

Getting Your Message Heard:  
Mobilizing the Community  
for Smokefree Air

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[www.no-smoke.org](http://www.no-smoke.org)

 AMERICAN  
NONSMOKERS'  
RIGHTS FOUNDATION



- Materials, including maps and lists
- Daily news clip service
- Model policy language
- Database runs per request
- Training and phone TA
- Strategic planning
- Examples and referrals
- [www.no-smoke.org](http://www.no-smoke.org)
- Liz Williams 510-841-3032



## Agenda

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- Why policy and system change?
  - Why focus on smokefree air?
  - The science of secondhand smoke
- CT Laws: A Reminder/overview
- CT Advocacy Resources
- Advocacy vs. Lobbying
- Community Mobilization: How?
- Take Home and First Next Steps



## Policy and Systems Change

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- Population-based health policy
- Beyond individual behavior change
- Changing social norms and behavior by changing the environment



# Secondhand Smoke: The Dirty Truth

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*And Why We Care...*

## What is Secondhand Smoke?


- Smoke from the end of a cigarette, "sidestream smoke".
- Smoke exhaled from a smoker's mouth.
- Smoke that lingers in the air and on clothing, textiles, etc. after a cigarette is smoked ("off-gassed" / "thirdhand" smoke).



Secondhand smoke contains nearly  
**5,000 chemical compounds,**  
over 50 cancer causing substances.





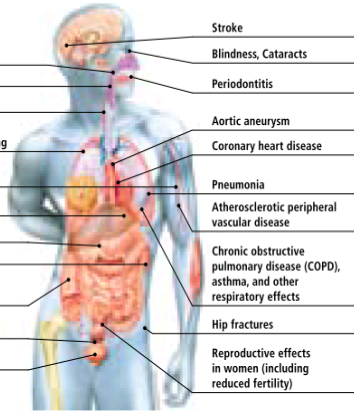


All together, secondhand  
smoke causes an estimated  
**53,000 premature deaths**  
every year in this country.

## DISEASES CAUSED BY SMOKING

### CANCERS

Larynx  
Oropharynx  
Oesophagus  
Trachea, bronchus or lung  
Acute myeloid leukemia  
Stomach  
Pancreas  
Kidney and Ureter  
Colon  
Cervix  
Bladder



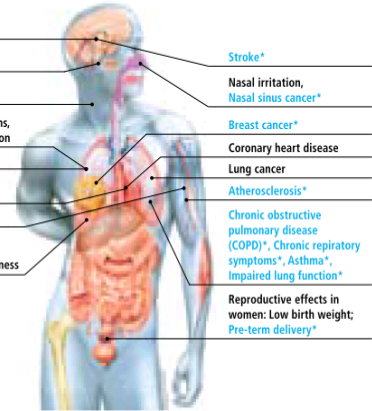
### CHRONIC DISEASES

Stroke  
Blindness, Cataracts  
Periodontitis  
Aortic aneurysm  
Coronary heart disease  
Pneumonia  
Atherosclerotic peripheral vascular disease  
Chronic obstructive pulmonary disease (COPD), asthma, and other respiratory effects  
Hip fractures  
Reproductive effects in women (including reduced fertility)

## DISEASES CAUSED BY SECOND-HAND SMOKE

### CHILDREN

Brain tumours\*  
Middle ear disease  
Lymphoma\*  
Respiratory symptoms, Impaired lung function  
Asthma\*  
Sudden Infant Death Syndrome (SIDS)  
Leukemia\*



### ADULTS

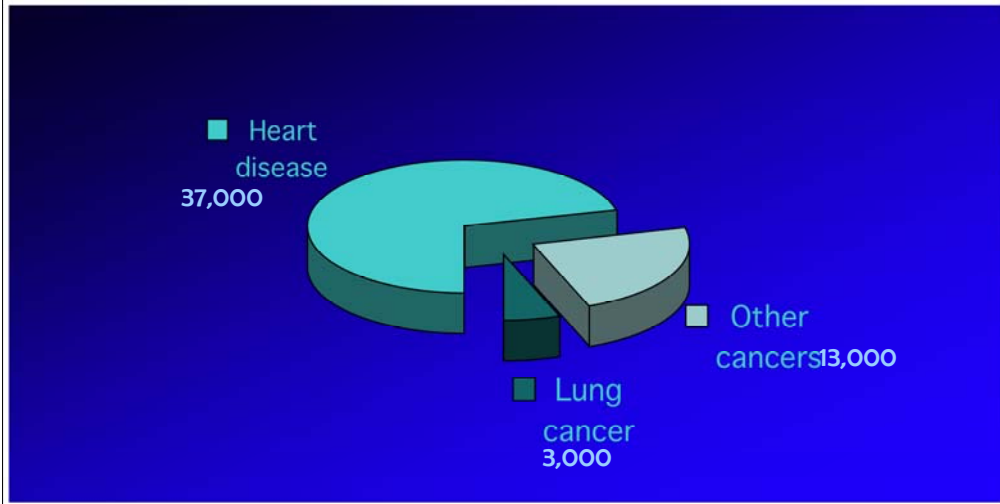
Stroke\*  
Nasal irritation, Nasal sinus cancer\*  
Breast cancer\*  
Coronary heart disease  
Lung cancer  
Atherosclerosis\*  
Chronic obstructive pulmonary disease (COPD)\*, Chronic respiratory symptoms\*, Asthma\*, Impaired lung function\*  
Reproductive effects in women: Low birth weight; Pre-term delivery\*

\* Evidence of causation: suggestive  
Evidence of causation: sufficient

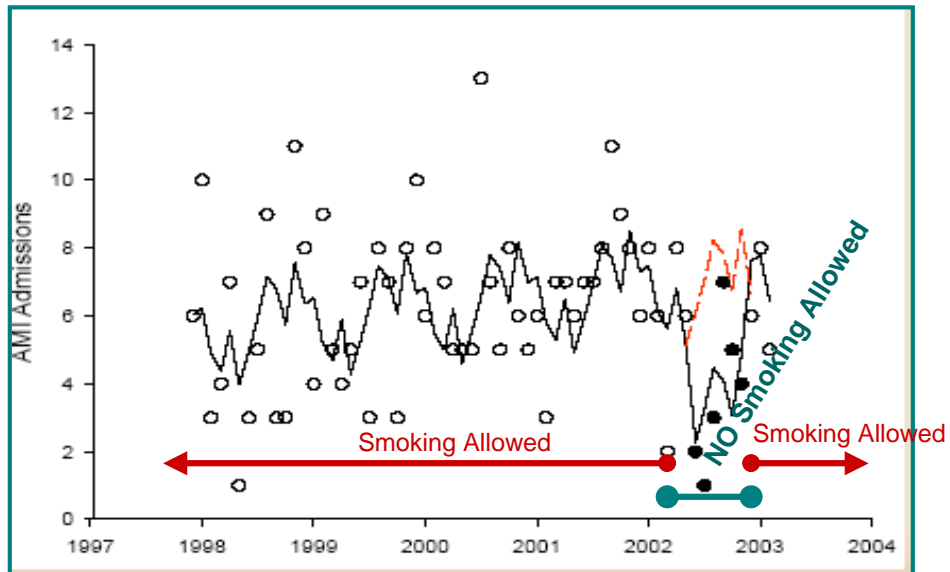
Source: U.S. Department of Health and Human Services. *The health consequences of smoking: a report of the Surgeon General*. Atlanta, U.S. Department of Health and Human Services, Centers for Disease Control and Prevention, National Center for Chronic Disease Prevention and Health Promotion, Office on Smoking and Health, 2004 ([http://www.cdc.gov/tobacco/data\\_statistics/sgr/sgr\\_2004/chapters.htm](http://www.cdc.gov/tobacco/data_statistics/sgr/sgr_2004/chapters.htm), accessed 5 December 2007).

Source: U.S. Department of Health and Human Services. *The health consequences of involuntary exposure to tobacco smoke: a report of the Surgeon General*. Atlanta, U.S. Department of Health and Human Services, Centers for Disease Control and Prevention, Coordinating Center for Health Promotion, National Center for Chronic Disease Prevention and Health Promotion, Office on Smoking and Health, 2006 (<http://www.surgeongeneral.gov/library/secondhandsmoke/report/fullreport.pdf>, accessed 5 December 2007).

## Annual Deaths Due to Secondhand Smoke



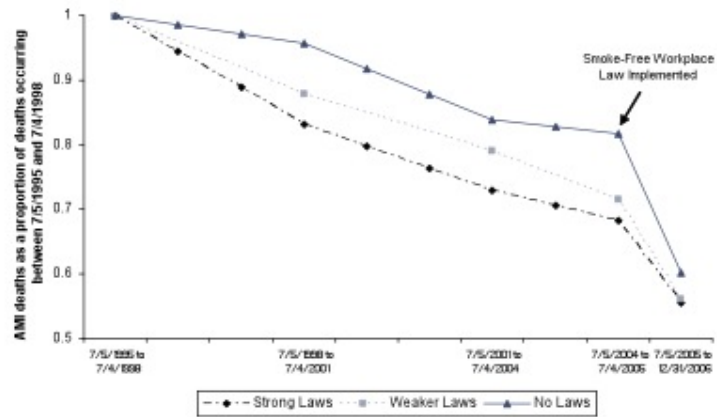
## Helena Montana Heart Study, 2002



In Helena, Montana: Significant fall of  $-4.0 \pm 1.2$  AMI admissions per month while smokefree ordinance was in effect. In layperson's terms: 40% decrease in heart attack patient admissions.

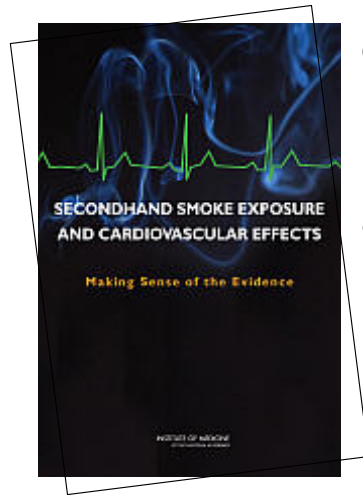
# Mass. Heart Study 2006

## Drop in Heart Attack Deaths by Type of Local Law



## Institute of Medicine (2009)

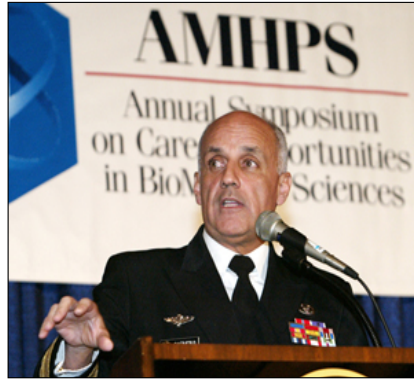
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**Clean air laws, in fact,  
have done more to  
reduce consumption  
than any intervention  
other than price  
increases for  
cigarettes.**

## 2006 Surgeon General's Report

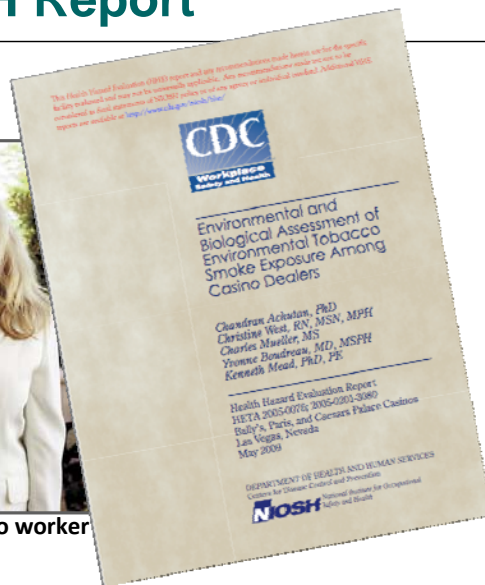
- There is no risk-free level of exposure to secondhand smoke.
- Ventilation of the air cannot eliminate all the health risks caused by exposure to secondhand smoke.



## 2009 NIOSH Report



Terrie Price, former casino worker





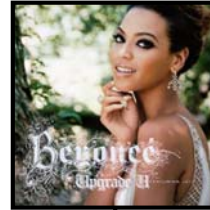
**1980s**



**1990s**



**2000 & beyond**



**Smoking Sections**



**Smoking Rooms**



**100% Smokefree**



## Smokefree laws SAVE LIVES

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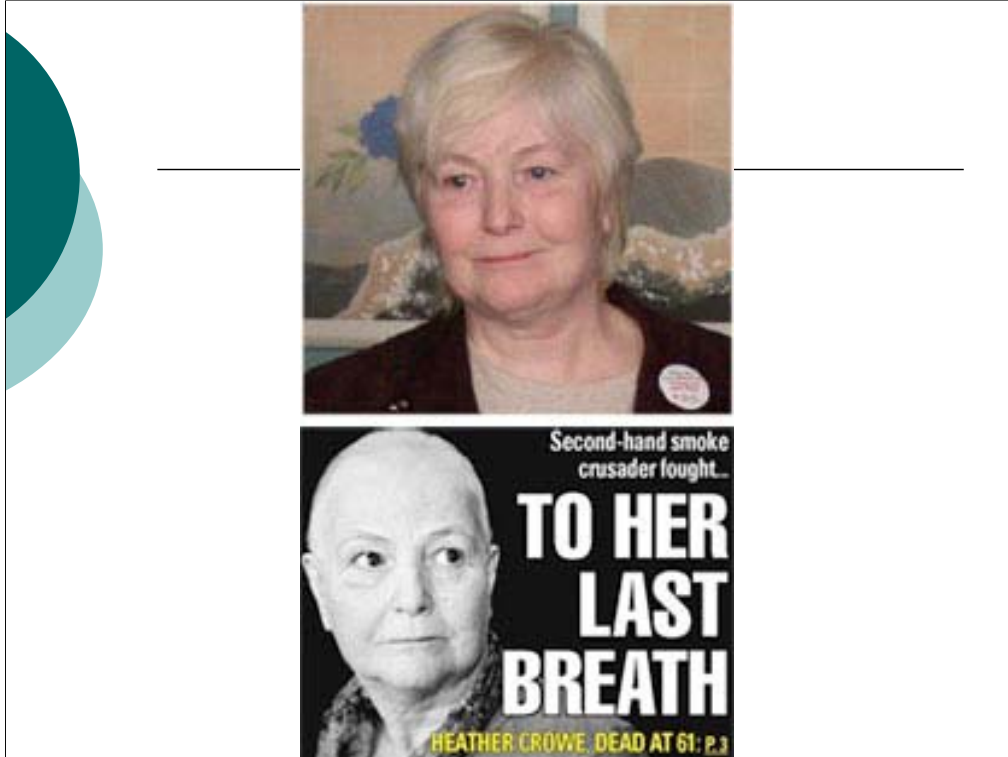
- With such clear science, compelling evidence, abundant examples, and strong public support, why is ***anyone still unprotected?***
- ***It's about more than the health facts.***

## Cheryl Rose, *Casino Worker*

"...was diagnosed with Stage 4 lung cancer in June 2008. She had never smoked, and there was no history of cancer in her family. Doctors told Rose what she had suspected. Her cancer likely resulted from years of inhaling smoke at work — in casinos." (from *Las Vegas Sun Reporter Liz Benston, Feb 14, 2010.*

**Cheryl died April 20, 2010**





*“The only person who likes  
change is a wet baby”*

**-Mark Twain**

## U.S. 100% Smokefree Laws in Workplaces AND Restaurants AND Bars

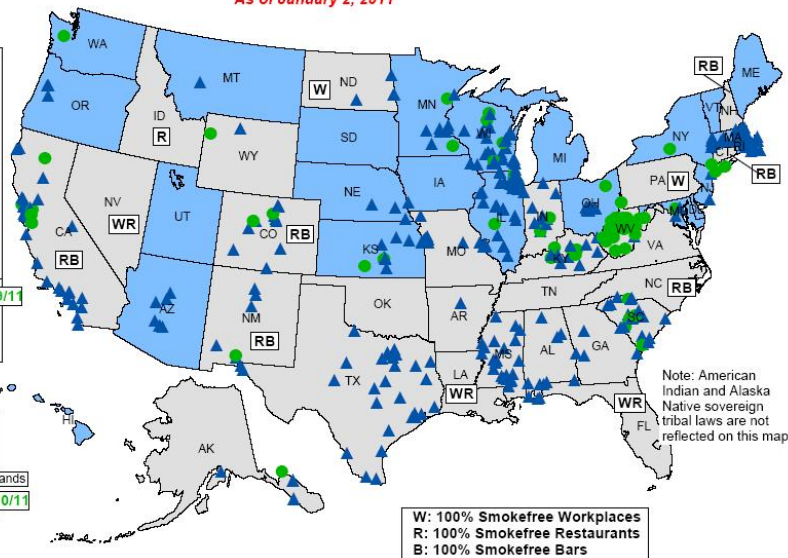
American Nonsmokers' Rights Foundation

*As of January 2, 2011*

### Territories and Commonwealths

- Commonwealth of Northern Mariana Islands W
- Guam
- R: effective 1/19/11
- American Samoa

- Puerto Rico
- U.S. Virgin Islands effective 5/10/11



Note: American Indian and Alaska Native sovereign tribal laws are not reflected on this map.

**W: 100% Smokefree Workplaces**  
**R: 100% Smokefree Restaurants**  
**B: 100% Smokefree Bars**

Locality Type with a 100% Smokefree WRB Law  
▲ City  
● County

State and Commonwealth/Territory Law Type  
 100% Smokefree Workplace, Restaurant, and Bar Law  
 State Law does not cover 100% Smokefree Workplaces AND Restaurants AND Bars



## Current CT Laws

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- Smoke Free law passed in 2003
  - Preemptive
  - Exemptions include small businesses with 5 or fewer employees
  - According to Small Business Association, 35,000 firms with 1-4 employees. **74,000 CT employees at risk because law does not cover them!**
  - And: businesses with > 5 employees can have a “separately ventilated smoking room”



## Closing CT Gaps – Smokefree Disparities

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- **Who is still unprotected indoors?**

- Small business employees
- Private club employees
- Casino employees (tribal sovereignty)
- Hookah bar employees

- **After indoor areas are smokefree**

- Outdoor workspaces and commercial zones
- Restaurant/Bar patios
- Multi-unit housing
- School/College/Hospital Campuses
- Parks/beaches



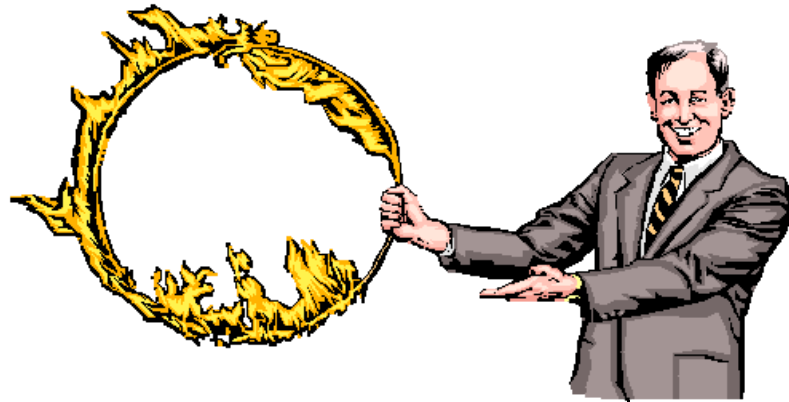
So...why not just strengthen the law?

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## Preemption

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## In the Industry's Words...

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“Our top priority in fighting the proliferation of smoking bans and restrictions can be summed up in two words: ‘accommodation’ and ‘preemption.’”

--- *Ellen Merlo, Philip Morris internal document, Bates No.: 2040236685/6706, 1994*



## Preemption: A NATIONAL strategy, not just a Connecticut oddity

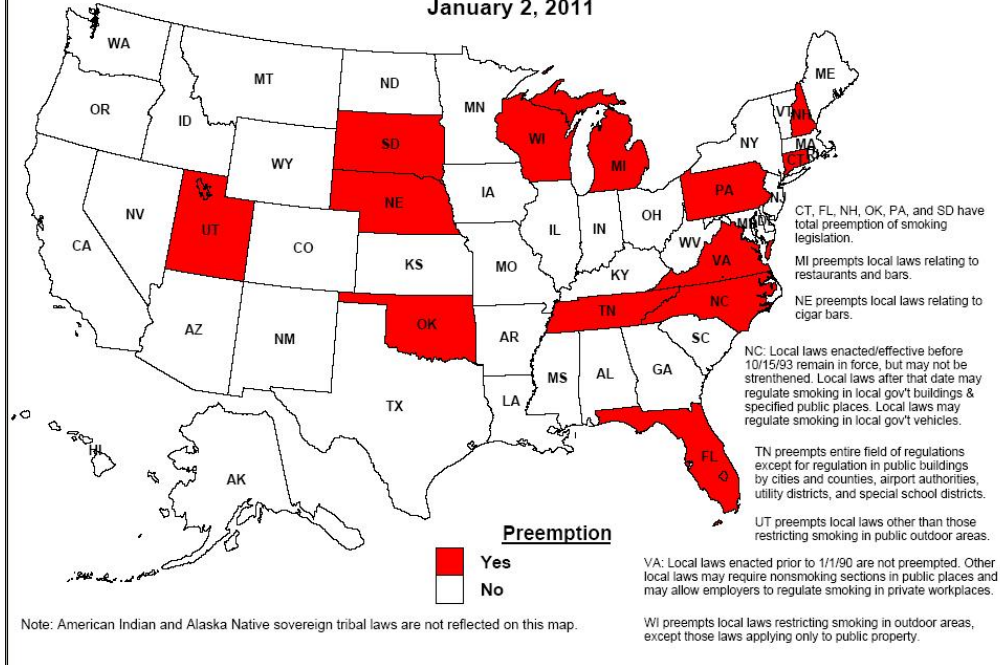
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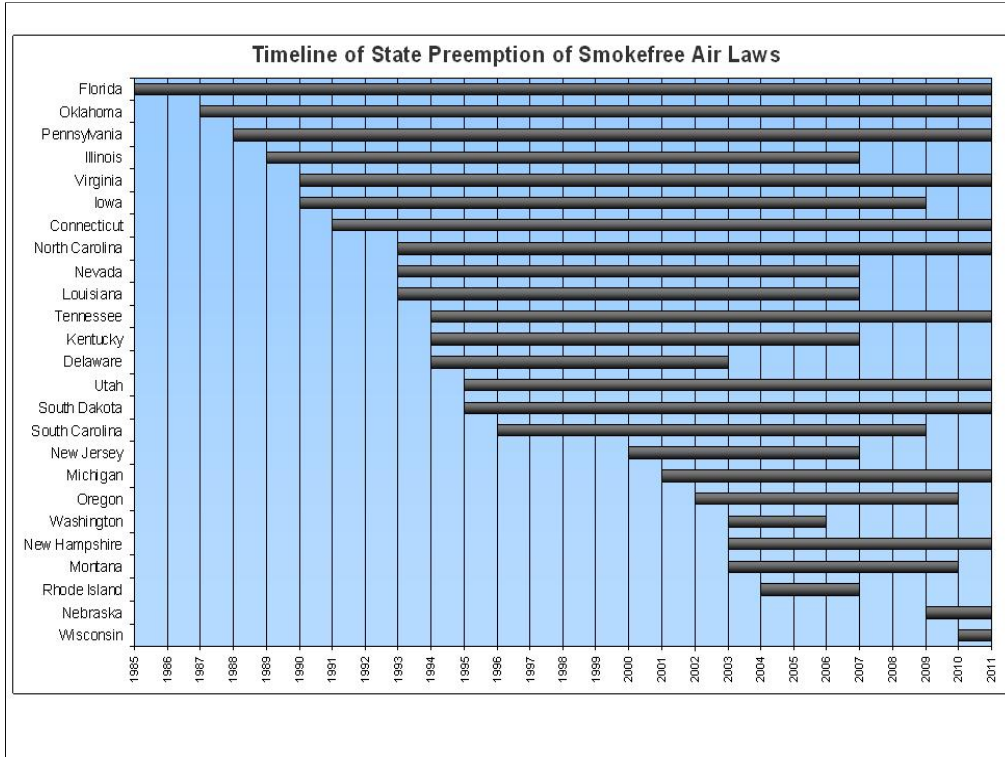
- 1985 – FL
- 1987 – OK
- 1988 – PA
- 1989 – IL
- 1990 – VA, IA
- **1993 – CT**
- 1993 – NC, LA, NV
- 1994 – TN, DE
- 1995 – SD, UT
- 1996 – SC
- 1999 – NV
- 2000 – NJ
- 2001 – MI
- 2001- OR
- WA, NH
- **Delaware 2003**
- **IA, LA, IL, NJ, SC, RI, NV, NC...**
- **But new forms now**

# States with Any Type of Preemption of Smokefree Air Laws

American Nonsmokers' Rights Foundation

January 2, 2011







## Other Barriers to Progress...

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- Strengthening partial statewide laws is always hard – even more so with smoking rooms.
- ***17 year average!***



## Current Bills in CT

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- SB 415 - An Act Concerning State Oversight of Hookah Lounge
- HB 6550 (Raised) - An Act Concerning Medicaid Coverage For Smoking Cessation Treatment
- SB 948 - An Act concerning smoking in workplaces
- SB 884 - An Act Prohibiting Smoking In Private Clubs
- HB 5502 - An Act Prohibiting Smoking In Motor Vehicles With Minor Children





## Restoring Local Control Strategies

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- Resolutions from municipalities
- Innovative organizing (Smokefree Music, etc)
- Integration with other local healthy community efforts
- Work with Mayors
- League of Cities and towns



## Advocacy Resources in CT

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Joni Czajkowski  
Sr. Director Government Relations  
American Heart Association  
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Dawn Mays-Hardy, MS  
CT Director, Health Promotion  
and Public Policy  
American Lung Association  
860.838.4376  
[dmays-hardy@lungne.org](mailto:dmays-hardy@lungne.org)

Bryte Johnson  
State Director of Government  
Relations and Advocacy  
American Cancer Society 203-379-  
4850  
[bryte.johnson@cancer.org](mailto:bryte.johnson@cancer.org)

Pat Checko, Laura Cordes  
MATCH Coalition  
[PJChecko@comcast.net](mailto:PJChecko@comcast.net)  
(860) 221-8888

Kevin O'Flaherty  
Campaign for Tobacco-Free Kids Northeast Regional Director  
646-919-0469 [kevin@tfk.org](mailto:kevin@tfk.org) [www.tobaccofreekids.org](http://www.tobaccofreekids.org)

## Guiding Principles

- Build a strong grassroots base
- Importance of broad-based community support
- Include expert advisors
- Review Fundamentals





## Advocacy vs. Lobbying

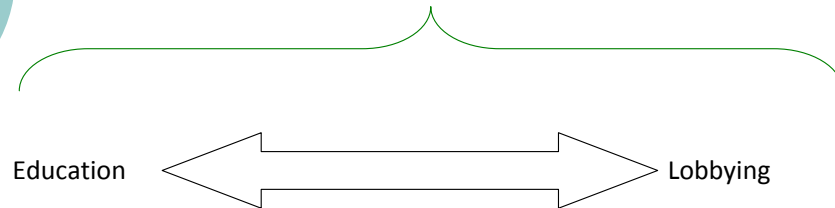
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*Winning campaigns need both!!*

# What is Advocacy?

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ADVOCACY





## What is Lobbying?

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*In order to be defined as lobbying, the action must involve legislation or a specific legislative proposal*

## Direct Lobbying

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### **The action is direct lobbying if:**

- You are in contact with a legislator or legislative staff member;
  - You refer to specific legislation or legislative proposal;
- AND
- You express a view on the legislation



## Grassroots Lobbying

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- **The action is grassroots lobbying if:**
  - You communicate with the general public
  - You express a view about specific legislation or legislative proposal;
- AND
- You include a call to action (direct or indirect)





## Grassroots: Call to Action

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Direct:

- Tell public to contact their legislator(s)
- Provide mechanism to contact legislator
- Provide telephone number or address of legislator(s)



## Grassroots: Call to Action

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### Indirect:

- List the names of legislators voting on a particular bill
- List the names of those legislators opposed or undecided



## Advocacy Messages:

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Protect Our Children from Toxic Secondhand Smoke

Dear [Decision Maker],

I am writing to ask you to co-sponsor HB 5502, An Act Prohibiting Smoking in Motor Vehicles with Minor Children. This important piece of legislation will protect children from the dangers of secondhand smoke exposure in cars and reduce their risk of developing diseases later in life as a result of this exposure....

HB 5502 is an important piece of legislation and I urge you to sign on as a co-sponsor and let the members of the Transportation Committee know about your support for the bill.

## Talking Points: Winning Messages





## Top Smokefree Message

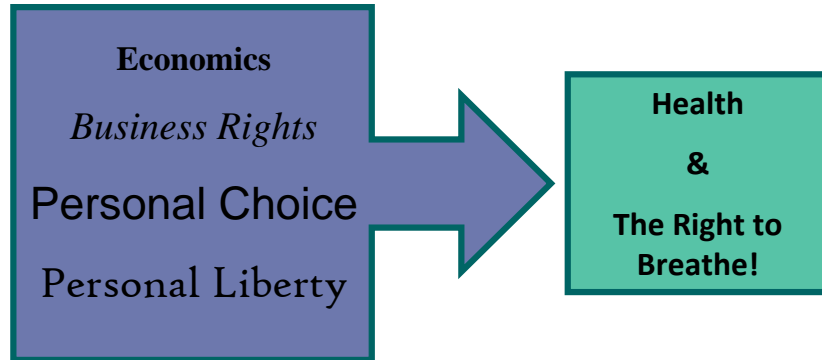
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Everyone has the right to breathe clean air in workplaces and public places because secondhand smoke causes heart disease, and cancer and other serious health hazards.

**REMEMBER...**

**Return the debate to *your* messages**

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## Building Power: Moving Beyond the Science

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- Pressure vs. Persuasion
- 80-20 rule
- What will make the difference?



## Organizing A Solid Foundation

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### Grassroots Power = Pressure

- Pressure comes from:
  - Public/Constituents
  - Grasstops/Opinion Leaders
  - Groups/Organizations
  - Media
  - “Deep” Organizing and Communications
- Policy Champions
- Good Information
- Clear Goals



# Get the Right People Involved



Who makes up a  
Smokefree Coalition?



Studies show that **YOUTH** who smoke cigarettes are 14 times more likely to abuse alcohol and 100 times more likely to smoke marijuana than their non-smoking peers.  
(National Institute on Drug Abuse)



Studies also show that smokefree indoor air is one of the most effective ways to prevent youth from lighting up.  
(Journal of Health Economics 19:43-64 (1992))

**We believe we all have the right to breathe clean air.**

For more information please visit [www.tobaccofreejackson.org](http://www.tobaccofreejackson.org)



## Tobacco Industry Power

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- They have resources (\$\$\$)
- They forge and sustain alliances (retailers, alcohol, gaming)
- They are unrelenting
- They are innovative
- They are strategic
- They know their enemy



## Translation to Power:

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- *They have resources* = Fundraising
- *They forge and sustain alliances* = Coalition-Building and Maintenance
- *They are unrelenting* = Grassroots
- *They are innovative* = Media Advocacy
- *They are strategic* = Decision-Maker Advocacy
- *They know their enemy* = Opposition Research

*Thanks to M+R Strategic Services - Lori Fresina for  
Advocacy Power Prism*

## Plan before you act

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## Build Meaningful Coalitions

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- Compliment Efforts
- Tell Your Story
  - Humanize the issue - no "MEGO"
- Ask For Advice
  - Listen to suggestions.
  - They will either tell you where to go...
  - or offer to help you!


- Seek partners
- Build a reciprocal network
- Listen; ask partner organizations how to be supportive
- Seek integrated messaging opportunities
- Respect differences



## Building Meaningful Coalitions: *Making Your Issue Relevant*

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- Different community segments may respond to different messages
  - “Translate” your message to resonate, inspire, and move to action
  - This is your motivating vehicle
- 



An *ideal* and powerful network should represent the diverse segments of your community

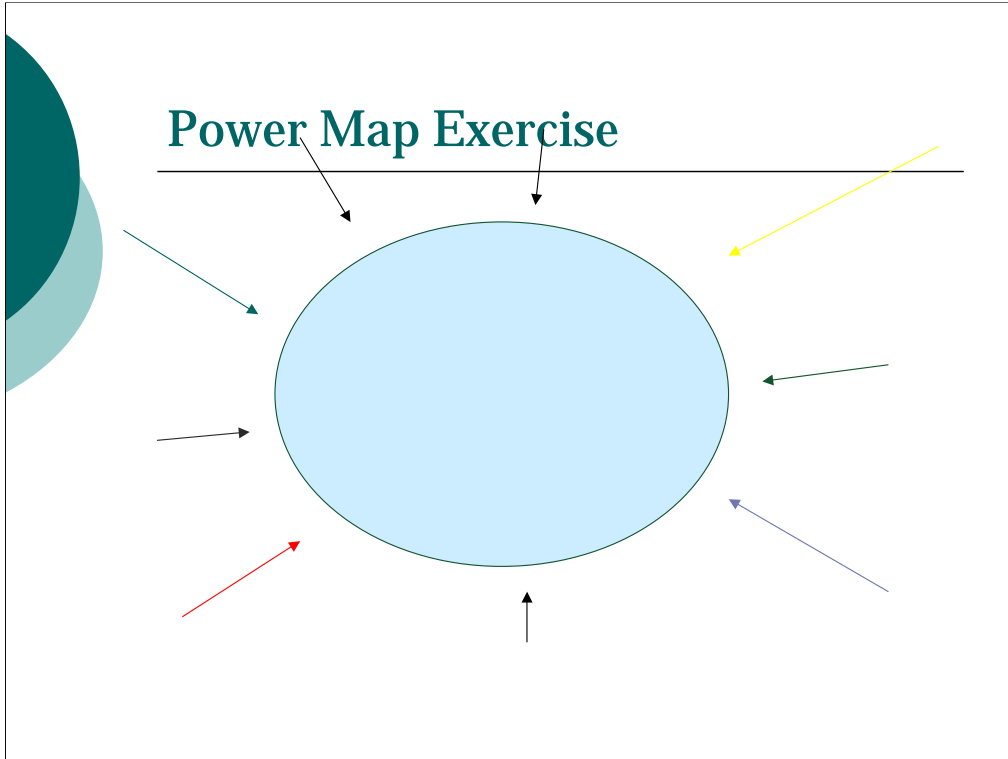
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organizations  
representing:

Exposed workers  
Communities of color  
LGBT  
Low income  
Faith-based  
Students and youth  
Families  
Small businesses

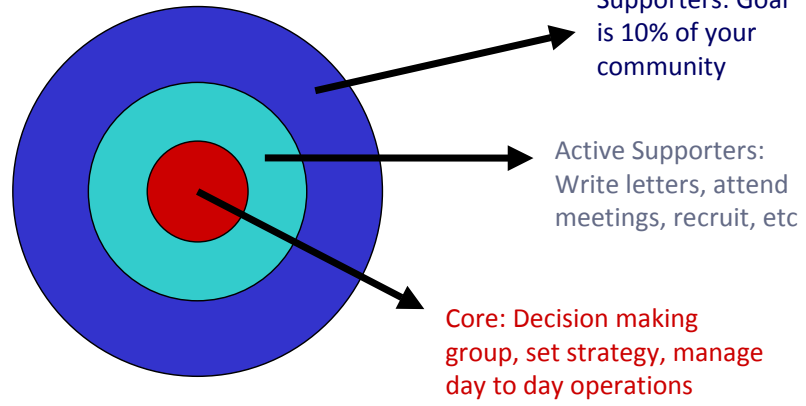
Professional Associations  
Neighborhood Assns  
Political Action Groups  
Environmental Groups  
Opinion Leaders  
Voluntary Partner Orgs





## Building Meaningful Coalitions: *A solid foundation*

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## Be realistic about resources

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- Know what is needed
  - Does your network have *active* partners?
  - Enough funding and in-kind support?
  - Partners willing to step forward?
- Consider worst case scenarios



## **Our Job is to Move People**

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**“If you want to move people, it has to be toward a vision that’s positive for them, that taps important values, that gets them something that they desire, and it has to be presented in a compelling way that they feel inspired to follow.”**

**--Martin Luther King, Jr.**



## The Good News...

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- Many states have faced similar challenges with preemption, but eventually found success.
- There is bi-partisan voter support for smokefree air and local control.
- CT ***will*** eventually strengthen its smokefree protections and restore local control.



## First Next Steps!

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- 1. First I will...
- 2. Next..
- 3. And then..



## Advocacy Resources in CT

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Joni Czajkowski  
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American Heart Association  
203.294.0088  
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Relations and Advocacy  
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MATCH Coalition  
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(860) 221-8888

Kevin O'Flaherty  
Campaign for Tobacco-Free Kids Northeast Regional Director  
646-919-0469 [kevin@tfk.org](mailto:kevin@tfk.org) [www.tobaccofreekids.org](http://www.tobaccofreekids.org)

- Materials, including maps and lists
- Daily news clip service
- Model policy language
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for Smokefree Air

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