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DOI: 10.1377/hlthaff.2012.1022
HEALTH AFFAIRS 32,
NO. 7 (2013): 1291–1298

ANALYSIS & COMMENTARY

Banning Smoking In Parks And On Beaches: Science, Policy, And The Politics Of Denormalization

ABSTRACT Campaigns to limit tobacco use started in the 1970s and have led to bans on public smoking, which have been extended to parks and beaches. A review of state and local statutes shows that during 1993–2011, smoking was banned in 843 parks and on 150 beaches across the United States. Three justifications for these restrictions have been invoked: the risk of passive smoke to nonsmokers, the pollution caused by cigarette butts, and the long-term risks to children from seeing smoking in public. Our analysis of the evidence for these claims found it far from definitive and in some cases weak. What, then, accounts for the efforts to impose such bans? We conclude that the impetus is the imperative to denormalize smoking as part of a broader public health campaign to reduce tobacco-related illness and death. Although invoking limited evidence may prove effective in the short run, it is hazardous for public health policy makers, for whom public trust is essential.

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In 1939 Norbert Elias published *The Civilizing Process*,[1] a history of manners in which he sought to explain how acceptable behavior becomes revolting. Drawing on Elias's classic study, in 1993 Robert Kagan and Jerome Skolnick noted that "smoking has not yet, like blowing one's nose in one's hand, or spitting, or eating with the fingers, been stigmatized as 'disgusting.'"[2] Since then, however, the increasing segregation of smokers has conveyed the message that, as Kagan and Skolnick put it, smoking is now viewed as "so harmful that it defiles others."[2]

In this article we examine contemporary efforts to extend smoking bans to beaches and parks, seeing in them policy initiatives designed to denormalize smoking and having as their ultimate goal a profound transformation in public norms and behavior. Our aim is to reveal the complex relationships among scientific evidence, real-world health risks, and politics.

Limits On Smoking, Coast To Coast

Some bans on smoking in public settings have existed since the early twentieth century. However, these earlier restrictions were largely based on concerns about public morals, especially in the case of female smokers.[3] When and where did the contemporary campaign to ban smoking in parks and on beaches start? How widespread were such bans in 2011?

The American Nonsmokers' Rights Foundation maintains a national database that identifies smoking bans in a wide variety of outdoor settings, with beaches, parks, plazas, and zoos among the most common locations.[4] Our analysis of the information in this database showed that from January 1993 to June 2011, US smoking bans were imposed in 843 parks and on 150 beaches. Leading the nation were California, with bans in 155 parks and on 46 beaches; Minnesota, 118 parks and 25 beaches; and New Jersey, 83 parks and 18 beaches.

Of the 150 beach bans, 75 percent (113) covered the entire beach, while the others covered sections of the beach. Ninety percent (136) of these bans were enacted by a city or county governing body. The remaining bans were imposed in a variety of ways, including a ballot measure, and by different bodies, such as a local board of health or state legislature. Of the 843 smoking bans in parks, 63 percent (534) covered the entire park, while the others covered sections. Forty-one percent (352) of the municipalities with park bans had "tot lot bans"—prohibitions on smoking in children's play areas.

The initial beach bans were imposed in 1995–99 in Massachusetts and Rhode Island. By 2006 communities in seven more states had passed beach bans. Five years later, twenty-three states had such bans. Early park bans were implemented in 1993–94 in Alabama, California, Hawaii, New Jersey, and Wisconsin. By June 2011 municipalities in all fifty states had passed smoking bans in parks (Exhibits 1 and 2).

A close examination of the spread of such bans in California underscores how efforts to promulgate and enforce smoking bans as a way to change behavior became models for other locales. It also demonstrates that the trajectory of behavior change is anything but straightforward, as efforts to thwart such initiatives by the tobacco and hospitality industries indicate. These bans were commonly depicted as unnecessary by the tobacco industry, whose campaigns asserted that better manners in public spaces would protect nonsmokers from the potential annoyance caused by smoking.[5]

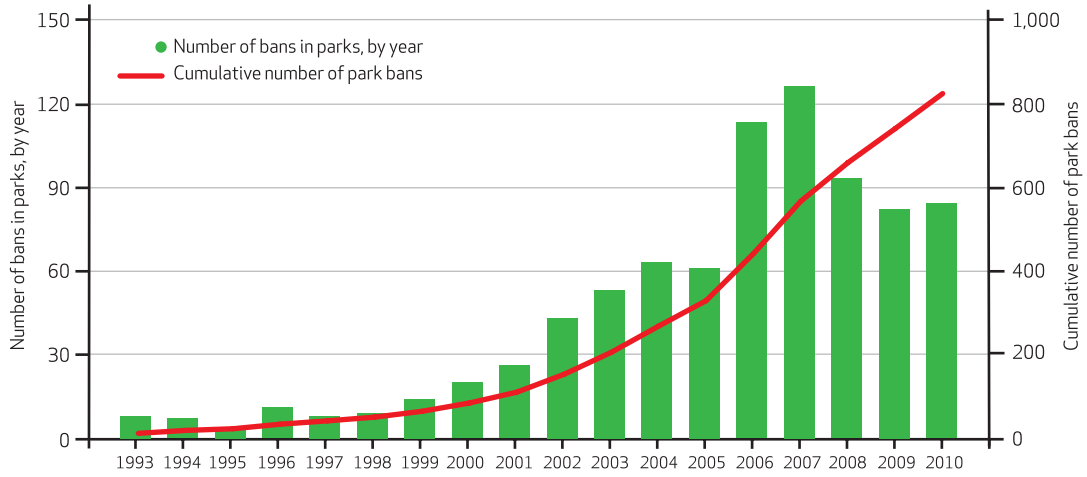
The first outdoor smoking ban identified by the American Nonsmokers' Rights Foundation was a 1975 ban on smoking in parks in Yolo County, California. After this isolated ordinance, it would be two decades before outdoor smoking bans would take hold in the state. In 1993 the city of Davis, California, instituted the first far-reaching outdoor smoking ban, covering dining areas, entryways, public events, open spaces used for recreation, and service areas—that is, any place where people are using or waiting for a service, such as ticket lines or bus stops. A *New York Times* article claimed that as a result of this ban, "the city is virtually smoke-free. Even the most dedicated smokers cannot light up outdoors without first stepping 20 paces from their offices' entrance to protect the innocent."[6]

By 2000 seventeen municipalities in California had passed smoking bans in parks, many of which were limited to particular areas (for example, dog exercise areas) or particular time periods. On August 6, 2001, Gov. Gray Davis (D) signed into law an amendment to the Health and Safety Code that prohibited smoking or discarding any "cigarette, cigar, or tobacco-related product" in a playground or in the area of a tot lot sandbox. In 2002 the fine for violating this law was raised from $100 to $250 and the prohibition extended to any area within twenty-five feet of a playground or tot lot sandbox.[7]

In 2003 Solana Beach became the first California city to ban smoking on the beach. The following year, eleven more beach bans were implemented. As of 2006 there were twenty-

EXHIBIT 1

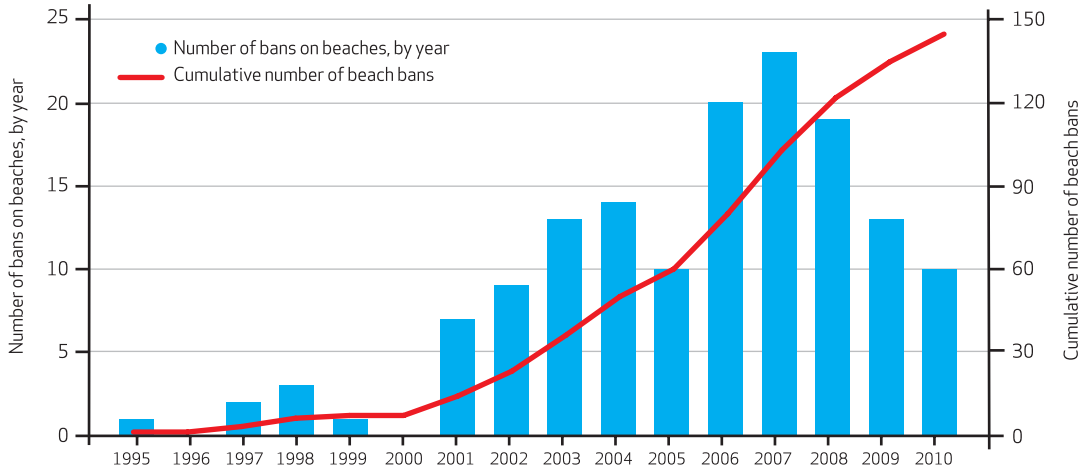
Smoking Bans In US Parks, 1993–2010



SOURCE American Nonsmokers' Rights Foundation. **NOTES** The number of bans in parks imposed each year, represented by the green bars, relates to the left-hand *y* axis. The cumulative number of bans in parks, represented by the red line, relates to the right-hand *y* axis. The 1975 ban on smoking in parks in Yolo County, California, is not included in this exhibit.

EXHIBIT 2

Smoking Bans On US Beaches, 1995–2010



SOURCE American Nonsmokers' Rights Foundation. **NOTES** The number of bans on beaches imposed each year, represented by the blue bars, relate to the left-hand *y* axis. The cumulative number of bans on beaches, represented by the red line, relates to the right-hand *y* axis.

eight such bans in California—more than in any other state. Also in 2006 the Calabasas City Council unanimously passed the most restrictive smoking ban to date, prohibiting "smoking in all public places, indoor or outdoor, where anyone might be exposed to secondhand smoke."[8]

In 2010 Gov. Arnold Schwarzenegger (R) vetoed a bill that would have prohibited smoking at nearly all California state beaches and parks. However, according to the Center for Tobacco Policy and Organizing, "as of January 1, 2011, 273 municipalities in California have restricted smoking in at least some recreation areas beyond [the requirements of] state law."[9]

In California and other states successful initiatives to ban smoking in public settings were the result of dogged advocacy on the part of local activists and statewide alliances. On many occasions, people concerned about litter and protecting the environment spurred efforts that were then endorsed by public health advocates and officials who grasped the potential contribution of such initiatives toward advancing the campaign against tobacco.

Remarkably, the three national organizations most closely associated with the public campaign against smoking—the American Lung Association, American Heart Association, and American Cancer Society—often greeted the initiatives of local activists with indifference or outright skepticism. These organizations believed that other policies offered more promising ways to reduce smoking. For example, they favored raising cigarette taxes, imposing more severe restrictions on indoor smoking, and supporting the Food and Drug Administration's efforts to control tobacco marketing. Thus, the campaigns in hundreds of communities across the United States represent a notable example of tobacco control's being advanced by local health activists, rather than large national organizations.

Across the disparate local efforts to ban public smoking, three broad themes emerged: Smoking on beaches and in parks posed a health hazard to nonsmokers, especially children; cigarette butts were toxic to humans and animals and constituted an unacceptable form of litter; and public smoking by adults provided a dangerous model that threatened the future well-being of children and adolescents.

Toxic Plumes

The threat of sidestream smoke—smoke that goes directly into the air from a burning cigarette, for example, whose inhalation is often referred to as passive or secondhand smoking—has been a central feature of the US campaign against tobacco since the 1970s. That focus permitted public health advocates to base their arguments on the obligation of government to protect innocent victims, avoiding the charge that official bans on smoking were paternalistic. By the time the campaign against smoking had been extended to open-air settings, limitations on smoking in the workplace, restaurants and bars, and public transport had become extensive.[10]

The spread of indoor smoking restrictions

and the widespread assumption that exposure to tobacco smoke posed a public health threat, whatever the setting, set the political stage for arguing that cigarette smoking in parks and on beaches could be hazardous. In the context of efforts in Westchester County, New York, to limit smoking at pools, on beaches, and in parks, John Banzhaf, executive director of Action on Smoking and Health and a decades-long veteran of the campaign to impose restrictions on the tobacco industry, said simply, "If you can smell it, it may be killing you."[11]

Proposals to prohibit smoking on the promenade in Santa Monica, California, in 2006 relied on a determination of the California Air Resources Board that classified secondhand smoke as a "toxic air contaminant" that could cause premature births, breast cancer, and respiratory diseases.[12] Pointing to research assessing the risks imposed on nonsmokers by exposure to tobacco smoke outdoors, the Center for Tobacco Policy and Organizing in California reported that when people are "near a smoker outdoors, they are exposed to air pollution levels significantly higher than normal background air pollution." Indeed, according to the center, outdoor exposure to smoke could be comparable to indoor exposure.[13]

But to make the case for beach- and parkwide prohibitions on smoking, stronger claims were necessary. In its efforts to ban outdoor smoking in New York City, the New York City Coalition for a Smoke-Free City drew on a publication of the World Health Organization: "Scientific evidence has firmly established that there is *no* safe level of exposure to second-hand tobacco smoke (SHS).... There is also indisputable evidence that implementing 100% smoke-free environments is the *only* effective way to protect the population from the harmful effects of exposure to SHS"[14] (emphasis added).

The New York City Council Health Committee's 2010 hearings on legislation to ban smoking in parks and pedestrian malls and on beaches also demonstrated the extent to which tobacco control advocates had begun to assert that outdoor smoking represented an exposure requiring a protective intervention. In its testimony, the American Lung Association's New York chapter asserted that there was a "RIGHT of all New Yorkers to breathe healthy air in public spaces such as parks and beaches. People should not have to choose between enjoying places and breathing healthy air"[15] (emphasis in original).

But the evidence that exposure to outdoor smoke, regardless of proximity and duration, led to health risks was far less certain than some proponents of total bans on smoking in parks and on beaches asserted. In 2010 Simon Chapman and Andrew Hyland, emeritus and deputy editors of *Tobacco Control*, were commissioned by a not-for-profit organization in Australia to review the literature for a government agency. They concluded that based on the available evidence, "outdoor $PM_{2.5}$ levels [a marker of exposure] are more transient as the smoke plume is less confined and can rapidly dissipate."[16] In 2008 Chapman had termed the evidence of the risk of outdoor smoking "flimsy."[17]

Perhaps more striking, although rarely proclaimed, was the skepticism about outdoor smoking bans on the part of those intimately involved in the campaign against tobacco at the national level in the United States. An official of the American Lung Association, concerned that efforts to ban smoking on beaches and in parks might deflect attention from more effective public health interventions, told the authors in an interview on April 12, 2012: "I don't think we should be making claims that are not supported by the data. If you try to tie it [banning smoking on beaches and in parks] to a health outcome, that's where you get in trouble."

A representative of the Campaign for Tobacco-Free Kids was even more direct in an interview on April 11, 2012: "There is not a lot of science around outdoor smoking bans.... There is some science, but you have to be very close to the smoke in an outdoor setting.... The last thing we want to do is put our credibility on the line with regard to the science."

The Blight Of Butts

When Asbury Park, New Jersey, imposed a ban on smoking in all public recreation areas in 2011, including its beach and boardwalks, Bob Martucci, the borough administrator, said: "We rake our beach every day and you can't imagine the [number] of butts and filters that end up in the water or wash into the bay. It's a health issue and it's a water issue. We no longer want that type of product anymore, on our beaches or in our lungs."[18] Cynthia Zipf, executive director of the environmental protection group Clean Ocean Action, underscored the point: "Contrary to some beliefs, the public space is not an ashtray."[18]

The cigarette butt has become both disgusting and pernicious. The thought that children might eat the potentially toxic items evokes expressions of alarm and revulsion. For example, Maine's State Sen. John Nutting (D-Leeds), who sponsored a bill that prohibited smoking on beaches in state parks, said: "Some of my constituents called me, saying they're tired of not being able to put their kids down on the beach because they crawl along and put cigarette butts

in their mouths."[19]

Ocean and lake conservancy groups commonly decried the presence of cigarette butts on beaches and in parks, often before antismoking groups joined the campaigns to rid these public spaces of the potentially toxic residue of smoking. Quantifying the amount of litter in terms of numbers of items such as cigarette butts instead of the volume or weight of the trash—measures commonly used in quantifying waste—underscored the magnitude of the pollution.

A 2009 analysis by the California Coastal Commission of a bill that would have banned smoking on state beaches in California highlights how compelling the cigarette litter issue had become. The commission reported that it had been collecting data on beach litter since the late 1980s. More than 900,000 volunteers had collected fourteen million pounds of garbage and had removed 5.5 million cigarette butts. The commission noted that although "cigarette butts are small and relatively light, and therefore do not make up a significant percentage of the pounds of trash removed each year, butts annually account for 40 percent of the total number of debris items removed from California's shorelines."[20] The commission, which supported the legislation, noted the potential toxicity of butts, but it gave pride of place in its report to the issue of litter.

Children and high school students were frequently mobilized in cleanup efforts in the name of civic duty to purify public spaces despoiled by the behavior of thoughtless, irresponsible adults. The *Journal of Community Health* captured this dimension of the efforts with a 2003 article focused on the work of one boy in California, titled "Smoke-Free Parks: A 12-Year-Old Made It Happen."[21]

Environmentalists' concern about the impact of cigarette litter set the stage for strategic efforts on the part of the tobacco industry. To protect its image, the industry sought to address the issue of disposing of cigarette butts. Failure to do so, it feared, would contribute to social hostility toward smoking and might lead to further restrictions on smoking. In 2010, in the wake of failed efforts to create a biodegradable cigarette filter, Keep America Beautiful—a nonprofit community improvement organization that receives support from Philip Morris and Altria—concluded: "The most effective ways to address cigarette butt littering include increasing availability of ash receptacles and portable ashtrays, decreasing the amount of existing litter through clean-up activities, and educating the public with motivational messages that target individual responsibility and obligation."[22]

An introductory commentary in a 2011 supplement of *Tobacco Control*, widely viewed as the premier academic journal in the field, reflected the extent to which cigarette butts had emerged as both a concern of environmentalists and an opportunity for pressing the public health campaign against tobacco. The authors noted that although "more research would certainly be helpful to define the scope of the problem, science-based interventions should now address what is clearly an unnecessary and preventable environmental plague in our communities.... Cigarette butt waste is the last socially acceptable form of littering in what has become an increasingly health and environmentally conscious world." The authors then called on tobacco control and environmental activists "to join forces and find solutions for eliminating this especially toxic form of trash."[23]

Despite the years of advocacy that had underscored the threats posed by cigarette butts to human health and animals' well-being, a tone of caution characterized the review of the evidence in the articles in this supplement of *Tobacco Control*. After noting the huge problem of cigarettes butts as waste, two researchers stated that "whether they cause significant environmental damage is *unknown*"[24] (emphasis added). Thomas Novotny, perhaps the best-known student of the subject, and coauthors wrote: "Most reports and reviews [of accidental ingestion of cigarettes by children] have described few significant toxic responses or sequelae."[25(pi18)] The authors also stated that "we have not yet been able to identify well documented reports of cigarette butt consumption by wildlife."[25(pi19)]

In an analysis of the evidence of butts as hazardous waste, Richard Barnes noted that despite the sheer magnitude of the issue globally and the presence of thousands of potentially toxic compounds in cigarettes, "*We have very limited knowledge* of the actual toxic impact of these compounds in the environment"[26] (emphasis added). The problem was the difficulty of moving from laboratory evidence obtained under controlled circumstances to the real-world consequences of exposure. One critic dubbed efforts to extrapolate from the toxic effects of cigarette butts on fish in laboratory buckets to the effects of discarded butts on marine life in real-world settings as "of course ridiculous" (personal communication, December 13, 2012).

Bad Role Models

Perhaps the most striking aspect of the argument for banning smoking in parks and on beaches is the claim that just the public act of smoking posed a threat to the well-being of children

5.5 million

Cigarette butts

The California Coastal Commission reports that nearly a million volunteers have picked up 5.5 million cigarette butts from California beaches since the late 1980s.

and adolescents because of the message it conveyed. Whatever one's perspective on paternalism, the duty to protect children is an uncontested premise of public health. In 2010 Thomas Farley, New York City's commissioner of health, made the case for banning smoking in the city's recreational areas, asserting that "families should be able to bring their children to parks and beaches knowing that they won't see others smoking.... We will look back on this time and say 'How could we have ever tolerated smoking in a park?'"[27] In making this statement, Farley was not charting new territory: The concern about the visual threat to children had for years been central to local campaigns to rid beaches and parks of smokers.

For example, in 2004, when Bloomington, Minnesota, moved to restrict smoking in outdoor areas, the manager of its Parks and Recreation Department, Randy Quale, said: "I think there's a lot of modeling that occurs when a youth sees a parent or coach smoking. They say, 'Geez, it must be okay.' But if they don't see it, they won't model the behavior and they'll be less likely to smoke as they grow up."[28] And in 2011, following New York City's implementation of smoking bans in parks and pedestrian malls and on beaches, the advocacy group Global Advisors on Smokefree Policy pressed other locales to follow suit: "By challenging the perception of smoking as a normal adult behavior, smokefree policies can change the attitudes and behaviors of adolescents, resulting in a reduction in tobacco use initiation."[29]

Efforts across the United States to ban public smoking took hold before there was substantial evidence to support the claim that such prohibitions could have an impact on adolescents' decisions to begin or continue smoking. In 2003 Nina Alesci and colleagues noted that "aside from school policy studies, scant literature provides a rationale supporting general smoking restrictions."[30] Indeed, the authors found only two studies that supported the claim, yet they concluded that smoke-free policies could change the normative acceptability of smoking by youth and their subsequent tobacco use. A 2008 article in *BMJ* that advocated public smoking bans as a way to protect children acknowledged: "We may not yet be certain that outdoor smoke-free areas reduce smoking uptake; the necessary studies have not been carried out. However, where there is uncertainty in policy making, any assessment of the balance of benefit and harm should put the protection of children first."[31]

But even in 2011, when more than 800 communities had banned smoking in parks and 150 had banned it on beaches, doubt remained about the effectiveness of such interventions. A representative of the Campaign for Tobacco-Free Kids, who was not opposed to such bans, told the authors in an interview on April 11, 2012: "It's probably true that smoking would go down [with the bans]. It's intuitive. But the science isn't there, the way it is for cigarette taxes, where [we] can stand by cost savings and reduction in smoking rates. We cannot make that kind of claim with an outdoor smoking ban."

The Denormalization Of Smoking

The denormalization of cigarette smoking—which emerged as a consequence of fiercely resisted tobacco control policy, especially restrictions on smoking in bars, restaurants, and workplaces—has become an explicit goal of tobacco control policy. The California Department of Public Health has been clear about this objective, stating that "the primary intervention goal of CTCP [the California Tobacco Control Program] is to change the social norms surrounding tobacco use by creating a social milieu and legal climate in which tobacco becomes less desirable and less accessible and tobacco use becomes less socially acceptable."[32]

People concerned about this turn in public policy have suggested that it involves an effort to stigmatize smoking and smokers. The sanitized term *denormalization* thus masks the harsher implications of tobacco control policies, which may include stigma, humiliation, and discrimination directed against smokers.[33]

The arguments in favor of outdoor smoking bans reveal the complex relationships among scientific evidence, real-world health risks, and politics in the public policy process of denormalization. Arguments in favor of such bans that hew most closely to conventional public health claims have centered on the potential toxicity of sidestream smoke and cigarette butts. Yet evidence of any hazards has mattered less than the belief that when it comes to cigarettes, no risk—no matter how slight—is acceptable.

The shift in public norms regarding smoking resulting from thirty years of policy interventions set the stage for the debates over banning smoking in open-air settings. The arguments for banning smoking on beaches and in parks that reflected an explicit policy commitment to denormalization rested on the depiction of cigarette butts as an unsightly and even revolting form of litter, and on the assertion that children need protection from the sight of smoking.

Cigarette butts have not always been seen as toxic, even when considered to be refuse. Piles of butts in ashtrays were to be discarded, butts on sidewalks were to be swept into the street. Only as the public norms surrounding smoking began

to shift did the presence of butts become seen as disgusting. Therefore, the characterization of butts in terms of vast numbers of items, and thus an unacceptable form of pollution, did not emerge from the data. Instead, the data on cigarette butts and the characterization of their significance were framed by the view that cigarettes and the residue of smoking were unacceptable.

Mary Douglas, the great anthropologist, made this clear in her classic *Purity and Danger*. "Dirt," she wrote, is "matter out of place."[34] Being out of place is the justification for the assertion that parents have a right to take their children to a park or beach without the risk of having them see someone smoke. If smoking is deemed abnormal and unacceptable, exposing children to the very sight of such behavior may prove hazardous to their well-being.

The process of denormalization that we have described in this article is clearly dependent on the political context. It requires that local coalitions pressing for smoking bans are strong enough to overcome the opposition of the tobacco and hospitality industries and of people who object to paternalism and invoke threats of Big Brother. Banning smoking in public settings may have seemed beyond the pale twenty-five years ago. But with changes in the political context and in social norms, such restrictions have proliferated, and the public has increasingly come to consider them as interventions designed to serve the common good.

A national survey conducted in the summers of 2000 and 2001 found that approximately 25 percent of respondents (10 percent of smokers and 30 percent of nonsmokers) believed that smoking should not be permitted in local parks.[35] Unsurprisingly, public opinion was far more supportive of outdoor smoking bans in the states that had embarked on the most aggressive efforts to restrict outdoor smoking.

A 2002 survey in California found that 52 percent of respondents supported such restrictions.[36] In a 2004 survey in Minnesota, 34 percent of respondents strongly agreed and 19 percent somewhat agreed that smoking should be prohibited in all outdoor parks at all times.[37] In 2011 the Gallup organization reported that for the first time since it began polling on the issue, a majority (59 percent) of respondents supported banning smoking in all public places. This represented a marked shift from 2008, when only 40 percent had supported such limits.[38]

This change in public attitudes has made it possible for officials to assert that bans will be self-enforcing, requiring little or no intervention by police or park attendants. Many park and beach bans include fines—a few even include jail sentences—for offenders. However, they must rely on smokers' compliance with publicly posted restrictions or with other people's requests that they stop smoking or "put it out." It is noteworthy in this regard that no systematic literature exists on the number of fines that have been imposed in the many locales that have enacted bans.

Conclusion

In making the case for banning cigarette smoking in parks and on beaches, public health officials, tobacco control advocates, and environmentalists have routinely appealed to the need to protect children, other nonsmokers, and wildlife from potentially injurious exposure. The specter of third-party harms has been invoked as the rationale for public health interventions. In doing so, despite relatively weak scientific evidence, advocates have sought to avoid the charge that outdoor smoking bans represent yet another case of overreaching by the "nanny state," of unjustified paternalism that lacks any respect for adults' fundamental autonomy.

Advancing claims that mask the underlying public health goal of denormalization is a perilous strategy. Public health must, in the end, rely on public trust. That trust is threatened when the case for interventions depends on weak evidence and involves degrees of dissimulation. Advocates for outdoor smoking bans should be candid about the limits of arguments based solely on third-party harms as they confront the lethal consequences of tobacco use. ■

59%

Support for public smoking bans

In 2011 Gallup reported that for the first time, a majority of respondents (59 percent) supported bans on smoking in all public places. In 2008 only 40 percent had supported such limits.

The authors gratefully acknowledge the American Legacy Foundation for its financial support in obtaining data from the American Nonsmokers' Rights Foundation.

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