Recommendations and findings regarding two interventions to reduce exposure to environmental tobacco smoke (ETS) are provided in this fact sheet. They come from the *Guide to Community Preventive Services* (*Community Guide*) developed by the Task Force on Community Preventive Services (Task Force). With oversight from the Task Force, a team of experts led or supported by *Community Guide* scientists conducted a systematic review to evaluate scientific evidence and provide recommendations to policy makers on these interventions.

**BACKGROUND INFORMATION**

- Tobacco use is the number one cause of preventable death in the United States.\(^1\)
- One out of five deaths or 438,000 deaths each year is due to cigarette smoking.\(^2\)
- From 2000–2004, cigarette smoking was estimated to be responsible for $193 billion in annual health-related economic losses in the United States.\(^3\)
- Cigarette smoking estimates, by age, are as follows: 18–24 years (23.9%), 25–44 years (23.5%), 45–64 years (21.8%), and 65 years or older (10.2%).\(^4\)
- Prevalence of cigarette smoking is highest among American Indians/Alaska Natives (32.4%), followed by African Americans (23.0%), whites (21.9%), Hispanics (15.2%), and Asians [excluding Native Hawaiians and other Pacific Islanders] (10.4%).\(^5\)
- Cigarette smoking estimates are highest for adults with a General Education Development (GED) diploma (46.0%) or 9–11 years of education (35.4%), and lowest for adults with an undergraduate college degree (9.6%) or a graduate college degree (6.6%).\(^6\)
- Exposure to ETS causes approximately 3,000 lung cancer deaths annually. Among infants and children, ETS aggravates asthma, and causes ear and lower respiratory tract infections.

**SUMMARY OF TASK FORCE RECOMMENDATIONS AND FINDINGS**

*Recommended Interventions Based on Strong Evidence*\(^*\)

<table>
<thead>
<tr>
<th>Intervention</th>
<th>Number of Studies that Qualified for Review</th>
<th>Selected Results</th>
<th>Community Guide Resources</th>
</tr>
</thead>
<tbody>
<tr>
<td>Smoking bans and restrictions</td>
<td>10</td>
<td>72% median decrease in environmental measurements of ETS (e.g., nicotine vapor) (4 studies)</td>
<td><a href="http://thecommunityguide.org/tobacco/environmental/smokingbans.html">http://thecommunityguide.org/tobacco/environmental/smokingbans.html</a></td>
</tr>
</tbody>
</table>
*The categories of “strong” and “sufficient” evidence reflect the Task Force’s degree of confidence that an intervention has beneficial effects. They do not directly relate to the expected magnitude of benefits. The categorization is based on several factors, such as: study design, number of studies, and consistency of the effect across studies.

**Interventions with Insufficient Evidence to Determine Effectiveness**

<table>
<thead>
<tr>
<th>Intervention</th>
<th>Number of Studies that Qualified for Review</th>
<th>Selected Results</th>
<th>Community Guide Resources</th>
</tr>
</thead>
<tbody>
<tr>
<td>Community education to reduce exposure to ETS in the home</td>
<td>1</td>
<td>Too few studies qualified for review</td>
<td><a href="http://thecommunityguide.org/tobacco/environmental/communityeducation.html">http://thecommunityguide.org/tobacco/environmental/communityeducation.html</a></td>
</tr>
</tbody>
</table>

**This finding does not mean that the intervention does not work. It means that when the review was conducted, there was not enough research available to determine whether or not the intervention works.**

**Online Resources**

- The Guide to Community Preventive Services: www.thecommunityguide.org
- CDC, Office on Smoking and Health: www.cdc.gov/tobacco
- Partnership for Prevention: www.prevent.org/content/view/141/166

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2 Centers for Disease Control: Smoking and Tobacco Use Website:  
http://www.cdc.gov/tobacco/data_statistics/fact_sheets/health_effects/tobacco_related_mortality/


4 http://www.cdc.gov/tobacco/data_statistics/fact_sheets/adult_data/cig_smoking/index.htm

5 Ibid

6 Ibid