

The Surgeon General's reported in 2006¹ and again 2010² that there is no risk-free level of exposure to secondhand smoke (SHS). Smoke-free laws and policies provide immediate and long-term health benefits for smokers and non-smokers alike and are good for businesses and workers.

Smoke-free Laws Do NOT:

- **Hurt Restaurant or Bar Revenue**
- **Reduce Tourism**

Smoke-free Laws Do:

- **Save Businesses Money**
- **Protect Lives**

FACT: Smoke-free Laws Do NOT Harm Restaurants

Numerous studies examining the impact of state and local smoke-free restaurant laws have found that these laws do not hurt, and may even benefit, restaurant sales.

- Studies examining the impact of local smoke-free ordinances in California, New York, Massachusetts, Texas, Arizona, Indiana, Wisconsin, Florida, Maryland, Kentucky, Kansas, and North Carolina found that smoke-free laws had either positive or no effects on restaurant revenues and other economic indicators.^{3, 4, 5, 6, 7, 8, 9, 10, 11, 12, 13, 14, 15, 16, 17, 18, 19, 20}
 - For example, one year after the passage of a strong smoke-free ordinance went into effect in New York City, the city's bars and restaurants experienced an 8.7 percent increase in tax receipts – an increase of approximately \$1.4 million – and the rate of restaurant openings remained unchanged.²¹
 - As another example, a 2012 study of restaurants and bars in 11 Missouri cities found that eight of the cities experienced increases in sales after local smoke-free ordinance implementation and the other three did not experience any decline.²²
- Smoke-free ordinances may actually increase restaurant resale values. Smoke-free restaurants in California and Utah had a 16 percent (or \$15,300) median increase in sale price compared to restaurants in communities where smoking was permitted.²³
- More people are demanding smoke-free establishments. In Michigan, a 2011 poll found that 74 percent of likely voters support the state's smoke-free law, compared with 66 percent that supported the law before it went into effect. In addition, 93 percent of respondents indicated that they go to restaurants and bars just as or more often than they did before the law took effect.²⁴
- The Bowling Proprietors' Association of America (BPAA) found that an increasing number of bowling centers are adopting voluntary smoke-free policies. The BPAA also found that fewer bowlers smoke, and the top reason why people choose not to bowl is because of the smoky environment. Moreover, nonsmoking bowlers outspent smokers, making nonsmokers a lucrative customer base.²⁵

FACT: Smoke-free Laws Do NOT Harm Bars

Numerous studies have also found that smoke-free bar laws do not hurt, and may even benefit, bar sales.

- Research examining the impact of smoke-free ordinances in communities in California, Florida, Kentucky, Massachusetts, Maryland, Minnesota, New York, Oregon, and Texas showed that these laws had no negative effect on bar sales or service workers' employment.^{26, 27, 28, 29, 30, 31, 32, 33, 34, 35, 36} In fact, bar businesses are no more sensitive to changes in smoking behavior than other hospitality businesses.³⁷
- A 2007 study found that smoke-free ordinances had no significant effect on the resale value and profitability of bars, contrary to the 30 percent decrease in value purported by the tobacco industry.³⁸ These data were supported by studies in nine states including Texas and Florida, all of which reported no effect or an increase in bar revenue and employment following passage of smoke-free laws.^{39, 40, 41}

- Public support for smoke-free bars is strong. Surveys conducted in Montana and Nebraska found that a vast majority respondents planned to visit bars, restaurants, bowling allies and other service industries equally or more frequently than they did prior to the implementation of smoke-free laws in their communities.^{42, 43} A 2010 Ohio poll also found that nearly three in four voters believed that bar employees should be protected from SHS in their workplaces.⁴⁴

FACT: Smoke-Free Laws Do NOT Reduce Tourism

Several studies have shown that smoke-free policies do not affect tourism or hotel/motel revenues.^{45, 46, 47, 48, 49}

- One study found that smoke-free laws were associated with increased hotel revenues in four localities: Los Angeles, CA, New York City, NY, Mesa, AZ, and the state of Utah.⁵⁰
- Another study found that the number of tourists that visited California and New York increased after the implementation of these states' smoke-free policies. Additionally, the study looked at seven other localities and observed no significant changes in tourism following the implementation of smoke-free policies.⁵¹
- Approximately one year after Florida's smoke-free law took effect, researchers found no significant change in the number of visits to recreational sites across the state. Moreover, the number of people employed in the leisure and hospitality industry increased almost 2 percent.⁵²

FACT: Smoke-Free Laws SAVE Businesses Money

The costs of second hand smoke (SHS) are significant. The 2014 Surgeon General's report estimated the economic value of lost wages, fringe benefits, and services associated with premature mortality due to SHS exposure to be \$5.7 billion per year nationwide. This estimate excludes the losses due to morbidity and far underestimates the total economic impact of SHS.⁵³

- Smoking employees have significantly higher absenteeism and injury, accident, and disciplinary rates than their nonsmoking colleagues.^{54, 55, 56, 57, 58, 59}
- Some business owners have been found liable in lawsuits filed by sick employees seeking damages related to smoking in the workplace.^{60, 61, 62, 63, 64}
- Business owners that allow smoking in the workplace increase their costs of doing business: Employers pay increased health, life, and fire insurance premiums, make higher workers' compensation payments, incur higher worker absenteeism, and settle for lower work productivity.^{65, 66, 67, 68, 69, 70, 71, 72} Other costs associated with smoking in the workplace are increased housekeeping and maintenance costs.
- One year after New York City's smoke-free law took effect, smoking among the city's adults declined 11 percent, resulting in 140,000 fewer smokers, and preventing 45,000 premature deaths. These declines in smoking and related disease saved over \$500 million annually in tobacco-related health care costs, part of which would have been incurred by local businesses.^{73, 74}

Conclusion

Existing research strongly indicates that smoke-free laws are good for businesses, for workers, and for customers. Research published in leading scientific journals has shown consistently and conclusively that smoke-free laws have no adverse effects on the hospitality industry,^{75, 76} and actually benefit businesses. The 2006 Surgeon General's Report furthers this point, concluding that "evidence from peer-reviewed studies shows that smoke-free policies and regulations do not have an adverse economic impact on the hospitality industry."⁷⁷ No one should have to choose between a job and good health.

ACS CAN strongly supports legislative and regulatory measures that limit smoking in public places and work environments. Furthermore, ACS CAN opposes preemptive state legislation that restricts local authorities from regulating smoke-free air and urges policymakers and community leaders to support smoke-free efforts, which reduce and prevent disease, suffering and death from tobacco.

References

- ¹ U.S. Department of Health and Human Services (HHS) (2006). *The Health Consequences of Involuntary Exposure to Tobacco Smoke: A Report of the Surgeon General*. 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.
- ² HHS (2010). *How Tobacco Smoke Causes Disease: The Biology and Behavioral Basis for Smoking-Attributable Disease: A Report of the Surgeon General*. Atlanta, GA: 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.
- ³ Glantz, S.A. and L.R.A. Smith (1997). The Effect of Ordinances Requiring Smoke-Free Restaurants and Bars on Revenues: A Follow-Up. *American Journal of Public Health* (87)10: 1687- 1692.
- ⁴ Glantz, S.A. and L.R.A. Smith (1994). The Effect of Ordinances Requiring Smoke-Free Restaurants on Restaurant Sales. *American Journal of Public Health* (84)7: 1081-1085.
- ⁵ Hyland, A., K.M. Cummings, and E. Nauenberg (1999). Analysis of Taxable Sales Receipts: Was New York City's Smoke-Free Air Act Bad for Restaurant Business? *Journal of Public Health Management Practice* 5(1): 14-21.
- ⁶ Hyland, A. and K.M. Cummings (1999). Restaurateur Reports of the Economic Impact of the New York City Smoke-Free Air Act. *Journal of Public Health Management Practice* 5(1): 37-42.
- ⁷ Bartosch, W.J. and G.C. Pope (2002). Economic Effect of Restaurant Smoking Restrictions on Restaurant Business in Massachusetts, 1992-1998. *Tobacco Control* 11(Suppl II): ii38-ii42.
- ⁸ Bartosch, W.J. and G.C. Pope (1999). The Economic Effect of Smoke-Free Restaurant Policies on Restaurant Business in Massachusetts. *Journal of Public Health Management Practice* 5(1): 53-62.
- ⁹ Connolly, G.N., et al. (2005). *Evaluation of the Massachusetts Smoke-Free Workplace Law: A Preliminary Report*. Paper presented to the Harvard School of Public Health Tobacco Control Working Group, Boston, MA.
- ¹⁰ Huang, P., et al. (1995). Assessment of the Impact of a 100% Smoke-Free Ordinance on Restaurant Sales—West Lake Hills, Texas, 1992-1994. *Morbidity and Mortality Weekly Report* 44(19): 370-372.
- ¹¹ Hayslett, J.A. and P. Huang (2000). Impact of Clean Indoor Air Ordinances on Restaurant Revenues in Four Texas Cities: Arlington, Austin, Plano and Wichita Falls 1987-1999. Texas Department of Health, Bureau of Disease, Injury and Tobacco Prevention.
- ¹² Centers for Disease Control and Prevention (CDC) (2004). Impact of a Smoking Ban on Restaurant and Bar Revenues—El Paso, Texas, 2002. *Morbidity and Mortality Weekly Report* 53(7): 150-152.
- ¹³ Sciacca, J.P. and M.I. Ratliff (1998). Prohibiting Smoking in Restaurants: Effects on Restaurant Sales. *American Journal of Health Promotion* 12(3): 176-184.
- ¹⁴ Styring, III, W. (2001). A Study of the Fort Wayne Restaurant Smoking Ban: Has It Impacted the Restaurant Business? Indianapolis: Hudson Institute.
- ¹⁵ Dresser, L. (1999). *Clearing the Air: the Effect of Smokefree Ordinances on Restaurant Revenues in Dane County*. Madison: Tobacco-Free Wisconsin Coalition.
- ¹⁶ Dai, Chifeng, et al. (2004). *The Economic Impact of Florida's Smoke-Free Workplace Law*. Gainesville, Florida: University of Florida, Warrington College of Business Administration, Bureau of Economic and Business Research.
- ¹⁷ Evans, W.N. and Andrew Hyland (2004). [The Impact of the Montgomery County Smoke-Free Restaurant Ordinance on Restaurant Sales and Employment]. Unpublished raw data.
- ¹⁸ Hahn, E.J., et al. (2005). *Economic Impact of Lexington's Smoke-Free Law: A Progress Report*. Lexington, Kentucky: University of Kentucky, College of Nursing and Gatton College of Business and Economics.
- ¹⁹ Tauras JA and Chaloupka FJ. *The Economic Impact of the 2008 Kansas City Missouri Smoke-Free Air Ordinance*. Health Care Foundation of Greater Kansas City. December 2010. Available at <http://www.healthcare4kc.org/uploadedFiles/Resources/exec%20summary1-15rev.pdf>. Accessed June 6, 2011.
- ²⁰ Goldstein, A.O. and Sobel, R.A. (1998). Environmental Tobacco Smoke Regulations Have Not Hurt Restaurant Sales in North Carolina. *North Carolina Medical Journal*. (59)5: 284-287.
- ²¹ New York City Department of Finance, New York City Department of Health and Mental Hygiene, New York City Department of Small Business Services, and New York City Economic Development Corporation (2004). *The State of Smoke-Free New York City: A One Year Review*.
- ²² Kayani, et al. Economic Effect of Smoke-free Ordinances on 11 Missouri Cities. *Preventing Chronic Disease* 2012: 9: 110277.
- ²³ Alamar, B.C. and S.A. Glantz (2004). Smoke-Free Ordinances Increase Restaurant Profit and Value. *Contemporary Economic Policy* 22(4): 520-525.
- ²⁴ American Cancer Society on behalf of the Michigan Campaign for Smokefree Air (2011). Reports Show Public Opinion, Compliance High for Michigan's Smokefree Air Law. Available at http://acsqld.org/communications/ACSGLD_Newsroom/?p=1434. Accessed June 7, 2011.
- ²⁵ Bowling Proprietors Association of America, Inc. (2005). 2005 BPAA Smoking Ban and Restriction Study. Accessed online 9 February 2006 at <http://www.bpaa.com/SmokingBanLegislation/ImpactStudy/>.
- ²⁶ Glantz, S.A. (2000). Effect of Smokefree Bar Law on Bar Revenues in California. *Tobacco Control* 9(Spring): 111-112.
- ²⁷ Bartosch, W.J. and G.C. Pope (1999).
- ²⁸ Connolly, G.N., et al. (2005).
- ²⁹ Dresser, J, Boles S, Lichtenstein E, and Strycker L (1999). Multiple Impacts of a Bar Smoking Prohibition Ordinance in Corvallis, Oregon. Eugene: Pacifica Research Institute.
- ³⁰ CDC (2004).
- ³¹ New York City Department of Finance, et al. (2004).
- ³² Dai, C., et al. (2004).
- ³³ Evans, W.N. and A. Hyland (2004).
- ³⁴ Hahn EJ, et al. (2005).

- ³⁵ Glantz, S.A. and L.R.A. Smith (1997).
- ³⁶ Klein, E.G., Forster, J.L., Erickson, D.J., et al (2009). Does the Type of CIA Policy Significantly Affect Bar and Restaurant Employment in Minnesota Cities? *Prevention Science*; 10(2).
- ³⁷ Dunham, J. and M.L. Marlow (2000). Smoking Laws and Their Differential Effects on Restaurants, Bars, and Tavers. *Contemporary Economic Policy* (18)3: 326-333.
- ³⁸ Alamar, B., and S.A. Glantz (2007). Effect of Smoke-Free Laws on Bar Value and Profits. *Am J Public Health.*; 97(8): 1400–1402.
- ³⁹ Loomis BR, Shafer PR, van Hasselt M (2013). The Economic Impact of Smoke-Free Laws on Restaurants and Bars in 9 States. *Prev Chronic Dis* 2013;10:120327.
- ⁴⁰ CDC (2004).
- ⁴¹ Dai, C., et al. (2004).
- ⁴² Montana Tobacco Use Prevention Program (2009). Tobacco Surveillance Report: High Support for the Montana Clean Indoor Air Act. Available at http://tobaccofree.mt.gov/publications/documents/CIAAsupport_Oct09_FINAL.pdf. Accessed June 6, 2011.
- ⁴³ Nebraska Department of Health and Human Services (2010). Six Months of Smoke-Free Air: The Nebraska Clean Indoor Air Act. Available at http://smokefree.ne.gov/SixMonthReport_SFAirLaw.pdf. Accessed June 6, 2011.
- ⁴⁴ Fallon Research on behalf of SmokeFreeOhio (2010). SmokeFreeOhio Survey Results.
- ⁴⁵ Glantz, S.A. and A. Charlesworth (1999). Tourism and Hotel Revenues Before and After Passage of Smoke-Free Restaurant Ordinances. *Journal of the American Medical Association* 281(20): 1911-1918.
- ⁴⁶ Sciacca, J.P. and M.I. Ratliff (1998). Prohibiting Smoking in Restaurants: Effects on Restaurant Sales. *American Journal of Health Promotion* 12(3): 176-184.
- ⁴⁷ Hyland, A., K.M. Cummings, and E. Nauenberg (1999). Analysis of Taxable Sales Receipts: Was New York City's Smoke-Free Air Act Bad for Restaurant Business? *Journal of Public Health Management Practice* 5(1): 14-21.
- ⁴⁸ Dai, C. et al. (2004).
- ⁴⁹ Hahn, E.J., et al. (2005).
- ⁵⁰ Glantz, S.A. and A. Charlesworth (1999).
- ⁵¹ Glantz, S.A. and A. Charlesworth (1999).
- ⁵² Dai C, et al. (2004).
- ⁵³ U.S. Department of Health and Human Services (HHS). (2014). *The Health Consequences of Smoking—50 Years of Progress: A report of the Surgeon General*. Atlanta, GA: U.S. Department of Health and Human Services, Center for Diseases Control and Prevention, National Center for Chronic Disease Prevention and Health Promotion, Office on Smoking and Health. Printed with corrections, January 2014.
- ⁵⁴ Halpern, M.T., Shikar, R., Rentz, A.M., and Khan, Z.M. (2001). Impact of Smoking Status on Workplace Absenteeism and Productivity. *Tobacco Control* 10:233-238.
- ⁵⁵ Ryan, J., Zwerling, C., and Orav, E.D. (1992). *American Journal of Public Health* 82(1): 29-32.
- ⁵⁶ Ryan, J. Zwerling, C., and Jones, M. (1996) Cigarette Smoking at Hire as a Predictor of Employment Outcome. *JOEM* 38(9): 928-933.
- ⁵⁷ Penner, M. and S. Penner (1990). Excess Insured Health Care Costs from Tobacco-Using Employees in a Large Group Plan. *Journal of Occupation Medicine* 32(6): 521-523.
- ⁵⁸ Robbins, A.S., Fonseca, V.P., Chao, S.Y., Coil, G.A., Bell, N.S., and P.J. Amoroso. (2000). Short Term Effects of Cigarette Smoking on Hospitalisation and Associated Lost Workdays in a Young Health Population. *Tobacco Control* 9: 389-396.
- ⁵⁹ HHS (2014).
- ⁶⁰ *Uhbi v. State Compensation Insurance Fund* (CA, 1990).
- ⁶¹ *Magaw v. Middletown Board of Education* (NJ, 1998).
- ⁶² *Shimp v. New Jersey Bell* (NJ, 1976).
- ⁶³ *Smith v. Western Electric Co.* (MO, 1982).
- ⁶⁴ *McCarthy v. Department of Social and Health Services* (WA, 1988).
- ⁶⁵ Kristein, M.M. (1983). How Much Can Business Expect to Profit from Smoking Cessation? *Preventive Medicine*. 12:358-381.
- ⁶⁶ Marion Merrell Dow, Inc. (1991). The Economic Impact of Smoking: In the Workplace; On Cardiovascular Health; On Wound Health and Recovery from Surgery; On Infants and Children; On Pulmonary Health; On Dental and Oral Health. Medical Information Services, Inc.
- ⁶⁷ Musich, S., Napier, D. and D.W. Edington (2001). The Association of Health Risks With Workers' Compensation Costs. *Journal of Occupational and Environmental Medicine* 43(6): 534-541.
- ⁶⁸ Halpern et al. (2001).
- ⁶⁹ Ryan et al. (1992).
- ⁷⁰ Ryan et al. (1996).
- ⁷¹ Penner & Penner (1990).
- ⁷² HHS (2014).
- ⁷³ New York City Department of Health and Mental Hygiene (2004). New York City's Smoking Rate Declines Rapidly from 2002 to 2003, the Most Significant One-Year Drop Ever Recorded. Available online at <http://www.nyc.gov/html/doh.html/public/press04/pr052-0512.html>.
- ⁷⁴ Frieden, T.R. et al. (2005).
- ⁷⁵ Scollo, M., A. Lal, Hyland, A. and S. Glantz (2003). Review of the Quality of Studies on the Economic Effects of Smoke-Free Policies on the Hospitality Industry. *Tobacco Control* 12: 13-20.
- ⁷⁶ Scollo, M. and A. Lal (2004). Summary of Studies Assessing the Economic Impact of Smoke-free Policies in the Hospitality Industry. Melbourne: VicHealth Centre for Tobacco Control. <http://www.vctc.org.au/tc-res/Hospitalitysummary.pdf>.
- ⁷⁷ HHS (2006).