

Disparities in Secondhand Smoke Exposure:

Using TUS in a “non-ATS” state
to Build Support for Evidence Based Policy

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Goal: Eliminate Exposure to Secondhand Smoke

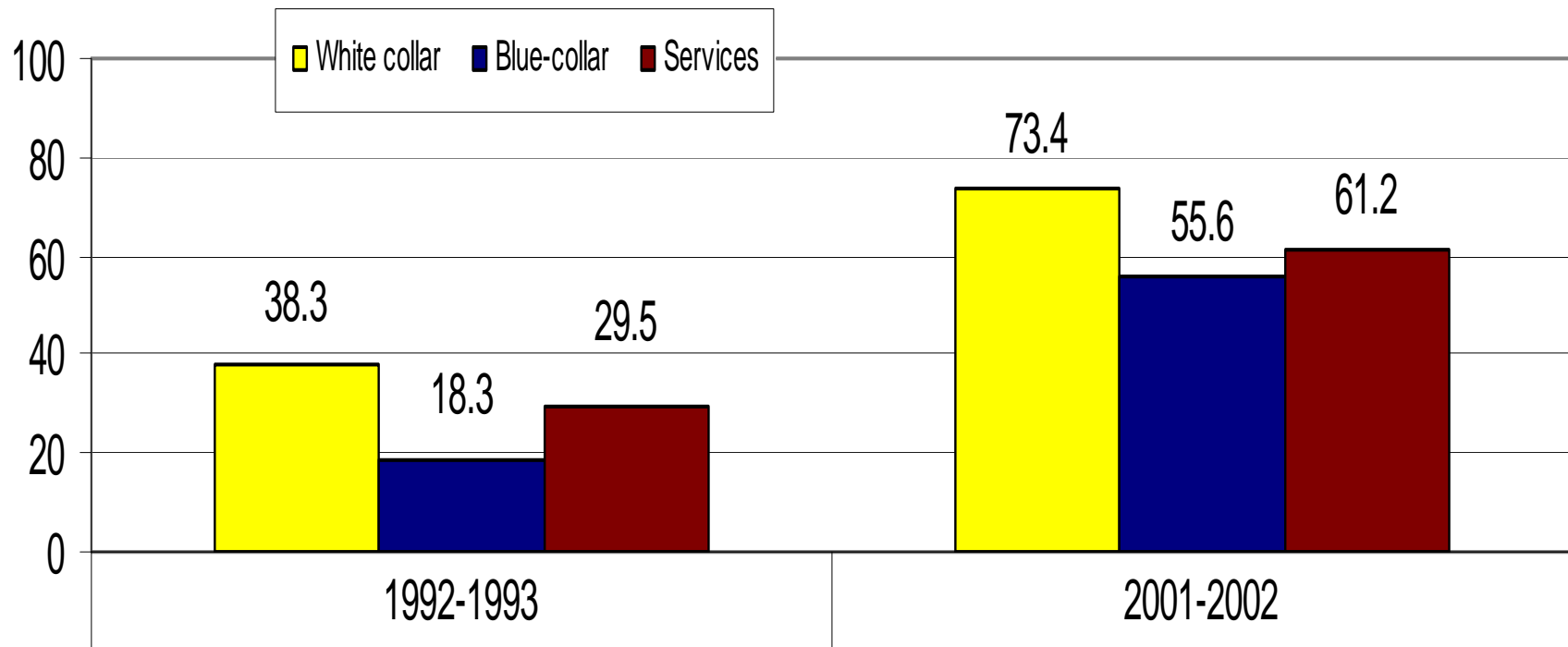
NC's 2010 Policy Objective:

***“Make all NC workplaces and public
places 100% smokefree”***

Barriers

- Dirty Air Law (1993)
- Preemption (1993)
- Limits to Board of Health authority due to lawsuits and Court of Appeals decision
- Labor is not organized; few empowered champions for blue collar and service workers
- “Nanny factor”
- customer choice
- Private Property Rights

Trends in Smoke-free policies in North Carolina by Type of Workers



White collar	38.3	73.4
Blue-collar	18.3	55.6
Services	29.5	61.2

TUS Data shows that Disparities Exist



- [Protecting Workers from Secondhand Smoke in North Carolina](#)

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This article helps by:

- Demonstrating secondhand smoke policy as a worker health issue and not just a matter of customer choice
- Helps provide the basis for promoting smokefree policies not only as a preventive health measure, but also as a possible savings in health care costs for workers with employee health insurance.
- Gaining support from groups that focus on disparities.

Favorable Factors

- Sound science – SGR Report and new data on impact on heart attacks
- Strong Public support in NC
- Strong Legislative champions
- Strong Advocacy group – NC Alliance for Health
- Strong State Health Director

Next Steps

- Short session 2008
- Stand on Sound science
- Argue that it is government's role to intervene
- Focus on concerns regarding spiraling health care costs
- Retort “private property rights”

States' Needs for TUS

- Generate a standard set of data for all state programs
- Create a Rapid response protocol and system where states can ask for critical data needs with a short and opportunistic turnaround related to evidence based practice!
- Work with NCI, CDC and TCN to develop criteria about what is priority.
- For example,
 - NC DPH requests data prior to January 30, 2008 to show what proportion of workers exposed to SHS at work are NOT covered by health insurance, In order to argue that this burden is the state's burden, effectively countering the "private property rights" argument.
 - Potential impact: If NC passes a strong smokefree law in 2008 it will open doors for other states to do the same.

For Further information:

- See full article at:

<http://www.ncmedicaljournal.com/archives.shtml>

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- Or contact:

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