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To Whom It May Concern:

Thank you for the opportunity to comment on the 2015 Qualified Allocation Plan. The North Carolina (NC) Division of Public Health's Chronic Disease and Injury (CDI) Section, along with local health departments and community partners, works to develop safe and healthy communities to prevent and control chronic disease and eliminate health disparities.

North Carolina residents are protected from secondhand smoke in many public places due to smoking bans in restaurants and bars, hospitals, state government buildings, and schools, and in many local government buildings, university and college campuses, and other workplaces. However, many North Carolinians remain unprotected from secondhand smoke exposure in the place they are most vulnerable—their homes. People spend more time in their homes than they do in any other place, and the healthfulness of the home environment plays a large role in people's ability to live healthy lives.

Health risks due to smoking in multi-unit housing

Secondhand smoke is the smoke that comes from the burning end of a tobacco product or smoke that is inhaled by the person smoking. Secondhand smoke can easily travel from smokers' units to nonsmokers' units in multi-unit housing, regardless of building style or type of ventilation system present. Many health problems have been linked to secondhand smoke exposure, including heart disease, heart attack, exacerbation of asthma, lung disease, and multiple types of cancer. Childhood exposure to secondhand smoke can lead to upper respiratory infections, breathing problems, ear infections, and Sudden Infant Death Syndrome (SIDS). It has also been linked to cognitive deficits in children even at extremely low levels of exposure. The harmful substances from cigarettes linger even after secondhand smoke has cleared from a room; a residue of nicotine and toxic particles sticks to dust and surfaces such as furniture, walls, and carpets long after smoking has stopped. This residue is particularly harmful to children, who are more likely to touch surfaces and put their hands in their mouths. Smoking in multi-unit housing also puts residents at risk of injury or death due to a smoking-related fire, as such fires are the #1 cause of fire deaths in multi-unit housing.

While smoke-free policies do not mandate that smokers quit smoking, smoke-free policies often do encourage residents to quit smoking. We know from surveys of smokers in North Carolina that most do wish to quit smoking. A study of smoke-free policy implementation in multi-unit housing in Oregon found that residents smoked at lower rates and smoked fewer cigarettes after smoke-free policies went into effect. We have heard anecdotally from management companies in North Carolina with smoke-free policies that many of their residents and staff have quit smoking and have said that the smoke-free policy was the "push" they needed to quit. Resources to quit smoking are available through Quitline NC (1-800-QUIT-NOW), a free service to any North Carolina resident who needs help quitting tobacco use. Quitline NC provides counseling as well as nicotine replacement therapy.

Our work in multi-unit housing

Over the past three years, the CDI Section in the NC Division of Public Health has provided technical assistance to many affordable housing management companies that have adopted smoke-free policies at their properties throughout North Carolina. Our staff have made presentations about smoke-free policies at "lunch and learns" and conferences throughout the state, including the N.C. Affordable Housing Conference, the Southeastern Affordable Housing Management Association (SAHMA) N.C. State Meeting, the Carolinas Council for Affordable Housing Conference, and the Community Affordable Housing Equity Corporation (CAHEC) Partners Conference. Most recently we have partnered with Partnership Property Management and Westminster Company to assist in taking their portfolios smoke-free by providing smoking cessation resources, presenting at resident meetings, and developing flyers for communicating the policy change to residents. Finally, we host an online toolkit at smokefreehousingnc.com that provides materials such as sample implementation timelines, resident surveys, and lease addenda to assist owners and managers who are implementing smoke-free policies.

Smoke-free policies as a growing trend

Both HUD and USDA Rural Development have issued notices about the harmful effects of secondhand smoke in multi-unit housing and have provided guidance to properties that wish to adopt smoke-free policies. HUD has strongly recommended the adoption of smoke-free policies in Public Housing Authorities and Multifamily Housing, and has encouraged policies that address smoking in tenants' units, common areas, playground areas, areas near exterior windows or doors, and areas outside tenants' units.

Following the national trend toward smoke-free housing, smoke-free policies have become increasingly popular in our own state. In 2013, we surveyed all affordable housing properties in the state and found that 16.5% of properties had policies that banned smoking in all residential units. This percentage will increase to at least 27.9% in 2014 after Partnership Property Management and Westminster Company transition to smoke-free.

Experiences with smoke-free policies in North Carolina affordable housing

Results of the 2013 affordable housing survey showed that smoke-free properties had overall positive experiences with their policies, suggesting that some common concerns, such as losing revenue, dealing with lawsuits, or spending increased time and resources enforcing smoke-free policies, are unwarranted. Key results include the following:

- Smoke-free policy enforcement was not a burden at most properties
 - Most (85%) properties that converted to smoke-free said that staff time devoted to smoking-related issues decreased or stayed the same.
 - Half of properties reported no violations to their smoke-free policies. Most (81%) properties with violations detected them through routine inspections.
 - Legal actions to enforce smoke-free policies were rarely needed, and when they did occur they were upheld in court.
- Smoke-free properties did not lose revenue, while allowing smoking was costly in terms of turnover costs and fires
 - There was no difference in occupancy rate between smoke-free and smoking-allowed properties.
 - Turnover costs were higher in smoking-allowed units— properties estimated that the average turnover costs for smoking-allowed units were \$374.74 higher than for smokefree units. Almost all (98.8%) smoking-allowed properties said that turnover costs in smoking-allowed units were the same as or higher than smoke-free units.

 Properties reported a total of 49 smoking-related fires in the 36 months prior to the survey. Costs due to fires ranged from no costs for small or outdoor fires to a half million dollar large-scale fire; the average cost of a smoking-related fire was \$31,270.54.

A final key finding from the survey is that a disproportionate number of children lived in smoking environments— properties with more children were less likely to have smoke-free policies. This is concerning because children have smaller bodies and breathe more rapidly than adults, so they breathe in more secondhand smoke and experience worse health effects from secondhand smoke exposure.

Conclusion

Smoke-free policies promote the health and safety of residents and can help housing owners and managers save money. Successful smoke-free policy implementation is achievable with planning and consistent enforcement, and the Division of Public Health is available to assist managers that want to take their properties smoke-free. Please contact me at 919-707-5203 if you have any questions or would like to meet to further discuss this topic. We appreciate the work that you do to support the development of high-quality affordable housing in North Carolina.

Thank you again for the opportunity to comment on the 2015 Qualified Allocation Plan.

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