

Despite recent advances in local smokefree laws, hospitality workers across the state still at risk.



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Secondhand smoke has been classified by the Environmental Protection Agency as a Group A carcinogen, known to cause cancer in humans. ^[1]

On January 1, 2007, all Louisiana workplaces and restaurants became 100% smokefree by state law. This law also fully restored local control, providing local governments the ability to expand smokefree protections in their communities for areas not covered by the state law, such as in bars and casinos.

Preemption Status:

Not Preempted

State law does not preempt local governments from adopting smokefree air laws. Preemption refers to situations in which a law passed by a higher level of government takes precedence over a law passed by a lower one. In such cases, preemptive state laws set a ceiling, rather than a . oor, and do not allow local authorities to enact strong local laws.



Health Rankings Annual Report," ranking 50th out of 50 for aw also fully ng local band r communities

• Approximately 70% of the state's casino workers are not protected .

62.3% of Americans enjoy comprehensive smokefree

protections in all public places and workplaces, including

population is protected by this type of smokefree law. [2]

restaurants and bars. In contrast, in Louisiana only 32.8% of the

Louisiana is 1 of 10 "Most Challenged" states based on health

outcomes according to the United Health Foundation's "America's

• 98,000 Louisianans currently under the age of 18 are projected to die of tobacco related disease. [4]

• Healthcare costs attributed to tobacco use in Louisiana amount to \$1.9 billion annually. [5]

• Despite challenges, encouraging trends and developing strategies can help close the gaps in protections.

Progress in reducing secondhand smoke exposure among U.S. nonsmokers has stalled since 2011.

58 million Americans



are sum exposed to secondhand smoke, including 2 in 5 children.¹

-Centers for Disease **Control and Prevention** (CDC) Morbidity and Mortality Weekly Report, December 6, 2018 "Exposure to Secondhand Smoke Among Nonsmokers—United States, 1988–2014"

sta. are exposed to secondhand smoke

Current landscape of Smokefree Protections

Source: ANR Foundation U.S. Tobacco Control Laws Database[®]

100% Smokefree Workplace, Restaurant, and Bar Laws, as of July 2022 [2]



Louisiana is trending in the right direction. Since 2012, a significant number of municipalities have passed local ordinances to include all workplaces, restaurants, bars, and gaming

facilities. New Orleans and Baton Rouge/East Baton Rouge Parish (a consolidated governing body) are two of the largest population centers to include provisions for smokefree gaming. Baton Rouge/East Baton Rouge Parish implemented its law on June 1, 2018, and the percentage of the Louisiana population protected by a smokefree law increased to 27.8%. Notably, the percentage of the African American population protected in the state increased from 27.5% to 41.3%, significantly increasing the protection of this community. Baton Rouge is the second city in the state to include

Percentage of Businesses Required to be Smokefree, by Community, as of July 2022 [2]

Community	Workplaces (%)	Restaurants (%)	Bars (%)
Abbeville, LA	100	100	100
Alexandria, LA	100	100	100
Athens, LA	100	100	100
Baton Rouge/East Baton Rouge Parish, LA	100	100	100
Bogalusa, LA	100	100	100
Boyce, LA	100	100	100
Calcasieu Parish, LA	100	100	0
Cheneyville, LA	100	100	100
Colfax, LA	100	100	100
Cullen, LA	100	100	100
Fenton, LA	100	100	100
Gibsland, LA	100	0	0
Glenmora, LA	100	100	100
Grambling, LA	100	0	0
Hammond, LA	100	100	100
Haynesville, LA	100	100	100
Lafayette Parish, LA	100	100	100
Lafayette, LA	100	0	0
Lake Charles, LA	100	100	0
Lecompte, LA	100	100	100
Mandeville, LA	100	0	0
McNary, LA	100	100	100
Monroe, LA	100	100	100
Natchez I A	100	100	100

casinos in the smokefree law, setting a precedent for other municipalities in the region.

A total of 29 Louisiana communities have 100% smokefree workplaces, restaurant and/or bar laws in effect. Of those, 22 cover all three provisions and # cover workplaces, restaurants, bars and casinos.

Who is Left Behind?

Only 31 of the 303 cities in Louisiana have adopted a 100% smokefree workplace, restaurant, and bar law to extend the partial protections provided by the 2007 statewide smokefree law. As a result, over 70% of Louisiana's residents are still exposed to secondhand smoke in their workplace. There are **211,000** hospitality workers in Louisiana. Louisiana's gaming industry continues to grow and employs more than 24,821 individuals statewide. (Source: Louisiana Workforce Commission. 2021) There are also 20 casinos located in 10 Louisiana cities employing 19,707 people [7]. Additionally, there are 15 riverboat casinos, 1 land-based casino, 4 racetracks, and more than 1500 video poker outlets throughout the state. Of these, in riverboat casinos, 8,569 people are minorities and 7,872 are women. [8] Together, these gaming establishments employ approximately 20,000 people. More than half are minorities and/or women. (Source: Louisiana Gaming Control Board Annual Report 2021.)

Only New Orleans', Baton Rouge's, and Shreveport's employees work in smokefree casinos, leaving more than two-thirds of the state's gaming workforce exposed to secondhand smoke. Considering Louisiana has one of the nation's highest poverty rates, highest uninsured rates, and unemployment above the national average, the urgency for improving the social determinants of health – including healthy workplaces – is more important than ever.

Those most likely to be exposed to secondhand smoke work in the hospitality industry and are more likely to identify as a racial minority.





Poor Health Outcomes and high costs

Tobacco use is the leading preventable cause of death in the United States. More than 480,000 people die from smoking or exposure to secondhand smoke each year. [4]

Louisiana's adult smoking rate is down to 18%, but is still alarmingly above the national average of 12.5%. (Sources: 01/2022 BRFSS).Tobacco exacts a high toll in Louisiana: **7,210 Louisianans die each year** of tobacco-related illness. At current trends, 98,000 kids now under the age of 18 in Louisiana are projected to die prematurely from tobacco-related illness. [4]

Beyond secondhand smoke exposure, nonsmokers exposed to thirdhand smoke in a casino are at an ever higher risk than those in a thirdhand smokepolluted home. [9] Further, hospitality workers and children are susceptible to thirdhand smoke exposure, as the particles cling to hair, clothing and cars. Young children are particularly vulnerable, because they can ingest tobacco residue by putting their hands in their mouths after touching contaminated surfaces. [10]



Annual health care costs in the state directly caused by tobacco use are \$1.9 billion (\$803 million of which are Medicaid expenditures).[5]

Secondhand smoke exposure causes heart disease, stroke, and lung cancer among adults, as well as respiratory disease, ear infections, sudden infant death syndrome, more severe and frequent asthma attacks, and slowed lung growth in children. [4,11]

Smokefree laws help to reduce adult smoking prevalence and prevent youth and young adult smoking initiation. [4,11]





New Potential Challenge: Secondhand Marijuana Smoke

The Louisiana legislature legalized medical marijuana in 2015. In 2022, smokable forms of raw marijuana became legal for patients with a medical marijuana card in Louisiana. This is a major concern in a state with a weak statewide smokefree that still allows smoking in bars, casinos, and many other workplaces. Secondhand marijuana smoke is a health hazard for nonsmokers.

Just like secondhand tobacco smoke, marijuana smoke is a potent source of PM 2.5 fine particulate matter. Marijuana secondhand smoke impacts cardiovascular function; it contains thousands of chemicals and at least 33 carcinogens.

Public health advocates are fighting for health equity, and this requires an investment of time and money.

Change doesn't happen overnight, and partners must be committed to building relationships, identifying needs, and investing in activities and resources that will close the gaps. Collaborative efforts in Louisiana have a track record of including and mobilizing community-based partners who represent those individuals left unprotected by the current state law. Indeed, these community-based partners are key to achieving success. Funds for tobacco prevention, education, training, and cessation resources are necessary to better address disparities in smoking and exposure to secondhand smoke. The cost of prevention would be significantly less than the \$1.22 billion currently being spent to address annual tobacco-use related health care costs in Louisiana, thus representing a savings to the state. [5]



Casinos, race tracks and other gaming establishments are workplaces as well as public places and should also be smokefree. There are at least 200 gaming establishments in **Louisiana**, and only **12 are 100% smokefree**. In 2020, the City of **Shreveport** enacted a smokefree indoor air law that will extend smokefree protections to the city's bars and large casino workforce. The law is scheduled to take effect August 2021. In response the COVID-19 pandemic, the **Jena Band of Choctaw Indians** implemented a smokefree indoor air policy for Jena Choctaw Pines Casino, a sovereign gaming venue. See the ANR Foundation Smokefree Casinos and Gaming Property Directory for Louisiana.

First of its kind study demonstrates that casino visitors, even current smokers, desire smokefree spaces.

"When smoking is allowed in indoor areas of casinos, millions of nonsmoking casino visitors and hundreds of thousands of employees can be involuntarily exposed to secondhand smoke and related toxicants. [12]"

—O. ce on Smoking and Health, Centers for Disease Control and Prevention

A recent study found that **75% of U.S. adults who** visit casinos favor smokefree casinos.

No prior studies have exclusively assessed adult attitudes toward smokefree casinos in the United States.

This study found very high favorability among those age >64 (81.6 %), college educated (81.7%), and higher income (79.1/80.8%). **Smokers made up 13% of the sample, and, of those smokers, nearly half (45%) supported smokefree casinos.** [12]



Smoking and vaping, along with exposure to secondhand smoke and aerosols, negatively impact the respiratory system and may cause a person's immune system to not function properly, known as being immunocompromised. Research demonstrates that current and former smokers of any age are at higher risk of severe illness from coronavirus disease (COVID-19) in part due to compromised immune and/or respiratory systems. Smoking leads to cardiovascular disease as well as respiratory illnesses including bronchitis, asthma, Chronic Obstructive Pulmonary Disease (COPD), and lung cancer as a result of exposure to particulate matter, toxins, and carcinogens into their lungs. Secondhand tobacco and marijuana smoke and aerosol contain many of the same toxins, carcinogens, and particulate matter that lead to respiratory and cardiovascular diseases.

Removing face coverings to smoke or vape indoors undermines the proven benefit of face coverings and increases the risk of transmitting or inhaling COVID-19 via infectious respiratory droplets, uncovered coughs, and increased touching of faces. Preventing exposure to secondhand smoke and e-cigarette aerosol or vape by adopting a smokefree policy with no smoking or vaping indoors, and moving smoking or vaping to socially distanced outdoor areas away from entrances could help mitigate worker and public exposure to carcinogens and toxins, as well as COVID-19.

Just as social distancing and handwashing help prevent the spread of disease, eliminating secondhand smoke is critical to prevent acute and chronic diseases, and saves lives by reducing the risk of heart disease, stroke, respiratory diseases, and lung cancer by up to 30% at a population wide level.

Strategies to Close Gaps & Increase Health Equity







Include E-cigarettes in Smokefree Laws







Focus on smokefree policies: Other competing issues can distract from and delay work on smokefree policies. Smokefree laws have immediate and long-term health and economic benefits, and they are worth the investment of time and effort to protect everyone from exposure to a known human carcinogen. [4]

Let local lead the way: Since Louisiana municipalities have the authority to adopt local laws, communities should focus on passing strong local laws covering all workplaces, including bars and gambling facilities. Local control and increasing civic engagement is at the heart of our broader goal of educating the public about the health effects caused by secondhand smoke and changing attitudes regarding smoking in ways that harm other people.

Plan for a statewide smokefree law: Plan for a statewide smokefree law: The Louisiana Legislature last considered a statewide smokefree workplace law in the 2018 legislative session. Now that a large number of cities in the state are 100% smokefree, including three major municipalities that have casinos, the state is primed to move toward strengthening smokefree provisions at the state level. The casino industry will likely be a strong opponent; however, there is strong public support for going smokefree. Education of key stakeholders, including policy makers, casino management, and others in the business community, is critical to build understanding and to increase the political will for going smokefree so that all Louisianans can breathe clean, healthy, smokefree air.

Electronic cigarettes (e-cigarettes), marijuana, and hookah should be included in smokefree laws: Smokefree laws should also prohibit the use of e-cigarettes, marijuana, and hookah to prevent secondhand smoke exposure to the toxins, carcinogens, fine particles, and volatile organic compounds that have been found to compromise respiratory and cardiovascular health. [13,14] Thirteen of the 22 strong smokefree laws in Louisiana include strong restrictions on ecigarettes. [2]

Beware of opposition from cannabis/marijuana proponents: The Louisiana legislature legalized medical marijuana in 2015, but dispensaries will not open until 2019. States that legalize medical marijuana typically go on to legalize recreational, adult use marijuana after a few years. Marijuana smoke is also a form of indoor air pollution and a hazard to nonsmokers' health. In order for indoor workplaces and public spaces to truly be safe and healthy environments, tobacco and marijuana smoke, along with secondhand e-cigarette aerosol/vapor should be prohibited. **Invest in the future by increasing funding and resources:** In order to address the gaps in smokefree coverage, a great deal of effort and financial resources will be needed to explain the ongoing disparities in smokefree protections and the benefits of 100% smokefree environments, as well as to counter misinformation about the ability of ventilation systems to protect people from secondhand smoke exposure.

Thwart preemptive efforts: In an effort to curtail the growing success of local laws throughout the state, the gaming industry has expressed its intentions to push preemptive legislation at the state capitol. Preemptive laws typically contain a few very weak provisions and prevent further progress at the local level where stronger laws are more likely to pass.



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The American Nonsmokers' Rights Foundation is dedicated to improving community health and increasing health equity by ensuring that everyone is protected by a 100% smokefree law. We provide training, technical assistance, and tobacco policy surveillance data for civic engagement to improve community health.

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