Left Behind in the Sr Reducing Health Inequities by Cl in California's Smokefree Wo	losing the Gaps
	Policy Analyst, ChangeLab Solution:  Ray Leun  Staff Attorney, ChangeLab Solution:
Senior Policy Strategist, (	<b>Richard T. Kwon</b> California Tobacco Control Progran
Program Consultant, (	<b>Nicole Handa</b> California Tobacco Control Program

#### **TODAY'S PRESENTERS**









Becky Johnson Ray Leung Richard T. Kwong Nicole Handal



#### **ChangeLab Solutions**

ChangeLab Solutions creates innovative law and policy ChangeLab Solutions creates innovative law and policy solutions that transform neighborhoods, cities, and states. We do this because achieving the common good means everyone has safe places to live and be active, nourishing food, and more opportunities to ensure health. Our unique approach, backed by decades of solid research and proven results, helps the public and private sectors make communities more livable, especially for those who are at highest risk because they have the fewest resources.



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ChangeLab Solutions is a non-partisan, nonprofit organization that educates and informs the public through objective, non-partisan analysis, study, and/or research. The primary purpose of this discussion is to address legal and/or policy options to improve public health. There is no intent to reflect a view on specific legislation.

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#### **Topics**

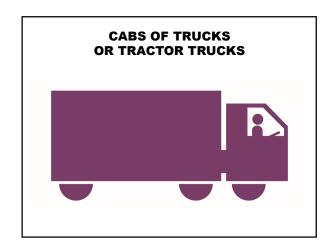
- How exemptions in the California Smokefree Workplace Act impact health inequities
- Local Policy Options for Closing the Gaps in the California Smokefree Workplace Act
- CTCP's Infographic "Breathing secondhand smoke should not be a condition of employment in California"
- Strategies from CTCP's Health Equity Summit and Roundtables





# HOTELS • 65% of guestrooms • 25% - 50% of lobbies • Meeting and banquet rooms



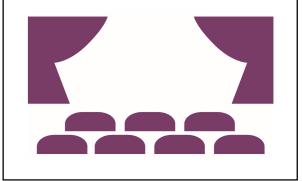


#### **WAREHOUSE FACILITIES**

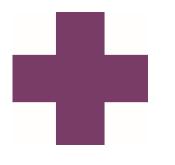
- More than 100,000 square feet
- 20 or fewer full-time employees
- Does not include office spaces



#### THEATRICAL PRODUCTION SITES



### MEDICAL RESEARCH OR TREATMENT SITES









#### **BREAKROOMS**



- If air from the smoking room is exhausted directly to the outside by an exhaust fan.
- If the employer complies with state and federal ventilation standards.
- If smoke room is located in non-work areas.

#### AND

• If there are sufficient breakrooms for non-smokers.

### EMPLOYERS WITH 5 OR FEWER EMPLOYEES



- If smoking area is not accessible to minors.
- All employees who enter area consent to permit smoking.
- If air from the smoking room is exhausted directly to the outside by an exhaust fans.

#### AND

 If the employer complies with state and federal ventilation standards.

1 in 7 Californians face secondhand smoke exposure at work



nomia Department of Public Health California Tohacco Control Program 2010. Two Decados of the California Tohacco Control Program California Tohacco Course

What percentage of workers who are employed in
places where smoking is not prohibited report bein
exposed to secondhand smoke
in the last two weeks?

- a) 11%
- b) 21%
- c) 31%
- d) 41%
- e) 51%



What percentage of workers who are employed in places where smoking is not prohibited report being exposed to secondhand smoke in the last two weeks?

- a) 11%
- b) 21%
- c) 31%
- d) 41%













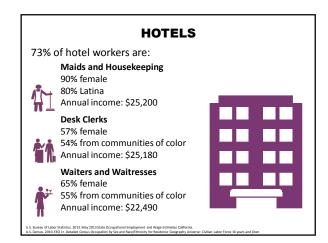
Nonsmokers who are exposed to secondhand smoke at work are 20% to 30% more likely to die

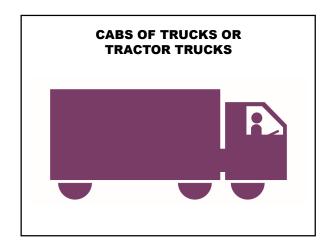
#### LEFT BEHIND IN THE SMOKE: How exemptions in California's Smokefree Workplace Act Impact Health Inequities

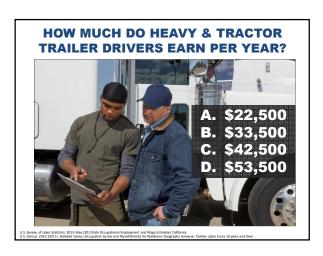
- Hotels
- Cabs of trucks or tractor trucks
- Warehouse facilities
- Private residences and home health workers
- Long term health care facilities
- Workplaces located outside
- Other exemptions



# HOTELS 65% of guestrooms 25% - 50% of lobbies Meeting and banquet rooms









#### **WAREHOUSE FACILITIES**

- More than 100,000 square feet
- 20 or fewer full-time employees
- Does not include office spaces



#### **WAREHOUSE FACILITIES**

60% of warehouse workers are:



#### Laborers

82% male

72% from communities of color Annual income: \$27,270



#### **Industrial Truck and Tractor Operators**

94.5% male

85.5% from communities of color Annual income: \$37,090



#### Packers

63% female

92.5% from communities of color Annual income: \$22,470

Bureau of Labor Statistics. 2013. May 2013 State Occupational Employment and Wage Estimates California.
 Census: 2010. EEO 1r. Detailed Census Occupation by Sex and Race/Ethnicity for Residence Geography Universe: Civilian Labor Force 16 years and Over.



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7	<i>1</i> 1

#### What percentage of those who work in mining and food service smoke?

A.15%

B. 20%

C. 25%

D. 30%



More than 1.5 times the national average of 17.8%

#### What percentage of those who work in mining and food service smoke?

A.15%

B. 20%

C. 25%



**▶** D. 30%



#### These exemptions become part of a system that makes it easier for the most affected populations to:

- 1. Start smoking
- 2. More difficult to quit smoking, and;
- 3. More likely to die from diseases associated with tobacco use

#### **Local Authority to Pass Broader No-Smoking Laws**

- <u>Police Power</u>

   U.S. Constitution, Amend. X: Grants authority to States
- California State Constitution, Article XI § 7: Grants authority to cities and counties

#### Labor Code § 6404.5

- Subsection (i) explicitly allows local jurisdictions to regulate smoking in <u>any area</u> not defined as a "place of employment" or where smoking is not regulated
- Court of Appeal clarified: this law allows municipalities to impose and enforce their own smoking restrictions to areas not covered by state law. *City of San Jose v. Dept. of Health Services*, 66 Cal. App.4<sup>th</sup> 35, 44 (1998)



#### **ChangeLab Solutions Model Comprehensive Smokefree Places Ordinance** <u>Prior to 2013</u>: Separate, stand-alone ChangeLab Solutions Model Ordinances o Exempted Workplaces o Public Places o Outdoor Dining Areas <u>January 2013</u>: Combined all into One Model Comprehensive Smokefree This naterial was made possible by funds received from Crast Number 69-11162 with the Chiffman Department of Public Health, Chiffman Tobacco Control Program. © 2014 Caldrain Department of Public Health. This material may not be reproduced or disseminated without prior written permission from the Caldrain Department of Public Health. Clangel al Solution x a suspecto argustration that provide legal information on matter relating to public health. The legal information provided is the document about not constitute input active or legal representations. For legal advise, readers clouded energical adverse to observe

HOW TO USE THE MODEL ORDINANCE	
ChangeLabSolutions	
AN ORDINANCE OF THE [CITY / COUNTY ] OF []  AMENDING THE [] MUNICIPAL CODE TO REGULATE  SMOKING [AND TOBACCO PRODUCT USE ]	
The [City Council of the City / Board of Supervisors of the County ] of [ ] does ordain as follows:	
COMMENT: This is introductory boilerplate language that should be adapted to the conventional form used in the jurisdiction.	
SECTION I. FINDINGS.	
The [ <u>City Council of the City / Board of Supervisors of the County</u> ] of [ ] hereby finds and declares as follows:	
Key Updates to Findings Section:	
Updated a number of findings based on the 2014 Surgeon General's report on the health consequences of smoking	
New findings demonstrating how closing the loopholes in	
the state smokefree workplace law can contribute to	
reductions in health disparities <ul> <li>New findings to support regulation of the use of electronic</li> </ul>	
smoking devices	
Comprehensive Smokefree Places Ordinance	
Pending Updates to Definitions	
We are in the process of updating our definitions	
"smoking," and deleted "smoke"	
"electronic smoking device"	
"tobacco product"	

#### **New Definition**

"Tobacco Product" means

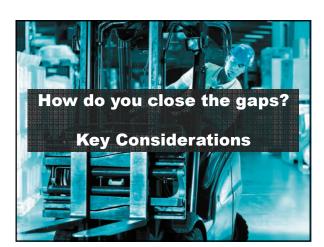
- (a) any product containing, made, or derived from tobacco or nicotine that is intended for human consumption, whether smoked, heated, chewed, absorbed, dissolved, inhaled, snorted, sniffed, or ingested by any other means, including, but not limited to cigarettes, cigars, little cigars, chewing tobacco, pipe tobacco, snuff; and
- (b) Any electronic device that delivers nicotine or other substances to the person inhaling from the device, including, but not limited to an electronic cigarette, cigar, pipe, or hookah.

Comprehensive Smokefree Places Ordinance

#### "Tobacco Product" continued

(c) Notwithstanding any provision of subsections (a) and (b) to the contrary, "tobacco product" includes any component, part, or accessory of a tobacco product, whether or not sold separately. "Tobacco product" does not include any product that has been approved by the United States Food and Drug Administration for sale as a tobacco cessation product or for other therapeutic purposes where such product is marketed and sold solely for such an approved purpose."

Comprehensive Smokefree Places Ordinance



### **Local Ordinance: Key Considerations**

- Findings
- Definitions
- What Products: Smokeless Tobacco; Electronic Smoking Devices?
- What Places: Indoor/Outdoor?
- Exemptions?



# ChangeLab Solutions Resources ChangeLab Solutions Lat paid manufacture the Mean paid ChangeLab Solutions Lat paid manufacture the Mean paid Smokefree Housing Oneanue. Annoteting in Multi-latif Residences Oneanue. Annoteting in Multi-latif Residences One Annoteting in Multi-latif

#### ChangeLabSolutions

ChangeLab Solutions Staff is available to provide technical assistance on most tobacco-related questions to tobacco control program staff throughout California

#### Call

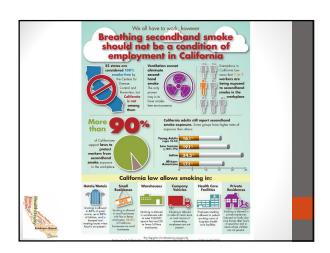
510.302.3380

#### Visit

 $\underline{\text{http://changelabsolutions.org/tobacco-control-}} \\ \underline{\text{ask-us}}$ 



# Advancing Health Equity in Tobacco Control Richard Kwong, Senior Policy Strategist Strategic Planning and Policy Unit California Tobacco Control Program Nicole Handal, Program Consultant Health Equity & Local Programs Unit California Tobacco Control Program California Tobacco Control Program



# CDC: California is not a smoke-free state

- A state smoke-free law is considered "comprehensive" if it prohibits smoking in private sector worksites, restaurants and bars, with no exceptions (e.g., ventilation).
- 25 states and the District of Columbia have comprehensive state smoke-free laws in effect.
- California considered "less restrictive or no restrictions"

# Ventilation cannot eliminate secondhand smoke

- CA: Smoking allowed in breakrooms and small businesses provided that "ventilation standards" adopted by OSHB or the federal EPA are met.
  - No standards have been adopted since the enactment of this law.
- U.S. OSHA:
  - "From the industrial hygiene perspective, general ventilation as delivered by heating, ventilation and air condition (HVAC) systems, is not an acceptable engineering control measure for controlling occupational exposures to [environmental tobacco smokel"
- Both the federal EPA and CalEPA have declared SHS to be a Class A carcinogen to which there is no safe level of exposure.

#### Health Equity Issue

- One in five (19.5 percent) non-smoking Hispanic adults report current SHS exposure in the workplace.
  - Highest rate among all race/ethnic groups and twice the rate of white people.
- Current workplace SHS exposure among nonsmoking young adults (ages 18-24) was significantly higher (23.5 percent) than among older adults (Max, 2012).

#### SHS Infograph is Your Resource

- A great educational and informative tool for:
- Tobacco control advocates
- New/current staff
- Community partners
- Policymakers
- Where can I find it?
  - CTCP website, Fact Sheets and Data page, Environmental Exposure section:

 $\frac{\text{http://www.cdph.ca.gov/programs/tobacco/Documents/Resources}}{\text{Fact%20Sheets/Secondhand%20Smoke%20Infograph.pdf}}$ 

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# Advancing Health Equity in Tobacco Control Plan

- Health Equity Summit, June 2013
  - Created a strategic vision for tobacco control to achieve tobacco-related health equity;
  - Identified a set of achievable, population-specific outcome measures.
  - Identified Top 11 Priority Strategies
    - Establish commercial tobacco-free workplaces (outdoors) (e.g. construction sites)



 $\frac{\text{http://www.cdph.ca.gov/programs/tobacco/Documents/Resources/Pu}{blications/HealthEquitySum-Web.pdf}$ 

# Advancing Health Equity in Tobacco Control Plan

- Health Equity Roundtables, June 2014
  - Focused on four of the Priority Strategies to define actionable approaches
    - Establish commercial tobacco-free workplaces (outdoors) (e.g. construction sites)
  - Key findings across the strategies:
    - Data baseline, enriched, and/or stratified data is critical
  - Education target audiences, policy makers, stakeholders
     Best practices assessing what works



# 

#### Establish Tobacco-Free Work Places Guide/toolkit working with the different worksites/industries Identify corporate policies Set definition of "outdoor Workers' rights groups Testimonials from workers Assess public attitudes HR departments Multi-language educational Sample letters to the editor Educate business owners on Business associations Identify policy loop holes Frame as a social justice issue Health and safety Identify the impact and cost Chambers of Commerce (ethnic-based) Utilize a city/county ordinance Tribal leadership Tailoring interventions and messages based on specific worksites and industries

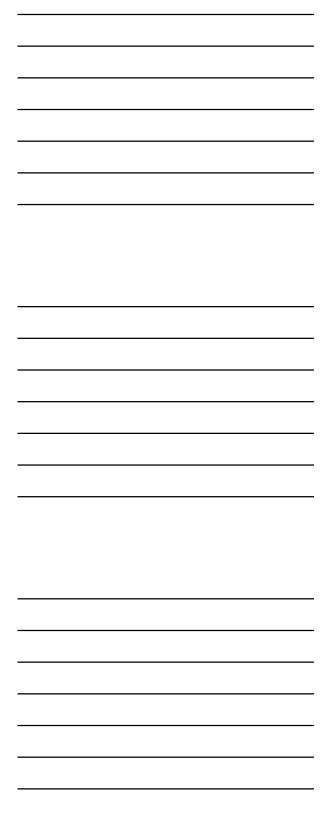
#### **CTCP Planned Activities**

- Update the Labor Code 6404.5 Workplace exemption infographic to include e-cigarettes and disseminate through educational visits with decision makers.
- Develop one sample letter to the editor and one "evergreen article" promoting a smoke-free workplace standard for all employees in California for use by local partners.
- Monitor workplace exposure to secondhand smoke exposure especially for populations most impacted.
- Coordinate with statewide grantees and partners to provide trainings.
- Provide and identify information, support, and resources to local
- Identifying promising local strategies and activities including

#### **Tobacco Control Health Equity** Report Card

- · Goal: To ensure accountability and transparency through tracking progress across balanced indicators, engagement, resources, and actionable data to support and evaluate the implementation of California's Advancing Health Equity in Tobacco Control plan.
- Health Equity Roundtables Input and Feedback:
  - Focused on five health equity metrics:
    - Capacity
    - Cessation
    - Population data
      Tobacco control policies
  - Key findings across the strategies:
    - Data stratified, traditional vs. newer products, and patterns People understanding attitudes of affected groups

    - Contact newer and better means of communicating Enforcement impact of voluntary and legislative policies



#### Health Equity Report Card Next Steps

- Identifying criteria, indicators and data sources
- Identify gaps in data sources
- Consult with CTCP's Evaluation Task Force
- Conduct listening sessions to receive input and feedback
- Develop Report Card format
- Release first Report Card in Summer 2015, tentatively



#### **Health Equity Efforts**

- Coordinating and collaborating with CDPH's Office of Health Equity
- Included a health equity objective in the TEROC Master Plan
- Funded 8 Reduce Inequities Grantees
- Supporting The LOOP's efforts
- Released the Advancing Health Equity in Tobacco Control plan
- Releasing the findings from the Health Equity Roundtables
- Initiating strategy exchange/listening sessions with stakeholders
- Released the 15-100 Achieving Tobacco-Related Health Equity Among California's Diverse Populations RFA on November 13, 2014



#### ChangeLabSolutions



### Thank you!

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