

† AMERICAN LUNG ASSOCIATION®

OF THE MOUNTAIN PACIFIC

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February 21, 2013

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To: Sen. Floyd Prozanski, Chair & Sen. Betsy Close, Vice-Chair
Members of the Senate Judiciary Committee

From: Colleen Hermann-Franzen, Advocacy & Communications Manager
Re: **SB 444, Relating to smoking in a motor vehicle when minor present**

On behalf of the American Lung Association of the Mountain Pacific, serving Oregon, we would like to share our support of Senate Bill 444. We thank Senator Steiner Hayward for her leadership and helping to further our mission of saving lives by improving lung health and preventing lung disease. We hope the committee shares our goal of protecting the health of all children in Oregon from secondhand smoke and will work to move this bill forward.

Children, especially the youngest who are strapped into car seats, have little control over their environment when adults are smoking in a car. Unfortunately it is an all-too-common experience. Included in the written testimony you have in front of you, Kris Williams from Crook County shares her experience with being raised in a family of smokers. She vividly remembers being stuck between her grandparents in the front seat of the station wagon with her grandfather unintentionally dropping hot ashes on her legs on his way to the ashtray.

Infants and young children are especially vulnerable to the toxins in secondhand smoke, because their bodies are developing. **Eighty percent of lung development occurs after a baby is born.**ⁱ Children exposed to secondhand smoke are at an increased risk for sudden infant death syndrome, acute respiratory infections, ear problems, and asthma.

The small, enclosed space of a car makes secondhand smoke even more dangerous. **Secondhand smoke in motor vehicles can be up to 27 times more concentrated than in a smoker's home.**ⁱⁱ By the time it takes to smoke half a cigarette, the air quality in a parked car can reach up to *10 times the hazardous level* on the EPA's Air Quality Index.ⁱⁱⁱ For those of you who haven't seen this chart, on a hazardous level day, the EPA issues warnings to everyone, including healthy individuals, to stay inside or risk serious health effects. Whether the car is moving or parked, the windows opened or cracked, the air quality level remains in the hazardous zone, with smoke often pooling in the back seat.

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I would also like to highlight one additional piece of written testimony. Christina, a young professional from Portland, grew up with a dad who would often smoke in the family car. She remembers he would roll the window down about an inch, thinking it would pull the smoke out of the car. Unfortunately for Christina, this wasn't the case and she would always smell (and be exposed to) the smoke. Christina feels strongly that this bill would help educate parents, like her dad, about the dangers of secondhand smoke to kids when traveling in a vehicle.

Lastly, other motor vehicle laws designed to protect the health of children include seatbelt requirements and proper use of infant and child car seats. **After legislators passed Oregon's child car seat legislation, drivers increased their proper usage from 30 percent to over 80 percent.**^{iv}

Let's work to protect all our kids from secondhand smoke in vehicles and pass Senate Bill 444 to clear the air.

Thank you for the opportunity to provide comments.

With Highest Regards,
Colleen Hermann-Franzen

ⁱ Dietert RR, et al. [Workshop to identify critical windows of exposure for children's health: immune and respiratory systems work group summary](#). Environmental Health Perspectives, June 2000; 108(Suppl 3):483-90.

ⁱⁱ California Environmental Protection Agency, California Air Resources Board, Proposed Identification of Environmental Tobacco Smoke as a Toxic Air Contaminant (2005), available at: http://www.arb.ca.gov/toxics/ets/vehicle_ets.htm (visited 9/19/11).

ⁱⁱⁱ Video: *Smoke-free Cars with Kids: A Scientific Demonstration of Secondhand Smoke Exposure*, produced by the California Tobacco Control Program, 2008, available at: <http://vimeo.com/1513382> (visited 2/20/13)

^{iv} Interventions for promoting booster seat use in four to eight year olds travelling in motor vehicles (Review), available at: http://www.thecochranelibrary.com/userfiles/ccoch/file/Safety_on_the_road/CD004334.pdf (visited 2/20/13)

Air Quality Index (AQI) - A Guide to Air Quality and Your Health

The AQI is an index for reporting daily air quality. It tells you how clean or polluted your air is, and what associated health effects might be a concern for you. Think of the AQI as a yardstick that runs from 0 to 500. The higher the AQI value, the greater the level of air pollution and the greater the health concern. For example, an AQI value of 50 represents good air quality with little potential to affect public health, while an AQI value over 300 represents hazardous air quality.

| Air Quality Index (AQI) Values | Levels of Health Concern | Colors |
|---------------------------------------|--------------------------------------|--|
| <i>When the AQI is in this range:</i> | <i>..air quality conditions are:</i> | <i>...as symbolized by this color:</i> |
| 0-50 | Good | Green |
| 51-100 | Moderate | Yellow |
| 101-150 | Unhealthy for Sensitive Groups | Orange |
| 151 to 200 | Unhealthy | Red |
| 201 to 300 | Very Unhealthy | Purple |
| 301 to 500 | Hazardous | Maroon |

Each category corresponds to a different level of health concern. The six levels of health concern and what they mean are:

- "Good" AQI is 0 - 50. Air quality is considered satisfactory, and air pollution poses little or no risk.
- "Moderate" AQI is 51 - 100. Air quality is acceptable; however, for some pollutants there may be a moderate health concern for a very small number of people. For example, people who are unusually sensitive to ozone may experience respiratory symptoms.
- "Unhealthy for Sensitive Groups" AQI is 101 - 150. Although general public is not likely to be affected at this AQI range, people with lung disease, older adults and children are at a greater risk from exposure to ozone, whereas persons with heart and lung disease, older adults and children are at greater risk from the presence of particles in the air. .
- "Unhealthy" AQI is 151 - 200. Everyone may begin to experience some adverse health effects, and members of the sensitive groups may experience more serious effects. .
- "Very Unhealthy" AQI is 201 - 300. This would trigger a health alert signifying that everyone may experience more serious health effects.
- "Hazardous" AQI greater than 300. This would trigger a health warnings of emergency conditions. The entire population is more likely to be affected.

AQI colors

EPA has assigned a specific color to each AQI category to make it easier for people to understand quickly whether air pollution is reaching unhealthy levels in their communities. For example, the color orange means that conditions are "unhealthy for sensitive groups," while red means that conditions may be "unhealthy for everyone," and so on.

| Air Quality Index Levels of Health Concern | Numerical Value | Meaning |
|--|-----------------|--|
| Good | 0 to 50 | Air quality is considered satisfactory, and air pollution poses little or no risk |
| Moderate | 51 to 100 | Air quality is acceptable; however, for some pollutants there may be a moderate health concern for a very small number of people who are unusually sensitive to air pollution. |
| Unhealthy for Sensitive Groups | 101 to 150 | Members of sensitive groups may experience health effects. The general public is not likely to be affected. |
| Unhealthy | 151 to 200 | Everyone may begin to experience health effects; members of sensitive groups may experience more serious health effects. |
| Very Unhealthy | 201 to 300 | Health warnings of emergency conditions. The entire population is more likely to be affected. |
| Hazardous | 301 to 500 | Health alert: everyone may experience more serious health effects |



American
Stroke
Association



OREGON
MEDICAL
ASSOCIATION



TOFCO
TOBACCO-FREE COALITION OF OREGON, INC.



SMOKE FREE CARS, SMOKE FREE KIDS

PROTECT OUR KIDS BY CLEARING THE AIR

SB 444

- Due to the dangers of second hand smoke (SHS) for children, SB 444 seeks to ban smoking in cars with minors present.
- The law will only be enforced as a secondary violation, which means the police officer can only enforce it if the car is pulled over for a separate traffic violation.
- Smoking in a car with a minor present would become a Class D traffic violation for a first offense (max fine of \$250), a Class C traffic violation for a second offense (max fine of \$500), and a Class B violation for a third offense or more (max fine of \$1,000).

The Unique Vulnerability of Children and Secondhand Smoke

- The US Surgeon General has concluded SHS can cause serious health problems and there is no safe level of exposure to secondhand tobacco smoke. The 2006 Surgeon General's report concludes that: "Children exposed to SHS are at an increased risk for sudden infant death syndrome (SIDS), acute respiratory infections, ear problems, and more severe asthma. Smoking by parents causes respiratory symptoms and slows lung growth in their children."¹
- Exposure to SHS can cause asthma in children who have not previously shown any symptoms. In addition, children who have asthma feel worse symptoms and have an increased number of attacks.²
- Asthma is the leading chronic illness among children and the #1 cause of school absenteeism due to chronic illness. It accounts for 10.5 million lost school days annually.³
- One study has shown the concentration of air nicotine levels to be higher in cars than in bars or restaurants that allow smoking. SHS in motor vehicles can be up to 27 times more concentrated than in a smoker's home.⁴
- By the time it takes to smoke half a cigarette, the air quality in a parked car can reach up to 10 times the hazardous level on the EPA's Air Quality Index. Whether the car is moving or parked, the windows are opened or cracked, the air quality level remains in the hazardous zone, with smoke often pooling in the back seat.

Smoke Free Legislation Nationwide

- Four States (AK, CA, LA, ME), Puerto Rico and Guam have already passed smoke free cars with minors legislation, with an additional 9 counties or cities passing similar smoke free cars with kids laws. Recently this past month, Utah's State House passed similar legislation.
- Oregon and 16 other states already ban smoking in cars transporting foster children.⁵
- California Department of Public Health conducted a study on the effects of California's new smoke free cars law and the impact on preventing smoking in cars. They found a reduction in SHS exposure in a car among youth was observed in 2008 compared to the previous survey during 2006-2007. The study in 2007-2008 found that one-fifth of students (22.7%) reported being in a car with someone smoking cigarettes in the previous 7 days. This percentage was significantly decreased from the study in 2005-2006, which reported 26.1% of students in cars with smokers.⁶

¹ U.S. Department of Health and Human Services. The Health Consequences of Involuntary Exposure to Tobacco Smoke: A Report of the Surgeon General: Secondhand Smoke: What It Means To You. [accessed 2/11/13].

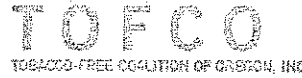
² Environmental Protection Agency. Health Effects of Exposure to Secondhand Smoke: Smoke-free Homes and Cars Program. <http://www.epa.gov/smokefree/healtheffects.html>. [accessed 2/4/13].

³ American Lung Association in Colorado. Asthma. <http://www.lungusa.org/associations/states/colorado/asthma/>. [accessed 2/4/13].

⁴ California Environmental Protection Agency, California Air Resources Board. Proposed Identification of Environmental Tobacco Smoke as a Toxic Air Contaminant, 2005. http://www.arb.ca.gov/toxics/ets/vehicle_ets.htm

⁵ Global Advisors Smoke Free Policy. Smoke-free Vehicles When Children are Present. [accessed 2/18/13].

⁶ California Department of Public Health. California's New Smoke-Free Car Law with Children.



Cost Savings:

- Approximately 42% of OR children are covered by the Oregon Health Plan (OHP). In 2011 OHP reports they covered approximately 3,568 ER visits for asthma. Reducing exposure to SHS can reduce OHP costs for asthma related care.
- There are 74 instances over the last 10 years (2003-2012) on Oregon Department of Forestry-protected lands when people caused wildfires by throwing cigarettes or cigars from their vehicles. The fires consumed 175 acres and the cost of suppression was \$153,643 (note these are only fires that occurred on ODF lands).



To:

The Honorable Floyd Prozanski
Senate Committee on Judiciary

Subject: SB 444, Creates offense of smoking in a motor vehicle

February 19, 2013

Chairman Prozanski and Members of the Judiciary Committee,

I am a general pediatrician at Oregon Health & Sciences University and the Co-chair of the Oregon Pediatric Society Legislative Committee. I am writing to express Oregon Pediatric Society's **strong support of SB 444**.

Pediatricians in Oregon regularly encounter the health consequences of secondhand smoke. Many children and babies suffer asthma, chronic lung disease, or respiratory infections that are caused or exacerbated by environmental tobacco smoke. Although we advise parents that quitting smoking is the best way to improve their child's health, this is often very difficult for parents to do. As a result we try to limit secondhand smoke exposure so as to keep children as healthy as possible.

As you may be aware, children are particularly vulnerable to toxic secondhand smoke exposure in cars. When we see children in our offices, often the entire exam room reeks of smoke because the child just got out of a smoke-filled car. Secondhand smoke in cars can be up to 27 times more concentrated than in a smoker's home. Children have no choice and no way to leave a car when their parent is smoking in there.

We believe this bill is a common-sense measure that will raise awareness of the hazards of environmental tobacco smoke and encourage parents to make their cars smoke-free. California recently passed smoke-free cars with minors legislation, and the legislation was associated with decreased child smoke exposure in cars. We hope that Oregon will also take this important step to protect the health of our most vulnerable children.

Katharine Zuckerman, MD MPH
Assistant Professor of Pediatrics
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