

Cigarette

What's life like in the nation's smokiest city for women? Bars don't bother to ventilate, officials spend peanuts on prevention and smoking is a "civil right." Why have so many towns given up on fighting our deadliest habit?

By Katy Vine Photographs by Mary Ellen Mark

t's Sunday night, and Anna Boeck feels as though she's been sucking on an exhaust pipe since Friday. The 21-year-old veterinary-medicine student knew she'd be around cigarette smoke when she applied for a part-time bartending job at an Irish pub in Galveston, Texas. Who wouldn't? But the money was great—"it's hard to get a good job down here," she says—and Boeck is no antismoking moralizer. Her friends smoke, her coworkers smoke and now most of her customers smoke. "Their feeling is, It's my choice, my life, my right," she says.

But within weeks of taking the job, she felt the effects. The bar, in the middle of the main club district in this Gulf Coast town of about 57,000, is a narrow hole-in-the-wall that traps smoke even when the front door is propped open. Patrons gather by the long row of taps at the bar, trying to blow their cigarette and cigar smoke at an angle away from Boeck's face. Still, a cloud hangs around the neon beer signs that dimly light the room. Boeck checks to see if anyone has reset the air filter that's supposed to clear up the smoke. No one has. "The other bartenders smoke, and they don't notice it," she says.

Even when the "smoke eater" is on, Boeck's throat is raw.



Contact lenses and allergies have made her ultrasensitive; she squirts Visine in her eyes twice a night and sucks down water to keep her nasal passages from drying out. When the bar hosted a graduation party for some seniors at the local university, the celebratory cigars gave her a sore throat that lasted a week.

It's possible Boeck is working in one of the smokiest spots in America. Bars have up to six times more secondhand smoke than any other workplace, and when it comes to smoking among women, Galveston is number one, according to SELF's most recent Healthiest Cities for Women report ranking 200 of the nation's largest metro areas. That matters, because researchers say women might be more susceptible than men to the cancercausing properties of cigarettes. An analysis of data from the Centers for Disease Control and Prevention (CDC) in Atlanta found that women in the Galveston area average 199 cigarettes a month. The national average is half that. And in SELF's least smoky place—Ventura, California, where public smoking is largely banned—women light up only 18 times a month.

All along this strip of the 2-mile-wide island, young tourists and students lean over pool tables with cigarettes dangling from their lips; they exhale under strobe lights while music blares; they get progressively drunker and blow smoke in their sweetie's face as they shout a drink order. Returning home after 2 A.M., Boeck showers and tosses her work clothes in a separate room. "At the end of the night," she says, "I reek."

Where you live and what you breathe

Six years ago, when states sued to bacco companies to recover the costs of smoking-related illnesses, policymakers broadcast lofty goals: They would pour billions in settlement money into prevention and cessation programs. But over time, only six states

(Arizona, Arkansas, Delaware, Hawaii, Maine and Mississippi) have stayed committed to those goals, according to the American Lung Association in New York City. Twenty percent of women still smoke, down only 3 percent since 1990. While smoking rates have indeed dropped in areas with strict antitobacco policies, in some states as many as one in three people smoke.

This year, states will collect \$19.5 billion in tobacco taxes and settlement money, but less than 3 percent of those resources are earmarked for prevention. Instead, most states are using the money to plug holes in their budget. In New Hampshire and South Carolina, for instance, the entire tobacco-prevention budget was cut last year. Florida downsized its program by 97 percent. Earlier this year, when the lung association graded states on tobacco-prevention efforts, 38 states received an F.

This is how states and cities are responding to the country's biggest public health menace. Tobacco kills about 440,000 people every year—

140,000 more than the obesity epidemic and more lives annually than AIDS, alcohol, car accidents, murders, suicides, illegal drugs and fires combined. And one in eight people who die of tobacco-related illnesses are nonsmokers, says James Gray, a spokesman for the American Cancer Society, Texas Division, in Austin. In April, for the first time ever, two officials from the

"I enjoy smoking regardless of the bronchitis," says Julie Morreale. "I won't quit," she jokes. "I'm not a quitter."

CDC advised Americans at risk for heart problems to avoid any building that allows indoor smoking, saying one exposure of as few as 30 minutes could be lethal.

Still, smoking remains a fiercely protected privilege in areas such as Galveston; state and local policies barely curtail second-hand smoke, provide little motivation for smokers to quit and make it harder for quitters to succeed. "This is the government's job: to protect the welfare of the people," Gray says. "Secondhand smoke is one of the leading causes of death in the country, and most of those cases can be prevented. We have an opportunity in the states to save tens of thousands of lives."

Making a bad habit cheap and easy

The leading tobacco-prevention expert in Galveston is Billy Philips Jr., Ph.D., director of the division of epidemiology and biostatistics at the University of Texas Medical Branch (UTMB). The institution, which is the city's largest employer, has banned smoking on its grounds, posted no-smoking signs and plastered antitobacco posters in the halls. Yet even here,



in the city's least smoke-friendly spot, women find a place to light up. Just ask Philips's secretary Julie Morreale.

Morreale went out for a cigarette break one day recently with an office pal. The two trekked about five minutes away, past the parking lot outside their building, to their place of banishment: a tiny patch of sidewalk under a large bush that shaded them

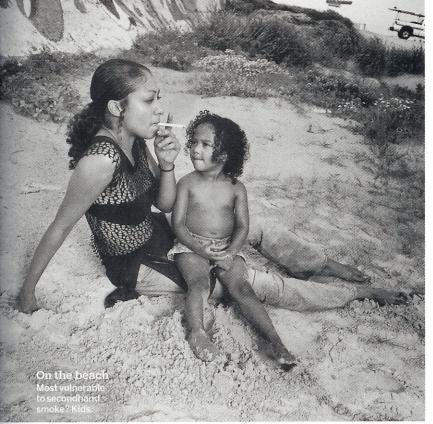
from the ever-blazing Texas sun. Morreale pulled out her Marlboro Menthol Lights 100's. "They say menthols are worse for you," she says, because people tend to inhale them more deeply. "But they feel so good."

Morreale, 32, smokes a pack or more each day. She smokes on the way to work, on her two breaks and at lunch. And she smokes as soon as she climbs into her pickup truck to drive home.

She has bronchitis that comes and goes; she knows cigarettes make her sinuses and allergies worse. Nevertheless, she says, "I enjoy smoking regardless of the bronchitis. It's relaxing." Philips often hears her coughing and warns her of her habit's risks. "I won't quit," she jokes. "I'm not a quitter."

Half of all long-term smokers can expect to die from the habit. And half of those who die will die in middle age. "It's the 40-year-old moms who are going to meet this fate if they don't quit," says Michele Bloch, M.D., a medical officer at the Tobacco Control Research Branch of the National Cancer Institute in Bethesda, Maryland. But as any smoking expert will explain, a smoker must *want* to quit to be successful. And in certain environments, there is simply no motivation for that to happen.

Texas has made progress on teenagers' access to cigarettes—restricting vending machines and randomly inspecting areas where cigarettes are accessible to minors—but the state spends little of its tobacco settlement money on prevention and cessation. Galveston, like the vast majority of American cities, has no comprehensive ban on cigarettes in public areas, making it



The SELF Smoke-o-Meter

If you have any doubts about the immense difference it makes to live in a nonsmoking city, check out the numbers below. Secondhand smoke contains 69 cancer-causing chemicals, and nonsmokers who inhale high levels of cotinine—a nicotine by-product—have about a 50 percent increased risk of developing heart disease in their lifetime, according to a study published in the *British Medical Journal*. SELF asked researchers at the Roswell Park Cancer Institute in Buffalo, New York, to report on levels of indoor pollution in 56 bars and restaurants of various U.S. cities. See how your hometown stacks up. You may want to dine alfresco instead. —*Kristin Kane*

343*GALVESTON

Levels of indoor air pollution were 23 times what the Environmental Protection Agency recommends as safe.

293 BALTIMORE

The law requires ventilation systems, but high levels of indoor air pollution suggests they may not be doing the job.

254 PHILADELPHIA

The city of brotherly love is also a friend to smokers, who are free to light up in most bars and restaurants.

94 LOS ANGELES

California state law bans lighting up in bars and restaurants, but testers caught scofflaws puffing away in three of nine venues.

NEW YORK CITY

Pre-smoking ban, pollution in bars was 50 times higher than at the entrance to the Holland Tunnel. Now the breathing is easy.

* Average micrograms per cubic meter of smoke and other particulate pollution

easier for smokers such as Morreale to light up in bars, restaurants or beaches. (Cities such as Los Angeles have gone so far as to ban smoking on public beaches.) They can also buy cigarettes on the cheap: Texas ranks 38th in the nation in taxes on tobacco, with 41 cents on every pack, and the city assesses zero local tobacco taxes.

In areas with higher cigarette taxes, loss of sales for local merchants becomes a gain in public health. In 1988, California increased state cigarette taxes by 25 cents per pack; the move precipitated declines in smoking-related heart attacks and strokes, saving \$390 million in health care costs in the first seven years alone. After New York City raised taxes from 8 cents a pack to \$1.50 in 2002, cigarette sales plummeted almost 50 percent; city officials estimate the policy will help prevent at least 30,000 premature deaths in coming years.

Because lung disease can take years to develop, no one knows the ultimate impact of recent antismoking measures in states and cities. But

already fewer people are dying in areas with strong laws. California, which annually spends \$4.02 per capita on tobacco control, had 262 smoking-attributable deaths for every 100,000 people at last count. Texas, which spends 79 cents per capita, had 10 percent more deaths. It's likely that cancer rates and longevity will diverge even more from state to state, Dr. Bloch warns, as some invest in tobacco control and others fail to.

A good portion of Texas's spending goes to a single four-county region north of Galveston. In this test area, the state funds antitobacco billboards, television and radio ads, school programs and more. Thus far there's been a 30 percent drop in middle-age smoking rates, Gray says. "But that still means that 80 percent of Texas is not covered," he adds. Of course, lack of policy is not the only reason Galveston loves to smoke. The habit shadows the poor, and unemployment here far exceeds the national average. Because Galveston is a tourist destination, many of its seasonal jobs pay little above minimum wage and offer few health benefits that might discourage smoking. Plus, the town draws poverty-stricken patients in need of indigent health care, which has long been a mission at UTMB.

Back at the hospital parking lot, Morreale turns to her friend, offering the pack of menthols. "Do you want one?"

"If I get a head rush, it's your fault," says her pal, lighting her second cigarette in a few minutes' time.

"Wheee!" Morreale says, exhaling a cloud.

The civil right to make you sick

When Morreale was 9 years old, she heard in school that smoking would turn a person's lungs black. She begged her father, who had smoked for many years, to quit. She sat on his lap and cried, telling him she wanted him to stay alive. So he stopped and hasn't smoked since.

But by the time Morreale turned 13, she'd become such a rebel, she says, "black lungs didn't seem (continued on page 230)

CIGARETTE CITY

(continued from page 229) like such a bad thing." She's smoked for 19 years now, stopping briefly while she was pregnant. "As soon as my water broke, though, I wanted a cigarette," she says. "I smoked about four on the way to the hospital."

Recently, Morreale's 9-year-old son came to her and asked her to stop, telling her—as she once told her father—that cigarettes are making her lungs turn black. But unlike her dad, Morreale won't be dissuaded—not by her son, not by her husband, not by her boss. "I just don't feel people have the right to tell people what they can and can't do," she says.

Morreale refuses to feel ashamed of a habit that is perfectly legal. "As long as I'm not invading anyone's space, it shouldn't bother them," she says. "My mother never smoked, and she died in her early 60s from Alzheimer's. My brother who smoked was murdered in a robbery at a bar. Everything happens for a reason, and although we might not understand why, there is some type of necessity to it all. We are here a short time. Enjoy your life. Why count every calorie and carb?"

This live-and-let-live philosophy goes way back in Galveston. Through the mid-20th century, the area's residents took pride in its reputation as the Gulf Coast's Sin City, promoting drinking and gam-

It's not only smokers who pay those medical costs, however: In Texas, residents pay \$494 per household in taxes to treat tobacco-related illnesses—although 77 percent of them don't smoke. "The individual-choice argument is the tobacco industry's argument," Dr. Bloch says. "But smoking is rarely a choice. It's an addiction. And we need to promote an environment that helps people quit. We put fences around bridges and dangerous places; if someone wants to crawl over, they can do that."

Finding a way out of the fog

Brenda Hodge, 40, a Galveston property manager, had been too stressed out to quit smoking. She had to take care of work, she had to take care of her familyshe never got a break. But about six months ago, she developed a chest cold that lasted four weeks. It wasn't the first time she felt congestion exacerbated by her habit. So even though she had dropped out of smoking-cessation programs three times previously, she decided to try again. "When I was 20, I aerobicized four times a week; I played volleyball and softball," she says. "And after every game, I smoked. You can't do that forever. You may think you can when you're 20 years old, but you can't."

In a single night at a smoky karaoke bar, Hodge had tripled the amount of carbon monoxide in her lungs.

bling even during Prohibition. Herbert Y. Cartwright, the mayor of Galveston from 1947 to 1955, did everything he could to support the town's thriving prostitution industry, memorably arguing, "If God couldn't stop prostitution, why should I?"

These days, the same libertarian thinking apparently applies to smoking. "I think some regulations go overboard," Morreale says. "I think bans go against civil rights." She also resents the tobacco taxes. "We're keeping the HMOs in business," she figures. "If it weren't for all us smokers with all our health problems, doctors wouldn't get as much business."

Hodge knew quitting cold turkey wouldn't work for her. She'd tried before and failed. Then her husband told her about the smoking-cessation support available at UTMB, a university-funded program that costs patients only \$30 for six counseling sessions over a year. At the three-month point, she's at the hospital for a checkup with Emily Riffe, the counselor who runs the program.

Hodge chews a small piece of sugarfree gum. "I had a bad night last night," she says in Riffe's small office. "I went to a birthday party at a karaoke bar, and the place was thick with smoke. I woke up with a sore throat this morning, and my clothes stank. Now I can see why nonsmokers complain about secondhand smoke."

The first thing Hodge had noticed at the karaoke bar was a sign: THIS IS A SMOKING ENVIRONMENT. "What could I do?" she asks. "I knew I had to go to my friend's party. So I walk in, and there's a huge cloud of smoke hovering over the room. I thought, Oh, my God—I'm going to get lost in the cloud!" As the night wore on, she'd catch herself watching another woman smoke the way a dieter watches someone eat a banana split.

Riffe checked Hodge's carbon monoxide rating, as she had in past sessions. Riffe considers anything over a 2 to be a risk; at Brenda's first session, when she was still smoking, she measured 7.2 During her second session, on her quit date, she rated 0.5. For her third session, she was at 0.4. This time—because she had been at the bar the night before—she blew a 1.3. In a single night at a smoky karaoke bar, Hodge had tripled the amount of carbon monoxide in her lungs. "That's scary," she says, her eyes wide.

Without a cessation program, Hodge would have had only a 5 percent chance of going without cigarettes for a year. With the program—and by using a combination of the nicotine patch and the craving-control drug Zyban-she has a 20 to 30 percent chance of making it that far. Those are still long odds, and she would have a better chance of success in a place where state and local laws are more supportive of nonsmokers, Dr. Bloch says. In 2002, for example, New York City's health department provided 35,000 smokers with a free six-week course of the patch, and about 11,000 of them kicked the habit.

Hodge used to find smoking bans annoying; like a lot of her neighbors, she thought nonsmokers were a bunch of whiners. These days, however, she's hanging around fewer and fewer smokers. And she's gravitating toward completely smokeless zones, appreciative of any measure that can help her quit. "It helps not to be around it and be in an atmosphere that's free," she says. "When I see a sign that says NO SMOKING, I breathe a sigh of relief. Because that's one less battle I have to fight that day."