## **Keep Louisville Smoke-Free and Healthy**

At the Center for Health Equity, our 15 years of experience and research have demonstrated the choices people make are shaped by the choices people have. Increasing opportunities to use tobacco products increases exposure to toxic smoke, one of the leading causes of death in Kentucky.

Over the past decade, Louisville has decided over and over again to update our smoke-free ordinance in such a way that prioritizes air quality and the health of our residents. This has had long-term health benefits for our residents. Opposing an ordinance that counteracts common-sense, evidence-based protection will keep the health of our residents and environment at the forefront.

Louisville's comprehensive smoke-free law was passed in 2008 which made us a national leader in protecting our residents. We updated the ordinance in 2017 to prohibit electronic smoking devices and hookah inside public indoor places and worksites. The amended Ordinance also protects minors from entering hookah and vape shops, provides greater protections to people living in nursing homes and staying in other facilities, and defines the distance requirement for smoking outside of building entrances. Currently, there is only one registered tobacco wholesale business where indoor tobacco smoking is allowed. Electronic smoking retailers and hookah lounges can only allow smoking for non-tobacco products, and notably, there are only 3 registered hookah lounges that allow smoking indoors. A cigar bar exemption would undo the current comprehensive law that functionally allows for no indoor tobacco smoking.



Comprehensive smoke-free policy works to improve the health of our residents.

a. Since enacted in 2008, Louisville has seen decreases in the percentage of residents who smoke, decreases in new cancer cases and decreases in cancer deaths.

	Before the Ordinance (2007)	After the Ordinance
Current Adult Smoking Prevalence	25%	21.7% (2019)
Age-Adjusted Cancer Incidence	541.2 per 100,000	500.8 per 100,000 (2018)
Age-Adjusted Cancer Mortality	209.0 per 100,000	168.5 per 100,000 (2017)

Data from the Centers for Disease Control Behavioral Risk Factor Surveillance System and Kentucky Cancer Registry.



Cigars are bad for your health whether consumed directly or exposed to second-hand smoke.

- a. Cigars can have more nicotine than a pack of cigarettes and have higher levels of toxins.
- b. 34% of cancer deaths in Kentucky are attributed to smoking.



Ventilation systems cannot sufficiently remove smoke from the air to make it safe to breathe.

• According the American Society of Heating, Refrigerating and Air-Conditioning Engineers, "the only means to avoid health effects and eliminate indoor environmental tobacco smoke exposure is to ban all smoking activity inside and near buildings."



- According to a U.S. Surgeon General report, "separating smokers from nonsmokers, cleaning the
  air, and ventilating buildings cannot eliminate exposures of nonsmokers to secondhand smoke."
   Even separately enclosed, separately exhausted, negative-pressure smoking rooms do not keep
  secondhand smoke from spilling into adjacent areas.
- In Missoula, Montana, kids lost their Children's Museum due to a private cigar bar located in the same building. Secondhand smoke infiltrated the Children's museum, exposing workers and hundreds of children to secondhand and third-hand smoke. The museum was forced to shut down in order to protect its patrons.



There is no proven economic benefit from cigar bars, but there are proven healthcare costs:

- a. Smoke-filled environments have been proven to have a negative economic impact. Absenteeism, lost productivity, increased maintenance and insurance costs will negatively affect the bottom line for businesses and governments.
- b. A smoke-filled cigar bar will not improve tourism. As noted by J.D. Power and Associates, 87% of guests prefer a smoke-free hospitality environment.
- c. Very few cigar bars pay living wages. The average wage for a cigar bar employee is \$24,000. Poverty wages for a family of four in Louisville, KY is around \$25,000.
- d. Granting a cigar bar exemption could encourage **costly lawsuits as it threatens equal protections** for all workers.
- e. Health care costs related to smoking in Kentucky is \$1.92 billion and costs the tax-payer an average of \$839 per household in smoking-caused state and federal expenditures.



Adding a cigar bar exemption is a well-known strategy from the tobacco industry to undermine smoke-free laws, which have been a proven and effective public health strategy for over two decades.

- a. This past year, several cities and states have seen similar policies advance and be rejected. This includes Montana, North Dakota as recently as March 2021. States and cities recognize the importance of protecting a decades-long successful strategy of protecting the public by keeping indoor spaces smoke-free.
- b. During COVID, many tourism-based industries like casinos have actually reopened smokefree given the negative relationship between smoking and COVID-19 outcomes. In Kentucky, this includes Keeneland, Churchill Downs, and Red Mile Gaming and Racing.



Cigar bars are likely to have an inequitable impact on smoking initiation and consumption. While the perception is that cigars are consumed by older men, the use of flavorings in some cigar brands and the fact that they are commonly sold as a single stick make them especially appealing to college students, particularly women and students of color.

