

Smoke-Free Housing: Success Stories from Local Health Departments



The National Association of County and City Health Officials (NACCHO) works with local health departments (LHDs) to build capacity for local-level tobacco prevention and control. In the past few years, LHDs have focused their prevention and control efforts on implementing the U.S. Department of Housing and Urban Development (HUD) Smoke-free Public Housing Ruling. With increasing awareness of the risk of exposure to secondhand smoke, residents are creating a demand for smoke-free housing.¹ For residents, clean air greatly improves health outcomes. For landlords and owners, a nonsmoking policy saves money by reducing maintenance, tenant turnover, and fire hazard costs.¹

Because benefits of smoke-free housing and living are extensive, HUD mandated a rule that requires all federally funded public housing agencies to develop smoke-free indoor policies by July 2018. The rule prohibits the use of cigarettes, cigars, pipes, and hookah in all indoor areas and within 25 feet of buildings.² The rule will positively affect the 1.2 million households that reside in federally owned public housing and according to the CDC, could save nearly \$497 million in healthcare costs.³

To further assist LHDs in applying smoke-free housing policies in their communities, NACCHO sought to identify LHDs with experience engaging in cross-sectoral partnerships to implement smoke-free, private and/or public multi-unit housing. As a part of NACCHO's CDC-funded chronic disease portfolio and tobacco work, through this scan we hoped to better understand the facilitators, challenges, lessons learned, and resources needed for the rule to effectively be executed.

The following five LHD stories highlight successes in areas including rural health, resident/community engagement and buy-in, partnerships/coalition building, sustainability, policy development, media campaigns, advertising, and more.

Approximately one-fourth of all Americans live in multiunit housing. The Centers for Disease Control and Prevention estimates that eliminating smoking in public housing could save nearly \$497 million in healthcare costs.

Communities Featured

- Cincinnati Health Department - Cincinnati, Ohio
- Monroe County Health Department - Bloomington, Indiana
- El Paso County Public Health - Colorado Springs, Colorado
- Cook County Health Department - Suburban Cook County, Illinois
- Lake County General Health District - Mentor, Ohio

References

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Cincinnati Health Department: Engaging the Community for Smoke-Free Success

June 2018

Synopsis

By engaging residents at each step in the process, Cincinnati Health Department's Creating Healthy Communities Coalition helped to implement a smoke-free multi-unit housing (SFMUH) policy for Cincinnati Metropolitan Housing Authority's 13,000 public housing residents.

Challenge

Everyone deserves a safe and healthy home, free from exposure to environmental hazards, including secondhand smoke. For this reason, the Cincinnati Health Department's Creating Healthy Communities program has identified the implementation of smoke-free multi-unit housing policies as one of its key healthy living strategies. Even for nonsmokers, secondhand smoke exposure causes heart disease, stroke, lung cancer, sudden infant death syndrome, and serves as a trigger for asthma. SFMUH policies improve and protect the health of all residents, guests, and employees (smokers and nonsmokers) and are particularly beneficial to vulnerable populations including children, the elderly, and people with chronic illnesses.

In July 2016, CMHA took a major step to improve the quality of life for its 13,000 residents by implementing a smoke-free policy that reduces exposure to secondhand smoke and minimizes fire risks at its 18 multi-unit housing sites and over 350 single-family dwellings. Public housing residents have higher rates of cigarette smoking than the general population, which is why resident engagement was vital to ensuring the success of the SFMUH policy.

Solution

Once CMHA's Board of Trustees decided in favor of SFMUH policy adoption, CHD began providing technical assistance and engaging residents at each step in the process: planning, education, implementation, enforcement, and identifying tobacco cessation options. Notably, several CMHA residents were trained as Freedom From Smoking facilitators (American Lung Association) to lead group smoking cessation classes at CMHA sites.

Designing, implementing, and promoting the smoke-free policy was a collaborative effort among CMHA, CHD's Creating Healthy Communities Coalition (CHCC), the American Lung Association, Cincinnati Children's Hospital Medical Cen-



ter (CCHMC), Environmental Protection Agency, Hamilton County Public Health, the American Cancer Society, American Heart/Stroke Association, Cradle Cincinnati, and the Jurisdictional Wide Resident Advisory Board (J-RAB) which comprises CMHA residents. The Ohio Department of Health and Interact for Health provided funding and support to ensure the success of this project.

Results

CMHA's SFMUH policy was implemented at its 18 multi-unit housing locations and several hundred CMHA-managed single-family homes. Designated outdoor smoking areas have been installed at each site and signage and butt receptacles were provided by CHD and American Lung Association.

Nicotine air sampling was conducted at six CMHA housing sites. Initial data will be compared to data collected one year after policy implementation (currently underway) to gauge the policy's effect on indoor air quality.

In February 2017, Cincinnati Health Department began recruiting CMHA youth (ages 11-17) to join Cincinnati STAND, a youth-led campaign which encourages kids to "stand up and speak out against tobacco." The group aims to eliminate the cultural acceptance of tobacco use, counter tobacco advertising, and prevent youth smoking initiation. Many residents—both smokers and nonsmokers—have shown support and expressed pride in members' activities. Residents have helped to serve food at meetings and assisted with transporting members to events. The first Freedom From Smoking cessation class began in May 2017. An average of seven residents attended meetings, which were co-facilitated by a CMHA resident.

Lessons Learned

Work with Cincinnati Metropolitan Housing Authority in implementing their 2016 SFMUH policy began in 2015. Engaging residents by asking their opinions, addressing their concerns, and keeping them informed about the process was critical. Training residents to facilitate group smoking cessation classes creating champions within the CMHA housing sites.

Engaging youth at the beginning of the process would have been more beneficial and created even more community buy-in. Young people who are passionate about a cause can serve as great advocates for their friends and family. Cincinnati Health Department's work with CMHA in successfully implementing an SFMUH policy by focusing on community/resident engagement, including youth, is replicable.



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Monroe County Health Department Creates Community Coalition for Sustainable Success

June 2018



Synopsis

When it comes to public health, community partnership is everything. Funding comes and goes, but the partnerships you create helps make it possible to sustain program missions even when the funds disappear.

Challenge

Monroe County Tobacco Coalition began in 2001, under a grant to Bloomington Hospital (now IU Health Bloomington) from the Indiana State Department of Health. The grant paid for a staff member to coordinate the coalition, a facilitator, and funding to create small community grants for tobacco-related programs. Core members of the coalition then, as well as now, included staff from IU Health Bloomington Hospital, Indiana University, City of Bloomington and the Monroe County Health Department. Other organizations were also represented, including the YMCA, Head Start, and Rhinos. The coalition worked together and accomplished many things, including implementing tobacco cessation classes and supporting and promoting local and state smoking bans. The Monroe County Tobacco Coalition continued to receive funding until 2012, when funding was cut at the state level.

Solution

The Monroe County Tobacco Coalition members decided that the coalition's mission was too important to stop, even when it lost its funding. IU Health Bloomington Hospital picked up the role of the coordinator. The other core organizations continued to dedicate staff time to facilitating the community tobacco cessation classes.

The coalition continued to meet, although not as often, to educate themselves and others about new tobacco information and laws. The smoke-free housing law was important, as the city has several public housing communities. In anticipation of the new law, coalition members contacted public housing staff members and offered to hold cessation classes at the public housing site. The staff at local housing authority had a better idea: they decided to become tobacco cessation facilitators themselves.

Coalition members arranged for housing authority staff to attend an introductory tobacco cessation facilitation class. Housing authority staff later were able to expand their knowledge when they attended a day-long tobacco cessation facilitation class created and implemented by the Tobacco Coalition. Along with learning increased skills in teaching tobacco cessation, they received programming materials and support as well as a training manual to help them implement classes and support their residents.

Results

By working together, the Monroe County Tobacco Coalition made it possible to train staff from the local public housing community how to facilitate tobacco cessation classes. The Housing Authority staff now can offer group classes or one-on-one appointments to serve their population more efficiently. Internalizing the program also helps to promote sustainability, both for the public housing community and for the Tobacco Coalition.

Lessons Learned

The partnerships with our public health partners IU Health Bloomington Hospital, City of Bloomington, Indiana University, and others are one of our biggest assets in doing the work of public health. Adding our resources together allows us all to offer an even stronger level of service and support to our community.

Note: The tobacco coalition was rewarded for its efforts after core members worked together to apply for a tobacco cessation grant and were funded again for 2018. The grant from the Indiana State Department of Health is held at IU Health Bloomington Hospital. It pays for a coordinator to support and strengthen the coalition.

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El Paso County Public Health Partners with Housing Authority to Implement Successful Smoke-Free Policy

June 2018



Synopsis

Residents of multi-unit housing are at a greater risk of being exposed to second-hand smoke. El Paso County Public Health (EPCPH) is partnering with the Colorado Springs Housing Authority

(CSHA) to implement a 100% smoke-free policy, with the objective of reducing secondhand smoke exposure and the harmful health effects of tobacco.

Challenge

Secondhand smoke (SHS) poses serious health risks for all children and adults; these include lung cancer, heart disease, severe asthma, and Sudden Infant Death Syndrome.¹ The Surgeon General has concluded there is no safe level of SHS exposure, and the only way to protect nonsmokers is by eliminating indoor smoking.¹ Residents of multi-unit housing are particularly susceptible to SHS exposure in their homes due to smoke traveling through doorways, cracks in walls, and ventilation systems, as well as drifting throughout common areas.² In El Paso County, 47% of adults living in multi-unit housing have reported smoke drifting into their home.³ While the number of smoke-free multi-unit housing available in the United States has increased significantly in the last decade, not all Colorado Springs residents have the ability to choose where they live. Families with low socioeconomic status (SES) are often limited to public housing, where the smoking rates are nearly double that of the general population, at 33.6%, and where smoke-free policies are non-existent.⁴

Solution

The Department of Housing and Urban Development (HUD) announced a rule in February 2017 requiring all public housing to become smoke-free by July 30, 2018. The smoke-free policy will also include electronic smoking devices and eliminate outdoor designated smoking areas. The

first step of the implementation process was to communicate the policy to residents and staff at all CSHA properties. This communication began in the fall of 2017, approximately ten months prior to the effective date, to allow adequate time for questions, clarification, and feedback from residents. EPCPH began attending resident meetings to talk about the smoke-free policy—including the importance of the policy, harms of secondhand smoke, and to provide tobacco cessation resources. EPCPH has provided technical assistance to CSHA by providing resources on industry best practices and developing a pre-assessment, which will be distributed to residents of the CSHA properties in spring 2018. This information will be analyzed and used to help further guide this initiative.

Results

EPCPH was able to reach approximately 160 of the 471 residents living in multi-unit properties in fall 2017 through resident meetings. The overall response to the new policy was positive, as many residents communicated they had been exposed to secondhand smoke in their home. Current smokers expressed concern about having to leave their home to smoke. While residents are not being asked to quit, tobacco cessation materials were provided to all residents in response to this concern. Presenters communicated that the smoke-free policy is not an attack on smokers, but an effort to protect





everyone from secondhand smoke. EPCPH and CSHA are hoping that the pre-assessment will be able to identify more attitudes and opinions about the smoke-free policy.

Lessons Learned

The required HUD ruling was the key component of this initiative. Although adopting a 100% smoke-free policy portfolio-wide had been a long-time goal for the CSHA, the federal ruling provided a unique opportunity to reduce negative feedback from residents and staff and create a more positive experience. The ruling also provided a specific timeline and clear policy requirements.

Communication with residents and staff has also been an important part of the process. Posters and signage were hung immediately to notify residents of the upcoming policy. EPCPH began presenting at resident meetings to inform residents and answer questions. The policy is being promoted in a very positive, caring manner, which has been well-received by most residents. Perhaps the most powerful message to residents has been that the smoke-free policy is not about the smokers themselves, but rather, the dangers of secondhand smoke. As a result, residents have provided informal feedback that they do not feel attacked, shamed, or pressured to move from their residence.

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Cook County Health Department Helps Suburban Renters Breathe Easier

June 2018



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Public Health
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Synopsis

As of September 2017, over 6,800 residents in suburban Cook County, Illinois can breathe easier in their smoke-free multi-unit homes. This success resulted from outreach, education, and technical assistance by the Cook County Department of Public Health (CCDPH) and its partners. This initiative was funded, in part, by the Centers for Disease Control and Prevention.

Challenge

Where people live can affect their health and well-being. According to a survey of suburban Cook County renters, 66% of residents live in multi-unit buildings that allow smoking. In a multi-unit building, 35 to 65% of the air in any given unit is shared air from other units and common areas, so residents have an increased exposure to secondhand smoke. Residents who live in a building where smoking indoors is allowed increases the risk of heart attacks, stroke, lung cancer, and early death. The Surgeon General concludes that the only way to fully protect nonsmokers from secondhand smoke is to prohibit smoking in all indoor areas.

Solution

To address this issue, CCDPH and its partners, American Lung Association of Greater Chicago, Respiratory Health Association, and South Suburban Mayors and Managers Association, supported property owners and managers in implementing smoke-free protections. Property owners and managers were educated on the health, safety, and economic benefits of implementing smoke-free housing. They were provided technical assistance to help with the implementation process. CCDPH and its partners also conducted presentations for residents to educate them on the benefits of smoke-free living and connected those who smoked and were interested in quitting with the Illinois Tobacco Quitline.

Results

Over 550 property owner and managers, 460 management companies, and 100 community organizations, groups, and associations were contacted. In addition, more than 1,100 smoke-free housing toolkits and over 150 technical assistance encounters were provided. Because of these efforts, a total of 3,185 units in 73 public and market-rate properties across 25 municipalities became smoke-free. Over 3,300 residents are being spared from secondhand smoke exposure, and it is expected that more than 40 residents will quit smoking. Property owners and managers are expected to save over \$9.4 million in turn-over costs when preparing smoke-free units for new renters.

Building upon the relationship established with the Housing Authority of Cook County, the public housing authority for suburban Cook County, presentations on smoke-free housing has become a part of the voucher housing education program for property owners and managers. CCDPH has also archived materials including videos, fact sheets, and a toolkit to support property owners and managers with implementation of smoke-free protections on the Healthy HotSpot website. Healthy HotSpot is an initiative led by CCDPH that aims to build healthy places in suburban Cook County through community partnerships. Learn more at www.healthyhotspot.org.





Lessons Learned

Much of the multi-unit housing stock within suburban Cook County are owned by individuals whose main occupation may not be as a property owner or manager. Challenges in reaching these key stakeholders forced CCDPH and its partners to re-examine and tailor our outreach process. Several steps were taken and included: 1) Expanding outreach to non-traditional partners such as municipal groups, crime-free housing coordinators, and community champions, and leveraging these new relationships to promote the benefits of smoke-free housing at established meetings; 2) Tailoring messaging to our target audience that emphasized savings in turn-over cost, which was of utmost importance to property owners and managers; and 3) Developing a stages of change assessment tool that helped to gauge the readiness of property owners and managers to implement smoke-free housing. This multi-faceted approach led to the greater dissemination of messaging, particularly to property managers and owners, that allowed for increased awareness of the legality, health, and financial benefits of implementing smoke-free housing.

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Lake County General Health District Incorporates Ten Essential Services for Smoke-free Success

June 2018



Synopsis

Smoke-free multi-unit housing benefits residents and property owners. HUD requires that every U.S. public housing agency implement a smoke-free policy by July 2018. Local health departments play a key role in working with public housing agencies to prepare, implement, educate, enforce, and evaluate smoke-free housing policies. The challenge remains in the entire process of adopting 100% smoke-free policy in multi-unit housing.

Challenge

The process must begin with buy-in support from management and residents. Next is the successful adoption and implementation of the smoke-free policy, education, compliance and enforcement, and assistance to those who want to quit; all of which could take years. The population most impacted by the HUD ruling are those with low income, the elderly, those with mental and physical disabilities, and single parents whose ability to earn a living wage is constrained by family responsibilities and sometimes limited education. These populations also have disproportionately higher smoking rates. One-third (33.6%) of adults in public housing smoke compared to 15.1 % of the general public.¹ 36.5% of adults with any mental illness reported current use of tobacco in 2013 compared to 25.3% of adults with no mental illness.² Nearly 32% of adults without a high school diploma and 50% of adults with a GED use tobacco every day or some days, compared to just 10% among adults with an undergraduate degree and 6% with a graduate degree.³ Those populations who smoke are more likely to suffer from asthma and chronic obstructive pulmonary disease.

Solution

The solution is to utilize the public health system and incorporate the 10 Essential Public Health Services to solve the problem. Lake County General Health District began addressing the issue of smoking in multi-unit housing in fall 2015. The assessment portion had been completed by HUD, so the next steps were policy development and assurance. The first activity was to establish a relationship with the Lake Metropolitan Housing Authority (MHA) and discuss the implementation of a smoke-free policy.

Management and residents were surveyed on the acceptance, challenges, and barriers to implementing a smoke-free policy and survey data were provided to them. Development of fact sheets and presentations are essential to educating both management and residents on the purpose and benefits of a smoke-free policy, as well as collaboration with management on the smoke-free policy, Non-Smoking Lease Addendum, and non-smoking enforcement procedure. Correct verbiage is important, and documents should be reviewed by housing lawyers. Once the Non-Smoking Lease Addendum is approved, it is crucial to have the resident initial every point, indicating that they understand the policy. The next step is evaluating the smoke-free policy implementation process and outcome, and lastly, working within the community to provide linkage to cessation services to residents who want to quit.



Results

Preliminary work with Lake MHA has positioned them to be prepared to execute the mandated HUD ruling. Adoption of the 100% smoke-free policy is slow, but implementation will occur before the required deadline of July 2018. Survey assessment of management and single individual residents was completed in July 2016. Management was in full support of adopting a smoke-free multi-unit housing policy, but said that the greatest barrier will be successful enforcement. Of the 135 single residents surveyed, 78 (58%) wanted a smoke-free building; of those, 17 were smokers. In 2017, 35 Lake County Family units were surveyed and found 20 (57%) wanted to live in smoke-free building/property. The survey result indicated that most residents support a smoke-free policy. Process and outcome evaluation has yet to be quantified, but will be advantageous if HUD decides to mandate Section 8 and other HUD-funded housing adopt smoke-free policies. The impact of Lake MHA's smoke-free policy will affect 263 public housing units with a population of 468; 157 (34%) are children. The smoke-free policy does not require smokers to quit, but discussion with residents have shown that the new smoke-free policy will be the motivation to help them quit.

Lessons Learned

Public health practitioners should follow the public health model of assessment, policy development, and assurance to successfully implement smoke-free policies. Though progress was not without its struggles, these activities are replicable. Now that smoke-free housing is a requirement for all public housing agencies, the main challenges that arise are developing sustainable enforcement procedures and linkage

to cessation services to those who want to quit. For public health practitioners, the findings support much-needed cessation services for vulnerable populations including the elderly, those with disabilities, and individuals with mental health issues. Working with mental health counselors may be necessary to provide cessation services. Survey data has shown to be a crucial tool to provide support for smoke-free housing. Providing evidence that most residents agree with smoke-free housing will make the final adaptation more palatable for management and residents. There was an uproar when Ohio voted for the Ohio Smoke-free Workplace Law, but now it is an accepted norm. The same will eventually occur with the smoke-free multi-unit housing law. Future studies should evaluate smoker quit rates, behavior changes, and if the health of those in public multi-unit housing improves due to less exposure to secondhand smoke.

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Acknowledgments

This publication was made possible through the support from the Centers for Disease Control and Prevention, Cooperative Agreement #1U38OT000172-04. NACCHO is grateful for this support. Its contents are solely the views of the authors and do not necessarily represent the official views of the sponsor.

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The National Association of County and City Health Officials is the voice of more than 3,000 local health departments across the country. These city, county, metropolitan, district, and tribal departments work every day to ensure the safety of the water we drink, the food we eat, and the air we breathe.

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