

## TOBACCO-FREE POLICY TALKING POINTS

### I. Tobacco Use Among Young Adults (18-24) is a Concern

- Tobacco is the leading cause of preventable death. (CDC)
- In the U.S., overall tobacco use rates have declined, but the 18-24 year old segment of the population continues to have the highest use rates of any other age group. (CDC)
- The majority of tobacco users start prior to the age of 18, but 7% of college smokers started while in college. (BACCHUS TUAS, 2004-2005)
- The 18-24 year old age group is the youngest legal market that the tobacco industry can target. (Master Settlement Agreement, 1998)
- The Tobacco Industry has long viewed young people as “replacement smokers,” needed to “replace” older smokers that are dying. (RJ Reynolds Document, 1984)

Supporting Statistics:

#### National Data

- 28.2% of undergrads used tobacco in the past 30 days (cigarettes, chew, snuff) (CORE Survey, 2005)
- An estimated 20.8% of all adults in the U.S. smoke cigarettes (CDC, 2007)

#### State Example: Colorado

- 26% of undergrads smoked in the past 30 days (BACCHUS TUAS, 2005)
- Adult rate for smokers in Colorado is 17.8% (Colorado TABS, 2006)
- 7% of smokers started in college (BACCHUS TUAS, 2005)
- 57% of college smokers want to quit before graduation (BACCHUS TUAS, 2005)

#### Industry Documentation

“Younger adult smokers are the only source of replacement smokers...if younger adults turn away from smoking, the industry must decline, just as a population which does not give birth will eventually dwindle.”

-Excerpt from a 2/29/84 RJ Reynolds document “Young Adult Smokers Strategies & Opportunities”

**BOTTOM LINE:** Young adults are disparately affected by tobacco. The tobacco industry is counting on this age group becoming addicted in order to secure sales for the future. Comprehensive tobacco policies reduce initiation and use.

## II. Tobacco-Free Laws Increase Cessation Rates

- *The Surgeon General's Report on Reducing Tobacco Use* found clean indoor air laws that prohibit smoking in indoor public and workplaces “have been shown to decrease daily tobacco consumption and to increase smoking cessation among smokers.” (U.S. Department of Health and Human Services, 2000)
- A study in the May 2000 issue of the *American Journal of Public Health* on the impact of California's smoke-free workplace law, including bars and restaurants, had on cessation efforts found that, “Laws with comprehensive restriction led to more worksites with smoking policies and increased likelihood that workers would quit smoking. An estimated 26.4% of smokers who worked in communities with strong ordinances quit smoking within 6 months of the survey and were still abstinent at the time of the survey, compared with only 19.1% of those who worked in communities with no ordinance.” (Moskowitz et al, 1999)
- The tobacco industry knows that tobacco-free ordinances encourage a reduction in smoking consumption. “Total prohibition of smoking in the workplace strongly affects industry volume. Smokers facing these restrictions consume 11% - 15% less than average and quit at a rate that is 84% higher than average. Only 6.4% - 10.3% of smokers face total workplace prohibition but these restrictions are rapidly becoming more common.” (Philip Morris internal memo, 1992)
- College students who live in smoke-free dorms are 40 percent less likely to take up smoking than their counterparts who live in unrestricted housing, according to a study by the Harvard School of Public Health College Alcohol Study. (Rigotti NA, Regan S, Moran SE, Wechsler H., 2001) (<http://www.hsph.harvard.edu/cas>)

**BOTTOM LINE:** Passing tobacco-free polices has been shown to be effective for reducing overall use rates and protecting the health of the majority who choose not to use tobacco. The CDC has made policy change part of its “best practices” because of the demonstrated effectiveness.

### III. There Is No Safe Level of Exposure to Secondhand Smoke

- Secondhand smoke contains the same carcinogens that smokers inhale. Smokers can choose where to use tobacco, but they cannot choose where the smoke goes.
- Secondhand smoke exposure causes approximately 3,400 lung cancer deaths and 22,700 – 69,600 heart disease deaths per year among non-smoking adults in the U.S. (Source: [http://www.cdc.gov/tobacco/data\\_statistics/fact\\_sheets/secondhand\\_smoke/secundhandsmoke.htm](http://www.cdc.gov/tobacco/data_statistics/fact_sheets/secondhand_smoke/secundhandsmoke.htm) )

In 2006, the Surgeon General released the most definitive study of secondhand smoke ever conducted. *The Health Consequences of Involuntary Exposure to Tobacco Smoke: A Report of the Surgeon General* is a 600+ page report, providing clear evidence of the dangers of secondhand smoke. The report states:

- There is no safe amount of secondhand smoke. Breathing even a little secondhand smoke can be dangerous.
- Secondhand smoke contains over 4,000 chemicals, 200 of which are poisons, and 43 of which are carcinogens.
- Secondhand smoke causes heart disease and lung cancer.
- Those who have heart disease and/or asthma are particularly susceptible to the effects of secondhand smoke exposure.
- Breathing secondhand smoke is a known cause of sudden infant death syndrome (SIDS). Children are also more likely to have lung problems, ear infections, and severe asthma from being around smoke.
- Babies whose mothers are around secondhand smoke are more likely to have lower birth weights and develop lung problems.
- Breathing secondhand smoke makes the platelets in your blood behave like those of a regular smoker. Even a short time in a smoky room causes your blood platelets to stick together. Secondhand smoke also damages the lining of your blood vessels. In your heart, these changes can cause a deadly heart attack.
- Secondhand smoke changes how your heart, blood, and blood vessels work in many ways.
- Adults who breathe 5 hours of secondhand smoke daily have higher “bad” cholesterol that clogs arteries.

Downloadable versions of the report: [www.cdc.gov/tobacco](http://www.cdc.gov/tobacco)

#### Outdoor Exposure

A recent study by Stanford University debunks the myth that cigarette smoke becomes harmless when out-of-doors.

Consider how many times one passes through tobacco smoke (exiting buildings, walking behind someone on campus, sitting near someone.) This study reveals how hazardous the smoke can be, despite the fact that it is in open air.

#### **Excerpt from Stanford University news article, May 2, 2007:**

The closer you are to an outdoor smoker, the higher your risk of exposure.

"A typical cigarette lasts about 10 minutes," Klepeis said. "We found that if you're within two feet downwind of a smoker, you may be exposed to pollutant concentrations that exceed 500 micrograms of PM2.5 over that 10-minute period. If you're exposed multiple times to multiple cigarettes over several hours in an outdoor pub, it would be possible to get a daily average of 35 micrograms or more, which exceeds the current EPA outdoor standard."

According to the Environmental Protection Agency, exposure to PM2.5 can lead to serious health problems, including asthma attacks, chronic bronchitis, irregular heartbeat, nonfatal heart attacks and even premature death in people with heart or lung disease. The current EPA ambient air standard for PM2.5 is 35 micrograms per cubic meter of air averaged over 24 hours. Levels that exceed 35 micrograms are considered unhealthy. "However, since tobacco smoke contains many toxic components, including carcinogens, it may be even less healthy than typical ambient air pollution," Klepeis noted.

<http://news-service.stanford.edu/news/2007/may9/smoking-050907.html>

**BOTTOM LINE:** Inhaling secondhand smoke is never safe, whether it is inside or outside. Children, expecting mothers, people with heart conditions, and asthmatics are especially susceptible to the harmful effects. To decrease the chances of negative health effects, it is simply best to avoid exposure to secondhand smoke—for smokers and non-smokers alike.

## **IV. Tobacco-Free Policies Ultimately Save Time, Money, and Years of Human Life**

Though only some health insurance carriers charge higher premiums for tobacco users, there may be additional costs for the college/university to absorb due to tobacco use. Tobacco users are more likely to suffer from respiratory and cardiac illness. (Spit tobacco users may also incur more dental expenses.) Chronic illness increases costs for the provider, and ultimately, the employer. Most importantly, though, tobacco reduces a person's life expectancy and quality of life. The human element is the most crucial aspect of what makes an institution of higher education strong.

### Productivity

Smokers also take more time off from work. The American Cancer Society estimates<sup>1</sup> that:

- \* Cigarette smokers are absent from work 6.5 days per year more than nonsmokers.
- \* Approximately 8% of a smoker's working hours are spent on smoking.

From: Tobacco Public Policy Center (Ohio)

[http://www.law.capital.edu/Tobacco/workplace/costs\\_smoking.html](http://www.law.capital.edu/Tobacco/workplace/costs_smoking.html)

**BOTTOM LINE:** As health providers incur more costs for treating chronic disease, they will raise rates. Being tobacco-free also contributes to the health and longevity of the university's greatest resource—its people.

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<sup>1</sup> ACS News Center, The Cost of Smoking to Business, Smoking Cessation Programs Key to Cutting Cost of Smoking on Business (2000), [http://www.cancer.org/docroot/NWS/content/NWS\\_2\\_1x\\_The\\_Cost\\_of\\_Smoking\\_to\\_Business.asp](http://www.cancer.org/docroot/NWS/content/NWS_2_1x_The_Cost_of_Smoking_to_Business.asp) (last visited Aug. 21, 2006).

## V. Tobacco Waste Is an Environmental and Global Concern

Campuses can reduce their negative environmental impact by passing tobacco-free policy. The formula below demonstrates how much waste is created each year, just by allowing smoking on campus. Also consider the waste generated by tobacco packaging and spit tobacco.

### CIGARETTE WASTE FORMULA

#### Colorado Campuses

College <b>Daily</b> Smokers in CO	=	16% (TUAS 2008)	
# of Campus Undergraduates	X	0.16	= Ugrad Daily Smokers (UDS)
UDS	X	16.8 (avg # smoked per day by daily smokers)	= # of cig butts generated by campus UDS
Cig butts	X	.000374 lbs	= pounds of waste generated daily by UDS
Daily weight	X	365	= <b>weight of yearly waste generated by UDS</b>

\*This formula only calculates waste from undergraduate daily smokers. Also consider staff, faculty and graduate student smokers, "social" smokers, tobacco packaging, and spit tobacco waste

### EXAMPLE

#### Sample Campus has 10,000 undergraduates

10,000 undergrads	X	0.16	= 1,600 undergrad daily smokers
1,600	X	16.8	= 26,880 cig butts
26,880 butts	X	.000374 lbs	= 10.053 lbs daily waste
10.053 lbs	X	365	= <b>3,669.345 lbs yearly waste</b>

**That's over 1 1/2 tons of cigarette butt waste per year going into the environment (as litter or as landfill space)!**

Tobacco harms the environment before the cigarette ever reaches a user's hand. Globally, the Tobacco Industry contributes to deforestation and chemical pollution. Growers and labor workers are routinely exposed to hazardous chemicals and pesticides. They also are at risk for nicotine poisoning. The pesticide poisons affect both human and animal health in areas where tobacco is farmed. This is not to mention the atrocious economic and social injustices committed by the Tobacco Industry, such as child labor, minimal or nonexistent wages , and creating nicotine addiction in third world countries (those that cannot afford tobacco or addiction treatment).

Resource: <http://tobaccofreekids.org/campaign/global/>

**BOTTOM LINE:** Tobacco-free policy decreases use, which in turn decreases waste generated and demand for the product. Ultimately, lowered demand can contribute to ending horrific and dangerous practices around the world. Institutions of higher education, especially, should think critically about the influence they can have on environmental change and social justice issues related to tobacco.