

Los Angeles County Strengthens Smoke-Free Ordinance

On March 19, 2019, the County of Los Angeles Board of Supervisors passed amendments to strengthen the County's policies on smoke-free environments and to close loopholes where smoking is permitted. The Los Angeles County Department of Public Health provided recommendations to close the gaps of existing County smoke-free ordinances.

What are the Amendments to the County's Smoke-Free Outdoor Area Ordinance?



- An update to the definition of “smoke” and “smoking” to include Electronic Smoking Devices (ESDs) and cannabis.
- Prohibits smoking in all County facilities*, both County-owned and leased facilities including:
 - Within 50 ft of any operable entry, exit or operable window of any building
 - Parking areas of beaches and parks
 - Within any parking lot, parking structure, or parking garage
 - Within 25 ft of any handicap ramp or handicap entrance path
- Prohibits smoking:
 - In County vehicles
 - Within any driving range and eating areas (including outdoor eating areas) of any County golf course
 - Within bus stops of Unincorporated Los Angeles County

*This provision does not apply to County-owned facilities leased from the County until the lease expires and/or terminates

What are the Benefits of Smoke-Free Outdoor Areas?

- According to the U.S. Surgeon General, there is no risk-free level of exposure to secondhand smoke; the only way to fully protect non-smokers is to eliminate smoking in all homes, worksites, and public places.¹
- The primary purpose of smoke-free policies is to protect non-smokers from secondhand smoke. However, smoke-free laws can also motivate and help users quit and prevent initiation of tobacco use.²
- The implementation of smoke-free policies can increase cessation and reduce smoking prevalence among workers and the general population and may reduce smoking initiation among youth.³
- Studies have documented improved health outcomes as a result of smoke-free laws, such as reductions in hospital admissions for heart attacks after the laws took effect.⁴
- More comprehensive smoke-free laws are associated with larger decreases in cardiac, cerebrovascular, and respiratory risk.⁵

[1] U.S. Department of Health and Human Services. (2006). The Health Consequences of Involuntary Exposure to Tobacco Smoke: A Report of the Surgeon General. Retrieved from <https://www.surgeongeneral.gov/library/reports/secondhandsmoke/fullreport.pdf>.

[2] U.S. Department of Health and Human Services. (2006). *The Health Consequences of Involuntary Exposure to Tobacco Smoke: A Report of the Surgeon General: Secondhand Smoke: What It Means To You*. Atlanta: 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] Centers for Disease Control and Prevention (CDC). (2018). Smokefree Policies Reduce Smoking. Retrieved from https://www.cdc.gov/tobacco/data_statistics/fact_sheets/secondhand_smoke/protection/reduce_smoking/index.htm.

[4] Centers for Disease Control and Prevention (CDC). (2018). Smokefree Policies Improve Health. Retrieved from https://www.cdc.gov/tobacco/data_statistics/fact_sheets/secondhand_smoke/protection/improve_health/index.htm.

[5] Tan CE, Glantz SA. (2012). Association Between Smoke-Free Legislation and Hospitalizations for Cardiac, Cerebrovascular, and Respiratory Diseases: A Meta-Analysis. *Circulation* 2012;126:2177-83.