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Fighting the Good Fight: Unions, Social Class, and Reducing Exposure to Tobacco Smoke at the Workplace

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Coming from the labor movement, I have been known to enjoy a good fight -- and given our present economic state, there are many things to fight over. Abuses of corporate power -- Enron and Worldcom are unique only in that they made the news; mass layoffs; shrinking worker incomes; skyrocketing CEO pay raises; vicious employer-run anti-union campaigns; loss of health insurance and pensions; global trade that puts profits above people -- these are only a few of the critical issues today's workers face.

It is important to place what I am about to say in the context of this pitched battle over the new economy, for I believe issues of power and control are critical to understanding the fight that I have recently joined: the fight to reduce involuntary exposure to second-hand smoke in the workplace.

In the great scheme of things, reducing workplace exposure to tobacco smoke seems to pale as a worker priority compared to protecting one's pension or losing one's job. I do not pretend any equivalency. But workplace exposure to tobacco smoke *is* an important issue and has a startling impact on workers' health and safety. Second-hand smoke is a Class A Carcinogen, which means that there is no safe level of exposure. Yet second-hand tobacco smoke is the *only* Class A carcinogen that is not regulated at the work site by either the EPA or OSHA. Consequently, an average office worker who works in a smoky office inhales carcinogenic toxins equivalent to smoking six cigarettes during an 8-hour shift; a bartender in a smoky bar inhales the equivalent toxins found in smoking sixteen cigarettes.

The results of such exposure are devastating to workers. Most of you already know the statistics. Tobacco is the leading cause of death in the United States and causes 90% of all lung cancer deaths, 30% of all cancers and 20% of all deaths by heart disease. Smoking greatly increases the harm of other workplace hazards -- an asbestos worker who smokes has a 5000% higher chance of suffering lung cancer than the general population -- ten times the risk faced by his non-smoking co-worker. Waitresses have the highest incidence of lung cancer of all working women. Bar and restaurant workers suffer a 50% higher rate of lung cancer. Non-smoking nurses exposed to second-hand smoke have a 49 to 92% higher risk of heart disease. I could go on.

Minnesota has been a national leader on banning smoking in the workplace, yet even here nearly 40% of all work sites still expose workers to second-hand tobacco smoke. Even more important is the stubborn fact that construction workers, blue collar workers, and service workers -- the workers who objectively are harmed most by tobacco smoke -- are also the ones most likely to smoke, are most exposed to second-hand smoke at their work sites, and are most resistant to preventive health efforts and workplace smoking bans. Given the undisputed harm of tobacco smoke, why, as I have heard several public health professionals lament, do labor unions often fight workplace smoking restrictions as an infringement on workers' rights, rather than see restricting exposure to tobacco smoke as a way to protect workers' safety? It is this "stubborn fact" -- the historical resistance of certain workers and unions to smoking bans and other cessation efforts -- that I would like to speculate on during the rest of this talk.

Let me begin with three passages. The first is from Barbara Ehrenreich's recent book *Nickel and Dimed*. Working as a waitress at Jerry's restaurant, Ehrenreich describes how many of her co-workers would dash back to a dingy area in the back room next to the toilet to hurriedly take several puffs between orders. Despite the gross conditions under which her co-workers could smoke -- think about under what conditions many smokers in Minnesota are forced to smoke -- Ehrenreich tries to understand the appeal smoking held for them in terms of worker control and power. She explains that

work is what you do for others; smoking is what you do for yourself. I don't know why the antismoking crusaders have never grasped the element of defiant self-nurturance that makes the habit so endearing to its victims -- as if, in the American workplace, the only thing that people have to call their own is the tumors they are nourishing and the spare moments they devote to feeding them (37).

The next two passages come from Martha Balshem's *Cancer in the Community*, a study of a cancer prevention campaign in Tannerstown, a working class neighborhood in Philadelphia with high cancer rates. Key to reducing cancer rates in the Tannerstown program (and common to most preventive health programs) was an emphasis on lifestyle changes -- an approach that was heavily resisted by the working class residents. Again, these passages challenge authority and address issues of power and control. One community member emphatically denied a link between lifestyle changes and getting cancer by saying:

I think its God's will, to tell the truth one might eat good and one might eat bad, one might smoke, one might not smoke, and it's still coming up, you get it or you don't get it.... At least with your heart, if you take care of yourself and do what you're supposed to do, you'll be alright, but cancer -- there's no control for it. No matter what you do, it's still there....It's just -- you bide your time -- until, until--you know, until you die (74).

Another resident responded:

Over the past two decades everything has been this causes cancer and that --- and people are to the point now where they think everything you eat causes cancer and nobody really knows what causes cancer (76).

If fighting to reduce worker exposure to tobacco smoke is in fact “the good fight,” I suggest we must take seriously the issues of power and control raised in these three passages or risk losing the fight. I do not pretend to have specific answers, that is for a project I will discuss later, but I would like to examine these issues through four specific lenses: working class authority, worker rights, worker defiance, and worker empowerment.

I will begin with the power and authority of social class. Social class in the United States is a hard thing to define. For purposes of this discussion, I suggest that such traditional markers as income, birth, education and occupation may contribute to, but do not define, social class standing. Rather, I suggest class position derives largely from one’s relative access to power and control over one’s destiny and work (along with the cultural communities that stem from such shared experiences). What defines those in a professional or upper class is (1) their relatively high access to the individuals and institutions that make fundamental decisions over their political, economic and social well-being, and (2) their significant control over the pace, direction and content of their work-life. Conversely, what distinguishes the working class experience is relatively less access to the institutions of power and less control over the daily routine of their work.

Thus, Ehrenreich’s statement “*work is what you do for others; smoking is what you do for yourself*” eloquently describes a complex web of social class relations. For many workers, their workday is prescribed by others according to class lines: the distinction between the “suits and the shirts” and between white and blue and pink-collar work make this hierarchical pecking order readily apparent in most workplaces. And for many workers, loss of control at the workplace coincides with larger external threats to their autonomy and security. Global trade threatens jobs; plant closures threaten communities; corporate greed threatens pensions; changing demographics threaten neighborhoods; rising costs and sinking income threaten standards of living; ever-increasing demands on time threaten home life.

According to much of the research done on social class perceptions of power, working class individuals may often appear resigned to forces outside their control, at the same time (understandably) there is often resentment against such external power. Included may be questions of health and medical authority that appear to stem from larger (and uncontrollable) external forces. Consequently, as the one Tannerstown resident said: “... *cancer -- there’s no control for it. No matter what you do, it’s still there,*” while another resident suggested that people still had control over their families, but “*I don’t think you’ll ever have control over your government or your health....*” (77). Both of these statements are objectively arguable and for many people are true.

Yet, many preventative health programs continue to almost exclusively emphasize lifestyle changes: proper diet and exercise, quitting smoking, limiting alcohol, etc. While the intent may be one of empowerment -- that individuals *can* control their health to a certain extent through lifestyle changes -- such efforts must also be interpreted in terms of social class. What might seem like empowerment to a person in power may be rejected as blaming the victim from someone with less power (or resented as one more professional suit telling workers what they should think and do). Even the startling medical statistics I began this talk with are steeped in class authority that determine cause, effect, and, even if unintentional, position blame. Thus, the

language used to discuss smoking (and its subsequent health related problems and public health efforts aimed to mitigate them) is also often a language that expresses and reinforces class differences. From this perspective, the statement "*Work is what you do for others; smoking is what you do for yourself*" may be seen as a statement celebrating personal autonomy, power and control over at least one aspect of the working day, just as it reinforces a work system and workplace often built at the expense of workers' power and workers' health.

Which leads us to workers' rights. I have already mentioned a sentiment among some public health groups that unions too often define smoking as a worker's right, rather than as a worker safety issue. Certainly workers have a right to a safe work environment. But unionized workers also have the right (even obligation) to fight the imposition of certain work rules by an employer. The tension between these two "workers' rights" is not easily resolved.

It is important to understand the legal issues involved in a unionized setting. Where workers are organized, a union is the legally recognized agent to bargain on behalf of those workers over wages, benefits and terms and conditions of employment. Any issue that impacts these areas are considered by the National Labor Relations Board (or NLRB -- the national agency responsible for overseeing labor relations and enforcing national labor law) to be a "mandatory subject of bargaining." Smoking rules, unless specifically stated otherwise in the contract, are considered a "term and condition of employment" and thus are a mandatory subject of bargaining. What this means, in short, is that an employer in a unionized setting cannot unilaterally implement a smoking ban without negotiating it with the union. If they do unilaterally implement a smoking policy, they are likely breaking the law. Likewise, a union that fails to negotiate in such a situation risks being charged with failing to fairly represent its workers, since by law it must represent both smokers and non-smokers. Although it is changing somewhat in recent years, historically, the NLRB has been fairly consistent in ruling that smoking rules (and even the implementation of many state and local smoking ordinances) must be negotiated with the union before implementation.

The question then is not that unions should stop interpreting smoking as a workers' right and begin seeing it as a workers' safety issue; rather it is a question of unions negotiating conflicting rights within a work environment. This negotiation must address existing power relations between the employer and the union and within the union itself. Without taking into account the legal obligation of the union to negotiate all terms and conditions of employment (and its own internal power relations) smoking bans can easily be interpreted (and rightfully so) as yet another employer attempt to strip away the rights of workers.

Finally, I want to say a few words about smoking as a tool of active worker defiance and resistance. Ehrenreich's statement that "*in the American workplace, the only thing that people have to call their own is the tumors they are nourishing and the spare moments they devote to feeding them*" may send chills up many of our spines. But for many workers, who face a faster work-pace driven by higher productivity demands, job and skill loss due to automation, and increased job insecurity, their work day is largely routinized and determined by others (bosses and supervisors) or by external forces beyond their control (customer and competitive demands).

Within this work context, smoking often is one of the only legitimate means for carving out individual space and declaring a certain autonomy from the work routine. In many workplaces, such as the restaurant Ehrenreich worked at, workers have no break time, except if they smoke. Teaching assistants used to tell me that they could always take a break to smoke away from their students, while their non-smoking co-workers were assigned other duties. Many nurses smoke because smoking and the time spent walking to and from the designated area are often the only breaks they have during their day. As a union representative, I sometimes heard complaints from workers that smokers took longer breaks (try walking down four floors to the loading dock and inhaling a cigarette in fifteen minutes). Yet, I never heard of a smoker being disciplined for taking that extra five minutes. I do not discount the power of addiction, but there is also a social aspect to smoking (and a calculated aspect to taking the time to smoke) that speaks to current conditions in the workplace just as much as nicotine cravings.

We may be fighting to reduce worker exposure to tobacco smoke, but we also need to be aware of and acknowledge the ways workers use smoking as a means for claiming time for themselves and creatively resisting oppressive work schedules and work environments. Without taking into account this power dynamic, I am afraid many of our attempts to further limit smoking will be seen (accurately) as another attempt to further regulate and erode worker autonomy and control.

So where do we go from here? I start with a very strong bias -- one that is probably widely shared in this room. I believe worker exposure to tobacco-smoke, as a Class A carcinogen, should be regulated and workers' safety (especially those exposed to second-hand smoke involuntarily) must be protected. I also believe the differential in power between workers and employers has generally widened over the recent decades, accompanied by a concerted attack on workers' rights and their unions. This, too, must be part of our fight. So I would like to end with some shameless self-promotion and with two reflections on worker empowerment, for my interest in this fight is to build worker power and create healthier, safer working conditions.

First, the shameless self-promotion. Recently I began working on a project in collaboration with Susan Weisman and the Tobacco Law Project called WorkSHIFTS -- or Stopping the Harmful Impact of Tobacco Smoke in the Workplace. Over the next two years (and beyond, hopefully) we will be working with unions, workers and collaborating with the Minnesota Nurses Association, which is also sponsoring an exciting project, to develop strategies to reduce workplace exposure to second-hand smoke. We will be working directly with workers to develop appropriate curriculum materials explaining second-hand smoke as a work site hazard. Longer term, we will be examining what legal recourse and resources might be available to workers harmed by second-hand smoke in the workplace, either through passing new laws or under existing Workers Compensation and other safety laws and regulations.

In structuring this project, we aim to stay true to two central tenets drawn from the discussion above.

- One, the fight to reduce exposure to tobacco smoke must be sensitive to social class and recognize class differences and differentials of power. Public health efforts to reduce exposure to second-hand tobacco smoke should listen to workers, incorporate their class experience, and have workers speak out of their own experience to their co-workers.

- Two, we must integrally involve unions in developing strategies to address the tension between competing workers' rights. Unilaterally implementing policies without the involvement of workers (and their unions) and in the absence of education will disempower, rather than empower workers, and ultimately threaten the success of any program.

There is encouraging news on this front. A recent survey indicates that nearly half of 800 surveyed union leaders support smoking bans or restrictions at the workplace, while only 8% oppose such restrictions. Some unions are already leading the way. In California, BUILT (Building Trades Unions Ignite Less Tobacco) has developed an innovative curriculum that links controlling exposure to tobacco smoke with controlling exposure to other harmful chemicals in the workplace. Others union efforts include the Laborers, Association of Flight Attendants, New York's Health and Human Services Employee's union, among others.

I want to end by saying that we *can* stop many of the harmful effects of tobacco smoke for workers if we involve workers in developing and promoting the effort and if we acknowledge and address the power relationships and realities of the contemporary workplace. With these two key tenets in mind, how about joining in a really good fight?

Thank you.