

Somali Health Care Experience – Revisiting hookah/shisha and exploring intersections with violence

King County Somali Health Board

August 20, 2014

With speakers:

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- **Officers Gerald House and Brian Sutphin, Seattle Police Department**

After first discussing hookah/shisha in November 2013, the Somali Health Board chose to revisit the topic. In addition to discussing the health effects of hookah and shisha, the SHB hoped to shed light on a tragedy that occurred in June outside one of the hookah bars in Seattle. A young Somali man was shot and killed.

Overview of hookah/shisha

A hookah is a glass pipe filled with water used for smoking tobacco, marijuana, and other substances such as a tobacco and molasses mixture commonly referred to as shisha. Hookah is often smoked in a social setting where a group of friends gather around a single pipe. Hookah bars or lounges are designed to create a social area where groups can rent hookahs and purchase tobacco. The main demographic of hookah users are youth and young adults under 25 years old.

People who smoke hookah often claim that hookah use is less dangerous than cigarettes because of the sweet smell and taste and the belief that the water "filters" the smoke, reducing toxicant exposure. They perceive hookah use to be exotic, cultural, social, and non-addictive. However, the truth is that hookah use is dangerous. Data demonstrates that the water does not filter anything; it simply makes the smoke easier to breathe in more deeply. Even after passing through the water, the smoke from a hookah has high levels of toxic agents.

Hookah smoking carries all of the health risks associated with cigarettes and other tobacco products. Perhaps the most pervasive myth is that hookah doesn't contain nicotine, when in fact, it does. In Seattle, 90 percent of the tablets at hookah bars contain nicotine. The nicotine in hookah affects the brain and travels through the body, even if one does not smoke cigarettes. After just one or two hookah, the brain begins to change. Nicotine receptors begin to develop in the brain and the body starts to crave nicotine.

In addition, the charcoal used to heat the tobacco can raise health risks by producing high levels of carbon monoxide, metals, and cancer-causing chemicals. When tested for carbon monoxide in their bodies, using a CO monitor, hookah smokers often test very high, at levels even more dangerous than those seen among people who smoke cigarettes. High levels of carbon monoxide in the body can be fatal if maintained overtime. Smoking hookah, like smoking cigarettes, can lead to lung, bladder, and oral cancers, as well as heart disease and emphysema.

In young people, use of hookah is linked to experimentation with cigarettes. An 18-year-old who has never smoked cigarettes who goes to a hookah lounge is eight times more likely to start smoking cigarettes.

Additionally, because multiple people share the mouthpiece of a hookah, smoking hookah raises concerns about spreading communicable diseases, including herpes, hepatitis, and tuberculosis.

Yet the risks of hookahs have not yet stopped their growing popularity, especially among young adults under the legal drinking age looking for an alternative to a bar for an evening out. In the United States, hookah lounges are springing up in urban areas and around colleges. A recent

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survey of college students in the U.S. found that over 30% reported using hookah within the last year.

Hookah lounges in King County

Approximately 15 hookah lounges currently exist in Seattle, with a few more elsewhere in the county. Public Health – Seattle & King County believes the lounges are in violation of Washington State Smoking in Public Places Law (RCW 70.160). As a result, Public Health has taken legal action on six, aiming to change the way the lounges operate. What Public Health *would* tolerate is use of ‘steam stones,’ a product introduced as a tobacco alternative for use in hookahs. These heat-treated porous materials are soaked in fluid—usually glycerin—and heated in hookahs, where the tobacco would normally be placed, to create a smoke-like vapor.

Two hookah lounges have appealed the legal actions, but both decisions were upheld.

Question & Answer

Q: Does secondhand smoke in hookah lounges pose a health risk for nonsmokers?

A: Secondhand smoke from hookahs can indeed pose health risks for nonsmokers. The amount of smoke inhaled during a typical 45 minute hookah session is about 90,000 mL, compared with 500-600 mL inhaled when smoking a cigarette. It’s easy to imagine how much of those 90,000 mL of gases are released into the air. The volume of secondhand smoke is much greater in a hookah lounge than in a room with a person smoking a cigarette. Furthermore, secondhand smoke from hookahs contains smoke from the tobacco as well as smoke from the heat source used in the hookah (i.e., charcoal). Hookah smoke in the home during pregnancy has also been linked to low-weight babies.

Q: What are the cultural aspects of hookah/shisha?

A: Hookah use began centuries ago in ancient Persia and India. Today, hookah lounges are gaining popularity around the world, including in Britain, France, Russia, the Middle East, and the United States. In the U.S., hookah use is becoming increasingly prevalent among young people and college students. The use of hookah is new to Somali culture and does not have long-standing cultural origins.

Q: I’m against hookah. But because there is a cultural element to it that began generations ago in the Middle East, don’t we need to be sensitive to that and to those who smoke hookah for cultural reasons?

A: Absolutely. But we need to educate people and address the rampant misinformation and myths around hookah use—it is not a safer alternative to smoking cigarettes or using other forms of tobacco, and the water vapor does not make it any less harmful. Furthermore, many young people today who smoke hookah aren’t doing it for cultural reasons. They’re doing it because they enjoy the social aspect and because they perceive it as safe. The truth is, young people who smoke hookah may become not only biologically addicted to nicotine, but also *socially* addicted to hanging out with their friends around a hookah pipe, making the habit even harder to break. That

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is why we need to educate about the health effects of hookah use and the risk for addiction, as well as encourage young people to be social without hookah.

Q: Are hookah lounges exempt from Washington State Smoking in Public Places Law?

A: The smoking ban (RCW 70.160) does not make any exceptions for hookah smoking. All places that are open to the public or that have employees are prohibited from allowing smoking of any kind. Public Health views smoking in hookah bars as a violation of the law and is working to actively enforce the smoking ban in hookah bars just as the law is enforced in any other bar or restaurant. However, as the popularity of hookah spreads, business owners are becoming more creative in their attempt to find a loophole in the Washington State Smoking in Public Places Law. Hookah lounge owners are calling their establishments “private clubs” and charging a “membership fee” to avoid being categorized as public places. What this fee commonly amounts to is \$5 yearly, which Public Health considers even less prohibitive than a cover charge to enter a bar or dance club—public places where the smoking ban must always be upheld. The ploy to charge a small “membership fee” does not offer hookah lounges protection against the Smoking in Public Places Law. Furthermore, lounges are in violation if anyone working at a lounge, whether they get paid or not, is exposed to secondhand smoke. This is the case for virtually all the lounges, since they all depend on employees.

Q: Why is Public Health investigating only six of the hookah lounges in King County? Why not investigate them all?

A: There are approximately 15 hookah lounges in Seattle and a few more in other parts of King County. Public Health is beginning to conduct investigations by starting with the six hookah lounges that employ the largest number of people. All six have been cited for violation of Washington State Smoking in Public Places Law. Two lounges have appealed, but the decisions have been upheld. The King County Attorney is weighing in on the six cases because of the cultural element of hookah and the complexity of the lounges’ “private club” argument. All the lounges currently targeted with legal action could be shut down if they continue to operate the way they do.

Q: What about electronic hookahs? Do those exist? Are they similar to electronic cigarettes?

A: Electronic hookahs do exist. They use electricity, rather than coal, to heat up the liquid and turn it into a vapor. This mechanism is similar to how electronic cigarettes work. The use of electronic vaporizers presents a public health challenge. When in liquid form, nicotine, marijuana, and even meth can be heated and smoked using vapor technology. It is also troubling that users of vaporizers perceive them to be safe. The tobacco industry believes e-cigarettes will surpass traditional cigarettes in sales in the next five years. In King County, it is prohibited to use e-cigarettes or any type of vaporizer where traditional cigarettes are banned.

Q: As Public Health addresses the legality of hookah lounges, and as the police work to reduce the violence associated with them, what is being done to inform and empower the Somali community?

A: Public Health would like to develop a public awareness campaign to dispel the myths around hookah use and to prompt conversations about the related violence. Unfortunately, funding is at an all-time low, so there isn’t currently a funding source for such a campaign. However, Somali leaders,

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community members, and health professionals are all capable of sharing this information. All are encouraged to bring up these issues with their families, students, patients, and clients, and to incorporate these messages into presentations they give or handouts they create. Additionally, community members might consider submitting an Op-Ed to a Somali newspaper or organizing to get something about hookah use on Somali TV. Business owners do not need to be attacked; strong messages about the effects of hookah on health and the community will suffice.

Intersections with violence

From mid-June to mid-August of this year, seven shots were fired in or around two hookah lounges in Seattle. One tragic shooting in early summer left a young Somali man dead. The source of violence is multifold. The lounges often close late, anywhere between 2 and 4am, so people migrate to the lounges, already intoxicated, to smoke hookah after a night at bars and clubs. In addition, ethnic tensions and gang activity among young people often worsen in the early hours of the morning, especially when exacerbated by alcohol and drug use. Spice, a dangerous and hallucinogenic synthetic marijuana, is rumored to be used in some lounges and has been implicated elsewhere in crimes and violent behavior.

Police have also heard rumors that illegal gambling, underage drinking and smoking, prostitution, and trafficking of underage girls may take place in the lounges. Unfortunately, with only rumors heard through the grapevine, police are unable to directly investigate these concerns. They cannot work on hearsay; they need concrete evidence that a crime has occurred. Furthermore, it is difficult for police to discreetly enter lounges and fly under-the-radar—the clientele is tight-knit and police don't often fit in.

Deeply concerned, the entire Somali community, including the mosques, is discussing these issues. The community may work with the police to help provide concrete evidence, in particular by volunteering males to enter the lounges to attempt to “buy” a girl and to observe any other illegal activity. If reports of prostitution or other illegal behaviors do come back, the police will then have the authority to investigate the issue further.

A cousin of the young man who died in June attended the Somali Health Board meeting and spoke about the tragic loss of his family member. He urged Somali community members to learn about the health risks of hookah/shisha and the violence associated with the lounges, and to educate each other. He mentioned that many people, including women, athletes, and families, mistakenly believe hookah is harmless. In addition, over the last two decades, many local Somali youth have grown up between two cultures. They don't know that hookah/shisha wasn't a part of the culture in Somalia.

This young man also has been working to create healthier social outlets for young people in the Somali community. He organized a soccer tournament this summer and partnered with the City to obtain a field and security for the event. A basketball tournament is in the works for this winter, as well as other potential programs on college campuses. Through continued community initiatives, partnerships with Public Health, and collaboration with the Seattle Police Department, the Somali community seeks to promote healthier, safer activities, stop the violence, and seek justice for those whose lives have been lost.