

Good example of
health policy, banning
smoking in all public
area at
pennsylvania...

[Health & Medicine](#), [Addiction](#)



Abstract

This paper proposes that The Clean Indoor Act must be amended to ensure that there are no exceptions and that all public places are tobacco-free. This amendment will help further reduce the effects of secondhand tobacco smoke. Smoking in the public subjects passersby to second hand or passive tobacco smoke. Passive smoking is an act of an individual inhaling in other people's smoke. Second hand smoke has many effects on the health of non-smokers. Therefore, it is vital to safeguard their health. Since this is a statutory law, the changes can only be made by the state's legislature. For that matter, it will be prudent to involve legislators. In addition, the support of the state's department of public health, nurses and medical practitioners will be vital in pushing for this amendment.

The Initiative/Proposal

This paper evaluates the Pennsylvanian law that prohibits smoking in the public places. This law has some exceptions and allows smoking in some public areas. This paper proposes that the law must be amended to ensure that there are no exceptions and that all public places are tobacco-free. This amendment will help further reduce the effects of secondhand tobacco smoke.

The Clean Indoor Act, Act 27, became an official law in June 2008 (ANR, 2014). This law has illegalized smoking in public places or workplace in the state of Pennsylvania (PDH, 2014). The law has listed all areas that are deemed public where smoking has been illegalized. There are some exceptions though. The law does not cover private social function places

controlled by the sponsor, private residences, and at retail or wholesale tobacco shops. In other words, smoking in these areas is allowed.

Additionally, this law has outlined different penalties for parties that do not comply with it (PDH, 2014).

This law was first enacted in 1998; the initial law gave local municipalities the mandate to enact their smoking free laws. The following year, this mandate was cancelled by the legislature. The legislature's measure casted doubt on municipalities' role in the prevention of public smoking. The uncertainty grew bigger than before in 2006 when two courts reached opposing conclusions. In 2008, this law was approved by the legislature and in overrides all other municipality public anti-smoking laws. All non-hospitality workplaces were declared smoke free. Smoking in the areas that are declared as exceptions is still high. In order to reduce the health effects associated with passive smoking, it is vital to remove the current exceptions.

Pros and Cons of this Proposal

Smoking in the public subjects passersby to second hand or passive tobacco smoke. Passive smoking is an act of an individual inhaling in other people's smoke. According to better health, second hand smoke is amongst the top indoor pollutants at home (CDC, 2014). Thus, passive smoking has serious health effects on both passive and active smokers. Children are vulnerable to serious health effects from second hand smoke. In line with this, passive smoking has many undesired health effects (CDC, 2014).

Second hand smoke does not disperse quickly because it is heavy. As a result, the family or those nearby have no choice but to breathe in the

permanently low-lying smoke cloud (Barnoya & Glantz, 2005). Smoke contains compounds such as ammonia, sulphur and formaldehyde. These compounds irritate the eyes, nose, throat and lungs. These compounds are also harmful to people with respiratory conditions such as bronchitis or asthma (Barnoya & Glantz, 2005).

Pregnant women in particular are the major victims of the effects of public smoking. According to better health, pregnant mothers exposed to passive smoking are likely to encounter a miscarriage and still birth or premature birth (Clune, 2013). Infants born under these circumstances might have low birth weight. Passive smoking might also increase sudden unexpected death in infants (SUDI). Pregnant mothers might experience complications during birth. Besides, children are also affected by public smoking. Children are the most affected group with passive smoking (Clune, 2013).

Children who live in a smoking household for the first two years of their life have higher chances of developing different kinds of respiratory illnesses including bronchitis and pneumonia (Cendon et al., 2005). They are also vulnerable to colds and coughs. Children exposed to passive smoking in the home are more likely to develop asthma symptoms and tend to have more asthma attacks leading them to use asthma medication for a longer period. In addition, children exposed to passive smoking have an increased risk of meningococcal disease. Meningococcal disease is a very dangerous disease that can cause death or disability (Cendon et al., 2005).

Public tobacco smoking also has an effect on people who have never smoked. Individuals who have never smoked but live with or around people who smoke are at increased risk of developing tobacco-related diseases and

other health risks. According to better health, passive smoking increases the risk of heart disease (Cendon et al., 2005). There is evidence that people who do not smoke but live in a smoky household are vulnerable to contracting coronary heart diseases than those who live in household where people do not smoke. Second hand smoking makes the blood more 'stick' and likely to clot, thereby increasing the likelihood of limiting health (Cendon et al., 2005).

Passive smoking may result in reduction levels of antioxidant vitamins in the blood (Barnoya & Glantz, 2005). It also affects blood flow through the blood vessels, just like in active smokers. Passive smoking has been found to contribute to the development of stroke, and different types of cancer such as those of the nasal sinus, throat, and breast. It may also cause a loss of lung function, as well as chronic obstructive pulmonary diseases (Barnoya & Glantz, 2005).

Pros

In essence, it is evident that smoking has high health risks. It is unfortunate that non-smokers suffer from tobacco related health illnesses because of the negligence of public smokers. It is therefore a must for the legislators in Pennsylvania to amend The Clean Indoor Act, Act 27, in order to safeguard the health of non-smokers in the public places. The effects of passive smoking will be minimized (Louis, 2014). In addition, such an amendment will impose a greater level of responsibility on public smokers. This will force them to abide by the law, or else face hefty fines.

Cons

This amendment might cause a few setbacks for tobacco smokers. For example, if the amendment is approved, smoking near retail and wholesale tobacco shops will be illegalized. Smokers will only buy tobacco here, but they will not be allowed to smoke. It will mean they look for other designated smoking zones if they have to smoke. This step might affect their businesses. However, the benefits of this amendment are more important than the financial losses that tobacco sellers will incur.

Stakeholders and how their issues will be impacted

There are three main stakeholders that will be affected by this proposal. They include the legislature, the public and tobacco sellers. To begin with, legislators have the mandate to enact laws for the betterment of the lives of their electorate. Therefore, if they pass this law, and that the public's welfare improves, they will have boosted their political careers. In other words, they will garner support from their followers. However, tobacco sellers might not welcome this move and it this step may make them lock horns with their legislators. Tobacco sellers are likely to incur losses providing that smoking near their business premises will have been illegalized. The public on the other hand is the major beneficiaries of this proposal. The safety of the environment will be boosted thus safeguarding their health.

The impact of different values on moving your position/proposal to an item on a health policy agenda

Moving this proposal to an item that touches on health policy will require the involvement of the state's department of public health (USDHHS, 2012). In

essence, this will mean that the proposal will be screened by different statutory and non-statutory bodies. In addition, in order to be approved, it will be important to back-up the proposal with solid scientific evidence. However, this will not be a problem because there are so many studies that have documented the impact of passive smoking. In line with this, it will be necessary to provide supportive data why public smoking including the current areas under exclusion should be banned. Passing an amendment that touches on public safety is not an easy endeavor and this will require support from different circles.

Anticipated statutory, non-statutory and regulatory variables that impact the success of implementing the position/proposal

In order for this amendment to be made, it will be a must for the state's legislature to debate about the issue prior to passing the final verdict. This will begin when one of the legislators will pass a motion requesting for the amendment of the Act in question. He or she will need someone to second the motion prior to being accepted on the floor of the house. This will be followed by debates for and against the intended amendment. The sponsor of the bill will be expected to give solid evidence to back-up their claim. Once the bill has been debated, voting will be conducted to determine its fate. Should the majority vote in favor of the bill, the amendment will be made into law (Berwick, 2004). Conversely, if the majority vote against the bill, it will be disowned (Berwick, 2004). In addition to the role of the legislature, the state's department of health will also be expected to

deliberate on the issue. Again, the motion is likely to succeed if it has back up from the department of public health.

Committees/subcommittees as well as their chairs that will be integral in the consideration of the policy proposal.

Two committees will play a crucial role in the determination of the fate of this proposal. The first committee will occur in the legislature. Prior to introducing an amendment to the bill on the floor of the house, the the sponsor of the bill will have to consult some of his colleagues. He will be expected to seek their support. Here, the major points that are behind the generation of this proposal will be highlighted. Members in support will need to air out their views. Thereafter, the sponsor of the bill will hand in his request to the Clerks. The date for the debate on this matter will be provided.

On that the D-day, the sponsor of the bill will now give his facts, but he will need seconders and supporters of the bill. Another committee will involve the state's department of Public Health (APHA, 2014). The director of public health will be expected to consult his team and give his opinion on the direction of the matter. This opinion will be made public prior to the debate in the house. The other meeting which will be the first one will involve meeting the legislator who will sponsor the bill in the house. Here, he will be briefed on all the details pertaining to the intended changes.

Activities for nursing's involvement in agenda setting, implementation and evaluation related to the position/proposal

Nurses will play a pivotal role in shaping this proposal. On a daily basis, nurses come into contact with many patients that have been affected by passive smoking (ANA, 2014). Therefore, they will play a huge role in drumming support for the passage of this proposal. In order for a law to pass, it must have public approval; the public must see the need of this law. In order to drum up this support, nurses will be encouraged to support this proposal. The nursing leaders from all major nursing institutions will be informed about the proposed changes. They will be requested to inform their nurses about the intended changes. Thereafter, the nursing professionals will air out their opinion through their state leaders. The aim will be to exert pressure on legislators to see the importance of making the aforementioned amendment. Secondly, nurses will play a huge role in educating the public on the intended changes.

Through their daily interaction with patients in the clinic, nurses will be given leaflets to give to patients and other visitors in the hospital. This will help give the public a clear picture of the benefits of this amendment. Secondly, nursing leaders will be influential in educating the legislators on how public smoking contributes to poor health outcomes for both the smoker and the non-smoker nearby. Thirdly, nurses will help track the success of the intended amendment. For example, they will collect data from patients to assess if their case of illness is associated with public smoking. Although nurses do not directly take part in the formation of laws in the legislature,

their voice on important issues is vital. In this case, their opinion on this matter will help shape the direction of the debate on this matter in the house.

Conclusion

This paper has discussed a proposal that seeks to initiate changes on the Pennsylvanian law that prohibits smoking in a public place. Since this is a statutory law, the changes can only be made by the state's legislature. For that matter, it will be prudent to involve legislators. In addition, the support of the state's department of public health, nurses and medical practitioners will be vital in pushing for this amendment. On a daily basis, nurses come into contact with many patients that have been affected by passive smoking. Therefore, they will play a huge role in drumming support for the passage of this proposal. In order for a law to pass, it must have public approval; the public must see the need of this law. Therefore, consultations from different players will be vital. The proposal states that The Clean Indoor Act must be amended to ensure that there are no exceptions and that all public places are tobacco-free. This amendment will help further reduce the effects of secondhand tobacco smoke.

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