering committee | <ul style="list-style-type: none"> ■ Meets with stakeholders and influential decision makers to build support for coalition activities and smoke-free policies ■ Makes all key decisions regarding how the <i>smoke-free policy effort</i> will run (e.g., resource needs, task delegation, operating procedures) ■ Serves as coalition spokespersons for public hearings, news media interviews, and other public speaking engagements ■ Determines need for and oversees development of media pieces and other educational materials ■ Troubleshoots |
| Coalition body | <ul style="list-style-type: none"> ■ Mobilizes wider support among the members of the organizations who have a representative on the coalition body ■ Contacts legislators through visits, phone calls, letters, e-mails, etc. to express support for proposed policy ■ Represents coalition and testifies at public hearings ■ Disseminates mailings and educational materials ■ Collects organizational and individual endorsements ■ Recruits new coalition members |

Evaluating Your Activities

Evaluation is a key step of implementation, regardless of the intervention or program. While it is outside the scope of this guide to tell you *how* to evaluate, there is information specific to *smoke-free policy efforts* and *smoke-free ordinances* that may assist in evaluating your activities. Here are some questions to guide your data collection as well as potential sources of data to answer these questions.

■ Questions to Guide Data Collection

Process and Impact Evaluation. In assessing whether your activities were carried out as intended, whether or not they lead to passage of a smoke-free *ordinance*, you will want to capture information on their quality and effectiveness. If your activities are unsuccessful, the feedback gathered may shed light on methods for improving or enhancing your work in the future. Questions helpful for assessing quality and effectiveness include the following:

- Was your coalition adequately representative of your community? Did you overlook a community sector (e.g., the faith community, labor unions, community of color, youth) that could have had a substantial impact had it been included?
- What audiences did you engage when educating the community on the health effects of secondhand smoke?
- How much media attention did you generate? What were the messages conveyed by the media?
- How many *earned media* pieces were published? How many *paid media* pieces were published?
- How many educational presentations did you conduct? To whom?
- Were your educational efforts successful in increasing public knowledge of the health effects of secondhand smoke and community support for smoke-free policies?
- Why did legislators vote against a smoke-free *ordinance*?

Smoke-free policy efforts that lead to passage of a smoke-free *ordinance* should also be accompanied by an evaluation of quality and effectiveness but will likely require consideration of additional or alternative measures. The resulting information can be especially useful if the *ordinance* is challenged in the future and may also be incorporated into future publicity initiatives. Some questions you might ask yourself include the following:

- Why did legislators vote for the smoke-free *ordinance*?
- Are community residents aware of the smoke-free *ordinance*?
- What are the reactions of persons directly affected by the smoke-free *ordinance*? These people include nonsmoking patrons, smoking patrons, and those working in the hospitality industry.
- How has support for the *ordinance* changed among the general public, nonsmokers, smokers, employers, restaurant and bar owners, and restaurant and bar employees?
- How many people continue to smoke in settings that are supposed to be smoke-free?
- How many cigarette butts, ashtrays, and other signs of smoking are visible in settings that are supposed to be smoke-free?
- How many worksites and public places are complying with the smoke-free *ordinance*?
- How many complaints of noncompliance have been received?
- How many violations have been confirmed by enforcement agencies?
- How many inspections have been conducted?
- How many citations or fines have been issued?
- What economic impact is the smoke-free *ordinance* having on the hospitality industry?

Section 4 — Evaluating Your Activities

■ Questions to Guide Data Collection (cont.)

Outcome Evaluation. In assessing the success of the smoke-free *ordinance*, you will want to collect data on the expected outcomes of using this particular approach for reducing exposure to secondhand smoke. Although long-term health outcomes, such as reduced incidence of tobacco-related disease among nonsmokers, are hard to attribute to any one intervention, a few measurable indicators that might demonstrate success can be determined by asking the following questions:

- What improvements have occurred in air quality (e.g., levels of particulate matter) in indoor worksites and public places?
- What changes in sensory symptoms and respiratory function have occurred among employees, patrons, and visitors of indoor worksites and public places?
- What changes have occurred in the percentage of nonsmokers reporting exposure to secondhand smoke?
- Was there any change to in numbers of calls to state or local quitlines, if *cessation* messages were part of your work?

■ Potential Sources of Data

Numerous sources of data are available for collecting information on process, impact, and outcome evaluation indicators. The sources on which you rely should meet your data needs by addressing the questions outlined in your evaluation plan and may be developed by you or adapted from those already in existence. The following partial list of data sources may help you get started:

- Observational surveys of hospitality venues subject to smoke-free *ordinance* provisions
- Records of complaints received, violations confirmed, inspection results, and citations issued
- Surveys, interviews, and opinion polls of various groups, including key opinion leaders, legislators, enforcement agency personnel, patrons of establishments subject to smoke-free *ordinance* provisions, hospitality industry employees, and community residents
- News media coverage of the *ordinance* and its impact
- Data from government agencies (e.g., your state's department of revenue and your state's bureau of labor statistics) on taxable sales revenue and employment levels for restaurants, bars, and other hospitality venues to assess the economic impact of the *ordinance*
- Measurements of air quality in indoor worksites and public places subject to smoke-free *ordinance* provisions



Section 5

References and Resources

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National Cancer Institute. Secondhand Smoke: Questions and Answers.
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Section 5 — References and Resources

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Appendix: Action Guide Terminology

Cessation—Programs and policies developed to help tobacco users quit (“cease” tobacco use).

Earned media—media coverage that is free (e.g., press releases, op-ed pieces, letters to the editor).

Exemption—a provision excusing certain businesses or settings from adhering to requirements set forth by a smoke-free policy.

Front groups—business coalitions, associations, and individuals whose funds and/or organization is not disclosed; may be funded by the tobacco industry to generate opposition to a proposed smoke-free policy.

Lobbying—the process of engaging in advocacy to influence a governmental body to decide for or against a specific measure or action.

Ordinance—a law passed by a municipal government.

Paid media—advertising that is paid for (e.g., print, broadcast, Internet, billboards); offers control over the content and delivery of messages.

Preemption—a provision in state law that strips the authority of local governments to pass laws on certain issues that are more stringent than the state law; preemption at the federal level restricts both state and local governments from enacting more stringent measures.

Referendum—a direct vote in which voters in a given jurisdiction either accept or reject a particular proposal (e.g., adoption of a smoke-free policy); proposals are referred to the ballot by the local governing body or by the state legislature, or placed on the ballot through a citizen petition process.

Smoke-free policy effort—a series of activities (e.g., coalition-building, public education) undertaken in pursuit of a smoke-free policy. Smoke-free policy efforts typically begin with public education and grassroots organization and continue through passage, implementation, and evaluation of the smoke-free law.

Smoke-Free Policies: Establishing a Smoke-Free Ordinance to Reduce Exposure to Secondhand Smoke in Indoor Worksites and Public Places—An Action Guide

Partnership for Prevention® would like to hear from you about this Action Guide. Please help us improve this tool by filling out this form and faxing it back to us at (202) 833-0113.

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1. Please rate how much you agree with the following statements:

- | | | | |
|---|------------------------------|-----------------------------------|-----------------------------|
| a) Information within this Action Guide is easy to understand | <input type="checkbox"/> Yes | <input type="checkbox"/> Somewhat | <input type="checkbox"/> No |
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| c) Textboxes (marked with hurdler and light bulb icons) provide practical and useful additional information | <input type="checkbox"/> Yes | <input type="checkbox"/> Somewhat | <input type="checkbox"/> No |
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Comments:

2. Is there any other information that you would have liked to have seen included in this Action Guide to assist with implementation?

Yes (please describe below) No

3. Which best describes your work setting? [Nonprofit For profit]

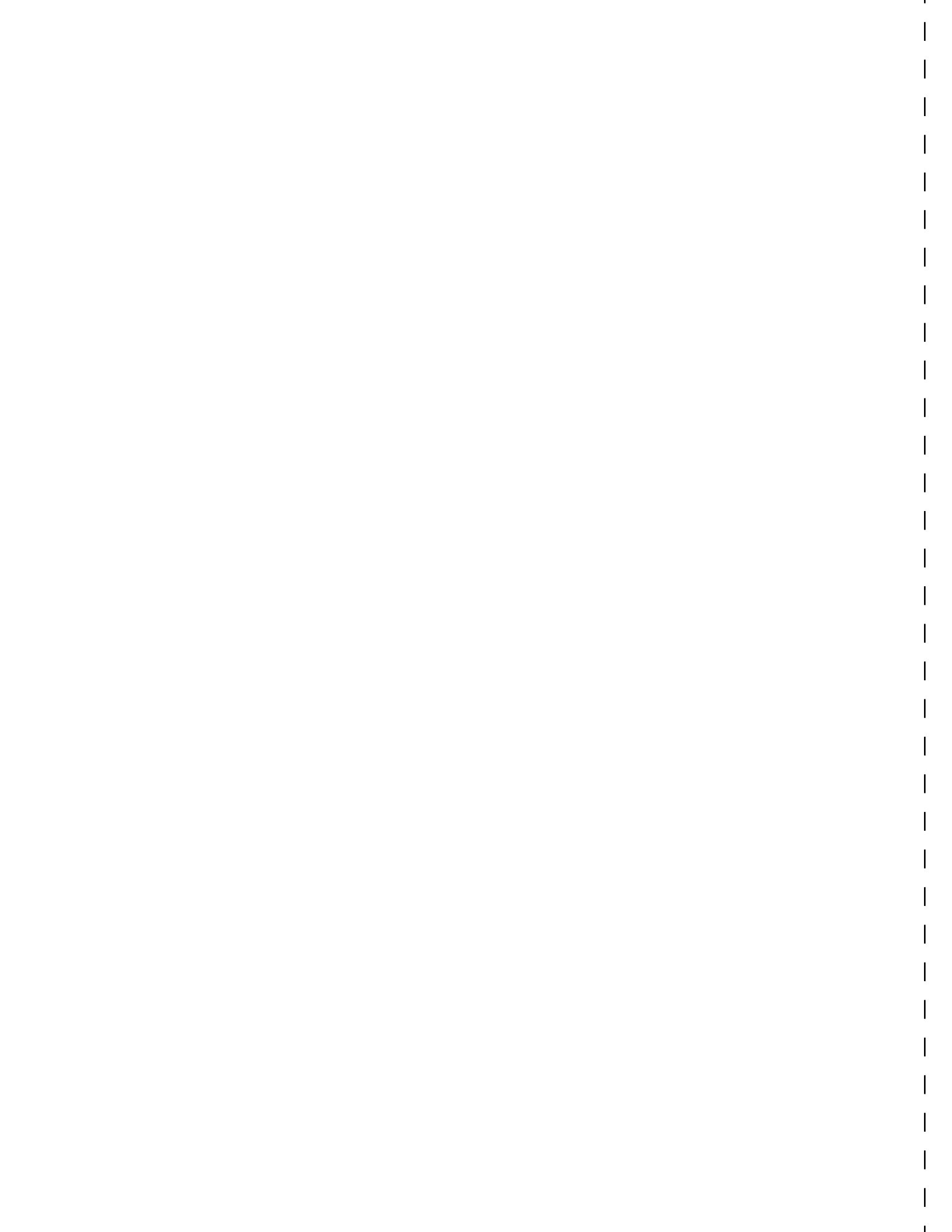
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5. How did you hear about "Smoke-Free Policies: Establishing a Smoke-Free Ordinance to Reduce Exposure to Secondhand Smoke in Indoor Worksites and Public Places—An Action Guide"? (check all that apply)

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