

The Members of the Executive Committee
March 12, 1993
Page Four

where discretionary smoking is allowed than in homes where no smoking occurs, and, in any event, is much lower than federal standards allow. Finally, Turner addressed data from indoor air quality surveys worldwide, which suggest that in countries where smoking bans are most common, absences due to indoor air pollution-related illnesses are most frequent.

Following Turner's presentation, several members suggested that the subcommittee would seek additional information about the general problem of poor indoor air quality when it reconvenes for hearings on the proposed ban.

We will keep you informed of further activity.

Enclosures

SDC:cah

cc: The Members of the Management Committee
The Members of the EPA/OSHA Task Force
The Members of the Committee of Counsel
TI Senior Staff

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U.S. House of Representatives **COMMITTEE ON PUBLIC WORKS** **AND TRANSPORTATION**

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AGENDA

SUBCOMMITTEE ON PUBLIC BUILDINGS AND GROUNDS

2167 RAYBURN HOUSE OFFICE BUILDING

THURSDAY, MARCH 11, 1993

10:00 A.M.

The Subcommittee will receive testimony on H.R. 881, a bill to prohibit smoking in Federal buildings.

WITNESSES

Honorable Richard J. Durbin (IL)
U.S. House of Representatives

Honorable Romano L. Mazzoli (KY)
U.S. House of Representatives

Dr. Antonia C. Novello
Surgeon General of the Public Health Service
Department of Health and Human Services

Dr. William H. Farland
Director, Office of Health and Environmental Assessment
U.S. Environmental Protection Agency

Panel:

Mr. P. Gerald Thacker
Acting Commissioner, Public Buildings Service
General Services Administration

Ms. Patricia W. Lattimore
Acting Director, Office of Personnel Management

Mark W. Hurwitz, Ph.D.
Executive Vice President
Building Owners and Managers Association International (BOMA)
Washington, D.C.

Panel:

Dr. Gio Batta Gori
Director, Health Policy Center
Bethesda, Maryland

Dr. Maurice LeVois
Principal Scientist, Environmental Health Resources
Tiburon, California

Mr. Simon Turner
Technical Manager, Healthy Buildings International
Fairfax, Virginia

Panel:

Dr. John W. Hoyt
Chairman, Department of Critical Care Medicine
St. Frances Medical Center and Society of Critical Care Medicine
Pittsburgh, Pennsylvania

Dr. Alfred Munzer
President, American Lung Association
Washington, D.C.

(Revised - 3/10/93)

NEWS

FROM CONGRESSMAN

JAMES TRAFICANT

17th CONGRESSIONAL DISTRICT, OHIO

**PRESS CONTACT: PAUL MARCONE
PHONE NUMBER: 202/225-5261**

**MARCH 11, 1993
FOR IMMEDIATE RELEASE**

TRAFICANT CHAIRS HEARING ON LEGISLATION TO BAN SMOKING IN FEDERAL BUILDINGS

Washington, D.C. -- U. S. Rep. James A. Traficant, Jr. (D-Ohio), Chairman of the House Public Works and Transportation Subcommittee on Public Buildings and Grounds, today chaired a hearing on legislation he has introduced to ban smoking in all federally owned and leased buildings. "It is apparent that the focus of the smoking issue has moved away from a simple 'smoker vs. non-smoker' rights issue to the arena of general public health, public accountability and liability," declared Chairman Traficant in his opening statement.

Chairman Traficant's bill, H.R. 881, would ban all smoking in federally owned and leased office buildings, including buildings used by the U.S. House and Senate, as well the U.S. Courts. Under the bill, anyone in a federal building who wishes to smoke must go outside. The Subcommittee on Public Buildings and Grounds has jurisdiction over Federal buildings. "This subcommittee," said Traficant, "is particularly concerned about exercising appropriate oversight on health and safety issues as they relate to federal workers in federally-controlled space. A recent Environmental Protection Agency report and other scientific studies addressing the hazards of environmental tobacco smoke (ETS) -- commonly known as secondhand smoke -- has caused the subcommittee to re-examine its oversight role in ensuring a healthy workplace."

Chairman Traficant referred to the fact that ETS has been classified by the EPA as a Group A carcinogen, a classification reserved for those compounds known to cause cancer in humans, such as asbestos, benzene and radon. In a December 1992 report entitled "Respiratory Health Effects of Passive Smoking: Lung Cancer and Other Disorders," the EPA concluded that the widespread exposure to ETS presents a serious and substantial public health impact, and is responsible for some 3,000 lung cancer deaths a year in non-smokers.

(next page)

In light of the scientific evidence regarding exposure to ETS, "the subcommittee has re-evaluated its responsibility to provide healthy, safe buildings -- not only to the federal worker -- but also to the American public who use federal office buildings for business, information, advice, meetings, retail and commerce endeavors. The fact is, in most federal buildings, including the Capitol complex, indoor air is recirculated throughout the building -- exposing non-smokers to a known carcinogen," asserted Traficant.

Chairman Traficant referred to official statements made to the subcommittee last month by the General Services Administrations that air filters in federal buildings are incapable of eliminating the microscopic materials contained in ETS. The GSA also stated that establishing separately ventilated smoking areas would cost the federal government as much as \$50 a square foot -- not including the annual cost of operating and maintaining the equipment.

Chairman Traficant noted that total smoking bans have been implemented in the White House, the states of California, Idaho, Maryland, Michigan, New Jersey, Ohio and Utah, as well as numerous municipalities such as Denver, Sacramento and Houston. National food chains, such as McDonald's have implemented smoking bans in some of their restaurants. The Chairman also noted that some federal agencies have already implemented a total smoking ban, including the Health and Human Services Hubert Humphrey Building, the National Institutes of Health and the Tennessee Valley Authority.

"In addition, this subcommittee must be ever conscious of the significant costs associated with space alterations which would be required to accommodate alternative solutions. The subcommittee must also weigh the issue of future liability costs to the federal government if action is not taken now to address the problems posed by exposure to ETS," concluded Chairman Traficant.

Those who testified before the subcommittee today included Dr. Antonia C. Novello, Surgeon General of the U.S. Public Health Service; U.S. Representatives Richard Durbin (D-IL) and Romano Mazzoli (D-KY); William H. Farland, Director of the EPA's Office of Health and Environmental Assessment -- the office that classified ETS as a Group A carcinogen; Gerald Thacker, Acting Commissioner of the Public Building Service; Patricia Lattimore, Acting Director of the Office of Personnel Management; Dr. Alfred Munzer, President of the American Lung Association; Dr. John W. Hoyt, Chairman of Critical Care Medicine at the St. Frances Medical Center in Pittsburgh, Pennsylvania; and Mark W. Hurwitz, Executive Vice President of the Building Owners and Managers Association International.

RICHARD J. DURBIN

28TH DISTRICT, ILLINOIS

AT-LARGE WWVP

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Congress of the United States
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TESTIMONY OF

THE HONORABLE RICHARD J. DURBIN

BEFORE THE

SUBCOMMITTEE ON PUBLIC BUILDINGS AND GROUNDS
COMMITTEE ON PUBLIC WORKS AND TRANSPORTATION

MARCH 11, 1993

Mr. Chairman, I would like to commend you for your interest in the issue of secondhand smoke and thank you for the opportunity to testify today.

It's time for the federal government to extend full protection from secondhand smoke to the workers and visitors in all federal offices, including all office buildings owned or leased by the Executive, Legislative, and Judicial Branches of the U.S. government.

On January 7, after several years of intensive study, the Environmental Protection Agency formally classified environmental tobacco smoke as a Group A carcinogen. This classification is reserved for substances which are known to cause cancer in humans, including asbestos, benzene, and arsenic.

EPA found that secondhand smoke causes approximately 3,000 lung cancer deaths annually in U.S. nonsmokers.

In addition, exposure to secondhand smoke causes 150,000 to 300,000 lower respiratory tract infections such as bronchitis and pneumonia in young children each year, causes additional episodes of asthma and increased severity of asthma symptoms in children who already have asthma, and may be a risk factor for 8,000 to 26,000 new cases of asthma annually in children who would not otherwise become asthmatic.

In response to these facts, I introduced legislation, H.R. 710, to protect federal employees from secondhand smoke in the federal workplace and to protect children from secondhand smoke while they are participating in federally-funded children's programs. I am pleased to have more than 40 cosponsors for this measure, including Mr. Hansen and Mr. Mazzoli as lead cosponsors.

Mr. Chairman, with regard to federal workers, the bills you and I have introduced both have the same goal, the protection of federal employees who count on us to provide them with a safe environment as they serve the American people.

Rep. Richard J. Durbin -- Page Two

My legislation would prohibit smoking in all federal buildings, except in areas that are ventilated separately from the rest of the building.

The EPA and others who have examined this issue have told us there are only two ways to protect nonsmokers from the hazards of breathing secondhand smoke. Either indoor smoking must be banned, or it must be limited to separately-ventilated smoking areas.

Separate smoking sections that are not separately ventilated are not acceptable, because the smoke recirculates through the building's ventilation system directly into the rooms used by nonsmokers.

My legislation does not require that agencies establish separately-ventilated smoking rooms, nor does it authorize funding to making the engineering changes that might be necessary. However, it leaves open the possibility of separate ventilation in cases where separate ventilation could be accomplished without significant cost.

If we take action on smoking in federal office buildings, we will be following the lead of many private companies throughout the country. In a 1991 survey of members of the Society for Human Resource Management, 34% of the firms that responded indicated they have declared their facilities "smokefree". Five years earlier, only 2% of the firms were smokefree. Today the percentage is undoubtedly even larger.

It is time for the federal government to provide its workers with the same basic protection against secondhand smoke that is offered by a growing number of private sector employers.

Mr. Chairman, I appreciate your desire to act on this issue, and I hope that our colleagues will join us in bringing the smoking policies under federal jurisdiction into conformity with the scientific and health findings of the EPA and the growing practice in private office buildings throughout the country.

Thank you again for bringing attention to this issue.



Third District, Kentucky

NEWS
RELEASE

Congressman Ron Mazzoli

*Testimony of the Honorable Romano L. Mazzoli
House Subcommittee on Public Buildings and Grounds
Smoking in Federal Buildings
March 11, 1993*

Mr. Chairman:

Thank you very much for allowing me to appear before your subcommittee today with my distinguished colleague from Illinois, Mr. Durbin. It is also an honor to testify after the Surgeon General of the United States, Dr. Antonia Novello who has been a true leader on smoking and health issues. In particular, I recall her efforts last year to ask the Tobacco industry to voluntarily halt the Joe Camel advertising campaign, an effort which I also took up on the Floor of the House.

The bill before the subcommittee today is H.R. 881, legislation which would prohibit smoking in federal buildings, including the United States Capitol. As you are probably aware, I, along with my colleagues, Mr. Durbin and Mr. Hansen of Utah, am a sponsor of H.R. 710 introduced in early February. Our bill, the PRO-KIDS Act of 1993, would also establish a no-smoking policy in the federal workplace and in any federally funded facilities housing children.

Mr. Chairman, as I said on the Floor a few weeks ago, the trend today is toward smoke-free facilities. The White House has gone smoke-free. Governor Wilson in California has signed an executive order prohibiting smoking in state buildings, prisons, and hospitals. Governor Brereton Jones in my own state of Kentucky is implementing a smoking policy that would limit smoking to designated areas in state buildings. And, Louisville city government and Jefferson County government agencies are also going this route.

This comes about in large part because of the mounting evidence that tobacco smoke contains ingredients harmful to both the user and to those who breathe smoke in secondhand.

The Environmental Protection Agency report of January 7, 1993 is the latest and among the more persuasive such statements. The report classified secondhand smoke as a Class A carcinogen and identified it as responsible for approximately 3000 lung cancer deaths annually in nonsmokers. The report also concluded that exposure to secondhand smoke causes hundreds of thousands respiratory illnesses among children and increases the severity of asthma among children who have that affliction.

Some groups are challenging the science behind the EPA's report, but the plain fact is this: exposure to tobacco smoke -- either directly or passively inhaled -- cannot be good for anyone's health, and may in fact be quite harmful to one's health. For this reason, and for the legal liability issues raised by the EPA report, governments and private firms throughout the country are moving to restrict and even prohibit smoking in their buildings. And, I do not doubt that the Occupational Safety and Health Administration (OSHA) is examining workplace rules changes relating to smoking at this very moment.

The time has come for the Federal government to adopt a non-smoking policy to promote the health of both smokers and non-smokers. And, this policy should cover the Capitol complex. I would note that a recent survey conducted by Mr. Durbin concluded that many Members of the House support making the House smoke-free.

Finally, although I come from a tobacco state, I am taking this position because of my concern for the health of all people. And, in the coming debate over health care reform, tobacco use, and tobacco taxes, Congress has an obligation to establish a conversion program for tobacco farmers and workers in tobacco dependent states like Kentucky.

This means creating transition and conversion programs to assist tobacco growers in moving into alternative crops, helping tobacco states attract food processing facilities to give growers markets for produce other than tobacco, and providing retraining assistance for tobacco workers who might be displaced due to decreasing tobacco production.

Those good people in my state who -- for reasons of tradition and history -- have made their living from tobacco will be affected by these national trends and the actions of government and, as in the case of defense worker-conversion programs, the government has a responsibility to help these people.

So in conclusion, I support your efforts and I thank you again for allowing me to testify.

I welcome your questions at this time.

HEARING ON H.R. 881

STATEMENT OF REPRESENTATIVE NICK RAHALL

Mr. Chairman, I appreciate the opportunity to address the members of this subcommittee during your consideration of H.R. 881, legislation to ban smoking in all facilities owned or leased by the federal government. I have a number of concerns about this proposal that I respectfully urge my colleagues to consider as you evaluate whether legislation of this kind is necessary and whether it can be expected to have a productive impact on the federal workplace.

Mr. Chairman, let me describe my concerns. First, since 1986, when the General Services Administration issued guidelines on smoking in GSA-owned or -leased facilities, virtually all Executive departments and agencies have adopted policies to manage workplace smoking. Under the current restrictions, smoking in most federal facilities has been limited to specifically designated areas and, in the event of a conflict between smokers and nonsmokers, the wishes of nonsmokers prevail. There simply is no good evidence that this approach has failed.

A second problem with this proposal is that it ignores a number of important precepts which governed development of the original GSA guidelines. The first of these was the desire to accommodate workers who choose to smoke, as noted in the preface

to the GSA rule, which states: "The proposed regulations also recognized the needs of those who smoke and permitted the designation of smoking areas. These areas were proposed to allow those who smoke to continue to do so conveniently and without affecting productivity. Hence, the policy attempted to recognize the rights, needs and concerns of all employees." This legislation completely abandons that important principle.

Third, this legislation also completely abandons the notion that individual departments and agencies of the federal government should have the flexibility to set the smoking policies that suit their workforce. Under this proposal, the same regulation would apply to the Department of Health and Human Services and to every small field office in the Department of Agriculture. It ignores the fact that employees in different offices may have very different preferences, that smoking bans may impose disparate hardships in different locations, and that conditions of occupancy and ventilation are not always the same. Individual departments and agencies are very well capable of managing smoking among their workforce, they have done so successfully to date, and they should continue to have the discretion to do so.

Fourth, this proposal fails to consider the rights of organized labor and the workers it represents, who consider workplace smoking a condition of work negotiable through collective bargaining. An AFL-CIO policy statement on workplace smoking notes that "unions have a legal responsibility to

represent the interests of all their members -- smokers and nonsmokers," and recommends that issues related to workplace smoking be worked out "voluntarily...in a manner that protects the interests and rights of all workers."

In fact, most of the unions whose members are directly affected by this legislation have expressed no dissatisfaction to me with current policies on smoking in the workplace, and are not likely to embrace more onerous burdens on a significant number of their members. All of these unions have more pressing concerns, chief among them how to keep their jobs. Many also are concerned about the overall problem of indoor air quality, which causes significant illnesses among many of their members.

In a recent survey of Social Security Administration workers, for example -- many of whom are housed in General Services Administration buildings where smoking is banned or severely restricted -- virtually all respondents who reported health problems on the job blamed poor workplace air quality for their illnesses. GSA is happy to support a ban on smoking yet has done little to address this more substantive concern, despite its public commitment to do so at the time it announced its regulation of smoking.

Mr. Chairman, I am aware that one of the primary motivations of legislation to ban smoking in the workplace is the risk assessment of environmental tobacco smoke released by the Environmental Protection Agency earlier this year. I am not a scientist, so I will not presume today to tell you that the EPA's

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where discretionary smoking is allowed than in homes where no smoking occurs, and, in any event, is much lower than federal standards allow. Finally, Turner addressed data from indoor air quality surveys worldwide, which suggest that in countries where smoking bans are most common, absences due to indoor air pollution-related illnesses are most frequent.

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(Revised - 3/10/93)

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JAMES TRAFICANT

17th CONGRESSIONAL DISTRICT, OHIO

**PRESS CONTACT: PAUL MARCONE
PHONE NUMBER: 202/225-5261**

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Those who testified before the subcommittee today included Dr. Antonia C. Novello, Surgeon General of the U.S. Public Health Service; U.S. Representatives Richard Durbin (D-IL) and Romano Mazzoli (D-KY); William H. Farland, Director of the EPA's Office of Health and Environmental Assessment -- the office that classified ETS as a Group A carcinogen; Gerald Thacker, Acting Commissioner of the Public Building Service; Patricia Lattimore, Acting Director of the Office of Personnel Management; Dr. Alfred Munzer, President of the American Lung Association; Dr. John W. Hoyt, Chairman of Critical Care Medicine at the St. Frances Medical Center in Pittsburgh, Pennsylvania; and Mark W. Hurwitz, Executive Vice President of the Building Owners and Managers Association International.

RICHARD J. DURBIN

26TH DISTRICT, ILLINOIS

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BEFORE THE

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MARCH 11, 1993

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On January 7, after several years of intensive study, the Environmental Protection Agency formally classified environmental tobacco smoke as a Group A carcinogen. This classification is reserved for substances which are known to cause cancer in humans, including asbestos, benzene, and arsenic.

EPA found that secondhand smoke causes approximately 3,000 lung cancer deaths annually in U.S. nonsmokers.

In addition, exposure to secondhand smoke causes 150,000 to 300,000 lower respiratory tract infections such as bronchitis and pneumonia in young children each year, causes additional episodes of asthma and increased severity of asthma symptoms in children who already have asthma, and may be a risk factor for 8,000 to 26,000 new cases of asthma annually in children who would not otherwise become asthmatic.

In response to these facts, I introduced legislation, H.R. 710, to protect federal employees from secondhand smoke in the federal workplace and to protect children from secondhand smoke while they are participating in federally-funded children's programs. I am pleased to have more than 40 cosponsors for this measure, including Mr. Hansen and Mr. Mazzoli as lead cosponsors.

Mr. Chairman, with regard to federal workers, the bills you and I have introduced both have the same goal, the protection of federal employees who count on us to provide them with a safe environment as they serve the American people.

Rep. Richard J. Durbin -- Page Two

My legislation would prohibit smoking in all federal buildings, except in areas that are ventilated separately from the rest of the building.

The EPA and others who have examined this issue have told us there are only two ways to protect nonsmokers from the hazards of breathing secondhand smoke. Either indoor smoking must be banned, or it must be limited to separately-ventilated smoking areas.

Separate smoking sections that are not separately ventilated are not acceptable, because the smoke recirculates through the building's ventilation system directly into the rooms used by nonsmokers.

My legislation does not require that agencies establish separately-ventilated smoking rooms, nor does it authorize funding to making the engineering changes that might be necessary. However, it leaves open the possibility of separate ventilation in cases where separate ventilation could be accomplished without significant cost.

If we take action on smoking in federal office buildings, we will be following the lead of many private companies throughout the country. In a 1991 survey of members of the Society for Human Resource Management, 34% of the firms that responded indicated they have declared their facilities "smokefree". Five years earlier, only 2% of the firms were smokefree. Today the percentage is undoubtedly even larger.

It is time for the federal government to provide its workers with the same basic protection against secondhand smoke that is offered by a growing number of private sector employers.

Mr. Chairman, I appreciate your desire to act on this issue, and I hope that our colleagues will join us in bringing the smoking policies under federal jurisdiction into conformity with the scientific and health findings of the EPA and the growing practice in private office buildings throughout the country.

Thank you again for bringing attention to this issue.



Third District, Kentucky

NEWS
RELEASE

Congressman Ron Mazzoli

*Testimony of the Honorable Romano L. Mazzoli
House Subcommittee on Public Buildings and Grounds
Smoking in Federal Buildings
March 11, 1993*

Mr. Chairman:

Thank you very much for allowing me to appear before your subcommittee today with my distinguished colleague from Illinois, Mr. Durbin. It is also an honor to testify after the Surgeon General of the United States, Dr. Antonia Novello who has been a true leader on smoking and health issues. In particular, I recall her efforts last year to ask the Tobacco industry to voluntarily halt the Joe Camel advertising campaign, an effort which I also took up on the Floor of the House.

The bill before the subcommittee today is H.R. 881, legislation which would prohibit smoking in federal buildings, including the United States Capitol. As you are probably aware, I, along with my colleagues, Mr. Durbin and Mr. Hansen of Utah, am a sponsor of H.R. 710 introduced in early February. Our bill, the PRO-KIDS Act of 1993, would also establish a no-smoking policy in the federal workplace and in any federally funded facilities housing children.

Mr. Chairman, as I said on the Floor a few weeks ago, the trend today is toward smoke-free facilities. The White House has gone smoke-free. Governor Wilson in California has signed an executive order prohibiting smoking in state buildings, prisons, and hospitals. Governor Brereton Jones in my own state of Kentucky is implementing a smoking policy that would limit smoking to designated areas in state buildings. And, Louisville city government and Jefferson County government agencies are also going this route.

This comes about in large part because of the mounting evidence that tobacco smoke contains ingredients harmful to both the user and to those who breathe smoke in secondhand.

The Environmental Protection Agency report of January 7, 1993 is the latest and among the more persuasive such statements. The report classified secondhand smoke as a Class A carcinogen and identified it as responsible for approximately 3000 lung cancer deaths annually in nonsmokers. The report also concluded that exposure to secondhand smoke causes hundreds of thousands respiratory illnesses among children and increases the severity of asthma among children who have that affliction.

Some groups are challenging the science behind the EPA's report, but the plain fact is this: exposure to tobacco smoke -- either directly or passively inhaled -- cannot be good for anyone's health, and may in fact be quite harmful to one's health. For this reason, and for the legal liability issues raised by the EPA report, governments and private firms throughout the country are moving to restrict and even prohibit smoking in their buildings. And, I do not doubt that the Occupational Safety and Health Administration (OSHA) is examining workplace rules changes relating to smoking at this very moment.

The time has come for the Federal government to adopt a non-smoking policy to promote the health of both smokers and non-smokers. And, this policy should cover the Capitol complex. I would note that a recent survey conducted by Mr. Durbin concluded that many Members of the House support making the House smoke-free.

Finally, although I come from a tobacco state, I am taking this position because of my concern for the health of all people. And, in the coming debate over health care reform, tobacco use, and tobacco taxes, Congress has an obligation to establish a conversion program for tobacco farmers and workers in tobacco dependent states like Kentucky.

This means creating transition and conversion programs to assist tobacco growers in moving into alternative crops, helping tobacco states attract food processing facilities to give growers markets for produce other than tobacco, and providing retraining assistance for tobacco workers who might be displaced due to decreasing tobacco production.

Those good people in my state who -- for reasons of tradition and history -- have made their living from tobacco will be affected by these national trends and the actions of government and, as in the case of defense worker-conversion programs, the government has a responsibility to help these people.

So in conclusion, I support your efforts and I thank you again for allowing me to testify.

I welcome your questions at this time.

HEARING ON H.R. 881

STATEMENT OF REPRESENTATIVE NICK RAHALL

Mr. Chairman, I appreciate the opportunity to address the members of this subcommittee during your consideration of H.R. 881, legislation to ban smoking in all facilities owned or leased by the federal government. I have a number of concerns about this proposal that I respectfully urge my colleagues to consider as you evaluate whether legislation of this kind is necessary and whether it can be expected to have a productive impact on the federal workplace.

Mr. Chairman, let me describe my concerns. First, since 1986, when the General Services Administration issued guidelines on smoking in GSA-owned or -leased facilities, virtually all Executive departments and agencies have adopted policies to manage workplace smoking. Under the current restrictions, smoking in most federal facilities has been limited to specifically designated areas and, in the event of a conflict between smokers and nonsmokers, the wishes of nonsmokers prevail. There simply is no good evidence that this approach has failed.

A second problem with this proposal is that it ignores a number of important precepts which governed development of the original GSA guidelines. The first of these was the desire to accommodate workers who choose to smoke, as noted in the preface

to the GSA rule, which states: "The proposed regulations also recognized the needs of those who smoke and permitted the designation of smoking areas. These areas were proposed to allow those who smoke to continue to do so conveniently and without affecting productivity. Hence, the policy attempted to recognize the rights, needs and concerns of all employees." This legislation completely abandons that important principle.

Third, this legislation also completely abandons the notion that individual departments and agencies of the federal government should have the flexibility to set the smoking policies that suit their workforce. Under this proposal, the same regulation would apply to the Department of Health and Human Services and to every small field office in the Department of Agriculture. It ignores the fact that employees in different offices may have very different preferences, that smoking bans may impose disparate hardships in different locations, and that conditions of occupancy and ventilation are not always the same. Individual departments and agencies are very well capable of managing smoking among their workforce, they have done so successfully to date, and they should continue to have the discretion to do so.

Fourth, this proposal fails to consider the rights of organized labor and the workers it represents, who consider workplace smoking a condition of work negotiable through collective bargaining. An AFL-CIO policy statement on workplace smoking notes that "unions have a legal responsibility to

represent the interests of all their members -- smokers and nonsmokers," and recommends that issues related to workplace smoking be worked out "voluntarily...in a manner that protects the interests and rights of all workers."

In fact, most of the unions whose members are directly affected by this legislation have expressed no dissatisfaction to me with current policies on smoking in the workplace, and are not likely to embrace more onerous burdens on a significant number of their members. All of these unions have more pressing concerns, chief among them how to keep their jobs. Many also are concerned about the overall problem of indoor air quality, which causes significant illnesses among many of their members.

In a recent survey of Social Security Administration workers, for example -- many of whom are housed in General Services Administration buildings where smoking is banned or severely restricted -- virtually all respondents who reported health problems on the job blamed poor workplace air quality for their illnesses. GSA is happy to support a ban on smoking yet has done little to address this more substantive concern, despite its public commitment to do so at the time it announced its regulation of smoking.

Mr. Chairman, I am aware that one of the primary motivations of legislation to ban smoking in the workplace is the risk assessment of environmental tobacco smoke released by the Environmental Protection Agency earlier this year. I am not a scientist, so I will not presume today to tell you that the EPA's