

~ PACT Notes ~

An update for members of the Pennsylvania Alliance to Control Tobacco

August 2009

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Tobacco control in the news

The following news clippings, unless otherwise noted, are from Tobacco BBS' Tobacco News Daily and distributed via tobacco.org (www.tobacco.org). Occasionally, the clippings will be accompanied by a news alert that one of the attached stories might warrant further action in Pennsylvania. Also, a note might be used to provide an informational introduction to a story. For more information contact Jennifer Kulaga at jkulaga@lunginfo.org.

Tobacco BBS is a free resource center focusing on tobacco and smoking issues. It features tobacco news, information, assistance for smokers trying to quit, alerts on tobacco control issues, and open consideration of all aspects of the spectrum of issues concerning tobacco, nicotine, cigarettes and cigars. Credit: ©1996 Gene Borio, Tobacco BBS (212-982-4645). Webpage: www.tobacco.org.

(NOTE: The enclosed news articles do not necessarily reflect the views of PACT. The stories are merely provided as a service to keep members informed on what's happening with clean indoor air within tobacco control.)

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Tobacco control issues in Pennsylvania

Sands doubles smoking areas at casino: Pennsylvania Clean Air Act permits increase

Allentown (PA) Morning Call
August 24, 2009

As of today, Sands Casino Resort Bethlehem is doubling the area where people can smoke on the casino floor.

Sands officials announced this morning that they have increased the designated smoking areas from 25 percent to nearly 50 percent of the gaming floor, as allowed by the Pennsylvania Clean Air Act of 2008.

Under the act, which bans smoking in most public places, casinos were permitted to have smoking on 25 percent of the casino floor, but could increase that to 50 percent if the casino could show that machines in the smoking section were busier than those in the non-smoking section.

Today is the first day Sands is eligible, under the law, to increase the smoking area.

"Sands Bethlehem increased its smoking areas as a result of high utilization and demand from guests," according to a written release by Sands spokeswoman Laura Kelly.

"The casino, which features a state-of-the-art air filtration system originally designed to handle smoking on 100 percent of the floor, will continue to feature smoke-free zones on 50 percent of the gaming floor."

She said the casino's restaurants -- Emeril's Chop House, St. James Gate Irish Pub and Carvery, Cobalt Café and The Market Gourmet Express -- remain smoke-free.

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New smoking policy in full effect on campus

The Tartan (Carnegie Mellon University)

August 25, 2009

Smokers coming back to campus may be greeted with more than a hello from University Police if they are caught smoking outside one of the designated areas; they could be given a \$25 fine for smoking or for littering their cigarette butts.

New and returning students have seen the signs scattered around the University Center's Merson Courtyard, near the Cut, and other places on campus that warn of the consequences of smoking in a non-designated area. These signs are the manifestations of the changes in the university smoking policy that came about as part of the Healthy Campus 2010 program.

Healthy Campus 2010 is an initiative that examined potential strategies to improve the physical and emotional health of our campus community. It not only addressed tobacco use on campus but also discussed ways to create incentives for positive health behaviors and looked into options for healthy dining on campus.

"The [Healthy Campus 2010] Task Force examined the Carnegie Mellon environment and culture, the resources that currently exist, and the extent to which these resources meet the community's needs," stated Kelley Shell, a health promotion specialist at the university.

The changes to the smoking policy, which are now being fully enforced, are a product of the Healthy Campus 2010 initiative. After the designated smoking areas were announced to the campus community, a grace period was enacted where students caught smoking outside of the areas would be warned and told to extinguish their cigarettes, but not given any fine. The grace period, however, has now expired, and the final and permanent phase of the program has begun, in which students can expect to be fined if they are caught smoking in a non-designated area.

"While we do not anticipate having to rely on the use of fines, they are intended to deter people from smoking outside designated areas, as well as littering cigarette butts," Shell stated.

Not all students share Shell's belief that the fines will be able to keep violators from smoking outside of the designated areas.

"I don't think the fines will really stop me from smoking. I'm still going to smoke on my way to class; I'm just going to hope that I don't get caught," said Simona Saracco, a junior materials science and engineering major.

In a statement sent out by Anita Barkin, the director of Student Health Services, and Madelyn Miller, director of Environmental Health and Safety, when the policy change was approved last November, they said, "While we realize that the new policy may inconvenience some smokers, it will help to make the campus a healthier place, and we hope it will encourage some smokers to quit."

Along with the implementation of fines, the university is enacting other measures to help those who wish to stop smoking. Shell explained that Student Health Services offers a free support program as well as discounted nicotine replacement therapies for any student, staff, or faculty member interested in quitting smoking. In addition, the university is partnering with Mercy Behavioral Health to offer free group cessation programs on campus. An employee program will begin on Aug. 21, and one for students is in the process of being planned as well.

Anyone interested in more information about the smoking policy can either visit www.cmu.edu/smokinginfo or send an e-mail with any questions to smoking-policy@andrew.cmu.edu. Those who would like to learn more about the smoking cessation program, or those who would like a friendly way to direct smokers to smoke only in the designated areas by picking up a supply of reminder cards, can e-mail Shell at kshell@andrew.cmu.edu.

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Smoke-free proposals in the U.S.

Smoking in the military: An old habit dies hard

TENNESSEAN.COM

August 16, 2009

Gen. Douglas MacArthur had his signature corncob pipe. Soldiers got cigarettes in their C-rations during World War II. Even today, America's war on tobacco seems to have largely bypassed the military.

Now a proposal to make the forces smoke-free is drawing strong reactions from troops who have served in Iraq and Afghanistan, even though the Pentagon itself says any ban is a long way off.

The troops' fears — and, in some cases, hopes — were triggered by a study commissioned by the Pentagon and the Veterans Affairs Department that recommends moving toward a tobacco-free military, perhaps in about 20 years.

“Your nerves get all rattled and you need something to calm you down,” said Staff Sgt. Jerry Benson of San Bernadino, California, with the 5th Stryker Brigade in southern Afghanistan.

Benson, a tall, thin redhead with a buzz cut, said his first attempt to quit smoking was foiled by stress from a roadside bombing in Iraq.

Defense Secretary Robert Gates seems to agree.

“He knows that the situation they are confronting is stressful enough as it is,” said his press secretary, Geoff Morrell. “I don't think he is interested in adding to the stress levels by taking away one of the few outlets they may have to relieve stress.”

He said Gates is not planning any ban, but is reviewing the study by the Institute of Medicine, which provides independent advice to policymakers, health professionals and the public, to see if steps can be taken toward having a smoke-free force some day.

U.S. military personnel and veterans interviewed by The Associated Press had strong opinions about life in the military without cigarettes, cigars and chewing tobacco.

Some said it would cut medical costs and make the force healthier, while eliminating smoking breaks would increase productivity. Others said it would dampen morale and reduce recruitment to the all-volunteer military.

Nearly all, however, said it was impractical and probably would never happen.

“It's an outrage,” said Staff Sgt. Joe Dunn, 32. “I've been smoking for about 15 years and being forced to stop — not on my own terms — is something I'd have a hard time dealing with.”

Dunn, of Gastonia, North Carolina, spoke during a cigarette break at the dusty Forward Operating Base Falcon south of Baghdad.

“I'm a fairly high-strung individual to start with,” Dunn said. “If I were forced to quit, I'd probably be unbearable.”

While smoking has declined in the U.S. civilian population, it remains high in the military despite various measures such as designating smoking areas.

In 2005, a third of the active-duty military smoked compared with a fifth of the adult U.S. population, the Institute of Medicine study said. Tobacco use in the military declined overall from 1980 to 2005, but is now reflecting the effects of

the Iraq and Afghanistan wars.

Smoking rates among military personnel returning from both war zones may be 50 percent higher than among those not deployed, according to the study, which argues that the military has not tackled the problem as a priority.

To the troops who say smoking relaxes them, Ellen Hahn, an expert, explains that their stress is also a result of tobacco, because nicotine acts as both a stimulant and a depressant.

“For people who are in stressful situations much like the military, if you haven’t had a cigarette in two hours, you’re going to feel stressed out and irritable, and it’s mostly because of the withdrawal,” said Hahn, a professor who runs the University of Kentucky’s Tobacco Policy Research Program.

“Nicotine is one of those drugs that both stimulates you and calms you down when you need it,” she said.

So smoking does ease stress, but also creates it, she said.

Smokers are easy to find at the Falcon base, perched on railings in the designated smoking areas, using soft-drink cans for ashtrays.

“Smoking has been proven bad for your health, but it’s a choice. It’s not illegal. Drunk driving is illegal,” said Air Force Staff Sgt. Alexander Roehm, 23, of Cincinnati, Ohio, who smokes 10 to 20 cigarettes a day and also chews tobacco.

“Look at the movies. Smoking is one of the things you always see with Vietnam and World War II films. In World War II, smoking was a big thing. My grandpa used to say that cigarettes were one of the big things that they were real happy to get. It was just something to do.”

Inside a smoke-free building at the base, however, Maj. Mathew Fitch, engineer for the 30th Heavy Brigade Combat Team, was cheering the prospect of a smoking ban.

The 40-year-old nonsmoker said cigarettes not only impair a soldier’s health, but burn up productivity because every hour or two, somebody goes out and rounds up buddies for a puff.

“A smoke break can be a 20-minute affair,” said Fitch, of Charlotte, North Carolina.

At Kandahar Air Field in southern Afghanistan, cigarette butts litter a courtyard.

Army Staff Sgt. Bob Flores, with the 5th Stryker Brigade from Fort Lewis, Washington, said he and his wife have agreed to quit together — pushed by their 8-year-old son — but only when he gets home.

“It’s not the best time now — the stress of being here, and her being home alone,” he said.

Tobacco costs the Defense Department more than \$1.6 billion a year in medical care and lost work days, while the Veterans Administration has spent more than \$5 billion to treat veterans for tobacco-related illnesses. Both have been working for years to reduce smoking among soldiers and vets.

The Pentagon laid out a plan in 1999 to reduce smoking rates by 5 percent a year by 2001 — and couldn’t achieve the goal. Meanwhile, military commissaries still sell cigarettes at heavily discounted prices.

The military has, however, imposed some restrictions.

Tobacco use is barred during basic training. Several service branches also prohibit indulging while walking in uniform. Indoor smoking areas must have air extractors.

Even some tobacco consumers think a complete ban would be good.

“I think it would help healthwise,” said Army Spc. Zack Lindsay, 24, of Raleigh, North Carolina, who serves in Headquarters Company of the 30th Heavy Brigade Combat Team in Iraq. He said he stopped smoking, but still chews tobacco. “I stopped one for the other.”

Army Spc. John Beall, 20, of Charlotte, N.C., who serves in Headquarters Company of the 30th Heavy Brigade Combat Team in Iraq, said he tends to light up when he’s bored and when others are smoking around him. He said he wouldn’t oppose a ban.

Ricky Wilkerson, 49, of Lebanon, Tennessee, is in a stop-smoking program at the Veterans Administration hospital in Nashville. His family farmed tobacco in Kentucky, but he didn’t start smoking until he was a 21-year-old Army infantryman stationed at the Panama Canal. He thinks the military should ban smoking, yet admits there were times when he was happy to have a smoke to relax.

“You’re in the maneuvers and you’ve worked hard all day and they said ‘Stop, light ‘em if you got ‘em.’ Everybody fired up a cigarette,” Wilkerson said.

During his deployment in Iraq in 2005, Spc. Will Pike, 25, of Boston said his 3rd Infantry Division combat engineer company tried to ban smoking. He quit for five months, then started puffing again.

“Everybody went completely crazy,” said Pike. “If you take it away from us entirely, you’re going to have some very angry soldiers.”

Jeanne O’Brien, 39, from Monterey, California, said smoking eased the stress of driving trucks in 16-hour convoys through Afghan terrain littered with roadside bombs.

Smoking helped her stay focused “instead of having my nerves take control,” she said.

Injured in Afghanistan and retired, the former paratrooper says smoking helps with her post-traumatic stress disorder. “A lot of times instead of hitting somebody, I sit down and have a cigarette.”

A nicotine hit may feel good, but scientists say its brain action probably makes post-traumatic stress worse in the long run.

A study last year by the RAND Corp. research organization estimated nearly 20 percent of military personnel returning from Iraq and Afghanistan, or about 300,000 people, have symptoms of post-traumatic stress disorder or major depression. Clinics treat both the disorder and addictions at the same time, but few do, it said.

However, getting the entire military to go cold turkey is wishful thinking, said John Fink, 43, of Dickson, Tennessee.

“They’ve been talking about this for over 10 years now. Nothing has ever happened,” said Fink, a Navy veteran and employee at the VA hospital in Nashville. A ban would drive people out of the military, he said, and “the military can’t afford to lose anyone.”

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Smoke-free proposals: International and Canada

India third on global ‘female smoking list’

The Times of India
August 27, 2009

Indian women are among the worst in the world when it comes to smoking. According to the latest Tobacco Atlas, the

country ranks third in the top 20 female smoking populations across the globe.

Only the US with 2.3 crore female smokers and China with 1.3 crore women smokers are worse off than India in this chart. However, as far as percentage of women smoking is concerned, it is below 20% for India.

Among India's immediate neighbours, only Pakistan figures in this infamous list, but right at the bottom at 20th with around 30 lakh female smokers.

Published by the American Cancer Society and World Lung Foundation, the Atlas makes another serious observation -- female smokers in India die an average eight years earlier than their non-smoking peers.

According to the Atlas, about 250 million women in the world are daily smokers -- 22% being from high resource countries and 9% from low and middle resource countries.

Realising the potential of this growing market, the Atlas said the tobacco industry has been marketing cigarettes to women using seductive but false images of vitality, emancipation, slimness, sophistication and sexual allure.

Reacting to the report, Dr P C Gupta, director of Healis Sekhsaria Institute of Public Health, told TOI that this finding had very serious implications for India. "Even though the percentage prevalence of women smoking in India isn't that high, the number is huge. In addition to all the harm that tobacco causes to men, women are additionally exposed in a special way because of their reproductive function."

Dr Gupta added that tobacco consumption reduced birth weight of the foetus, decreased their gestational age leading to premature babies, increased the risk of still births and heightened chances of anaemia among adult pregnant women.

"The government isn't focusing on anti-tobacco campaign that specially targets women. Smoking is definitely increasing in young college going women showing that the tobacco industry is targeting them very strongly," Dr Gupta added.

The Atlas said tobacco killed some six million people each year -- more than a third of whom will die from cancer -- and drained \$500 billion annually from global economies.

As 25% of smokers die and many more become ill during their most productive years, income loss devastates families and communities. In 2010, 72% of those who die from tobacco related illnesses would be in low- and middle-income countries. By 2030, 83% of these deaths will occur in low and middle-income countries.

Unveiled at the Global Cancer Summit on Wednesday, the Atlas said 2.1 million cancer deaths per year will be attributable to tobacco by 2015. "The Atlas is crucial to helping advocates in every nation get the knowledge they need to combat the most preventable global health epidemic," said John R Seffrin, CEO of American Cancer Society.

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Other tobacco control issues

Parents important in teens' smoking risk: study

Reuters

August 26, 2009

Friends and parents have a strong influence over whether teenagers move from experimenting with cigarettes to becoming full-fledged smokers -- but so do parents, a new study finds.

The study, which followed 270 teenagers who had become occasional smokers before high school, found that 58 percent made it a daily habit by 12th grade.

But the likelihood of that happening depended partly on friends and parents, according to a study published in the journal *Pediatrics*.

“We found that parents play an important role in preventing teens’ smoking escalation from experimental to daily smoking,” Dr. Min Jung Kim, of the University of Washington in Seattle, said.

When friends or parents smoked, teens were more likely to become daily smokers. On the other hand, they were less likely to become habitual smokers when their parents had a “positive family management” style -- monitoring their comings and goings, doling out reasonable punishments for rule-breaking and rewarding good behavior.

Teens whose parents kept tabs on them and were non-smokers themselves had a 31 percent chance of becoming daily smokers. The odds were 71 percent among teenagers with parents who smoked and were more lax in managing their kids’ behavior.

Kim said there are ways parents can make a difference.

If they smoke, they should quit. In addition, parents should aim for “effective supervision and appropriate punishment or rewards for children’s behavior,” she said.

It includes knowing your children’s friends and laying out rules for their behavior, including smoking.

“Parents need to make sure they establish clear guidelines in their families about smoking and discuss these with school-aged children,” Kim said.

Previous studies have been consistent in finding that friends’ smoking habits are the best predictor of whether a teenager will become a regular smoker. Some researchers have argued that parents have relatively little influence once their kids hit adolescence.

Kim said parents seem to have an important role in counteracting peer pressure.

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PACT is funded through a grant from the Pennsylvania Department of Health and in part through the American Lung Association of Pennsylvania, American Heart Association Delaware-Pennsylvania Affiliate, and the American Cancer Society Pennsylvania Division.