

# Smoke-free: Clearing the Air in Public Housing

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Interagency Committee on  
Clean Indoor Air Quality (CIAQ)

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# Background

- ❑ Secondhand smoke (SHS) adversely affects health
  - Asthma trigger, CVD, stroke, lung cancer
- ❑ Surgeon General: No safe level of exposure
- ❑ SHS exposure is more common/higher in multiunit housing (MUH) than detached housing, esp. among low-income residents

## The Health Consequences of Involuntary Exposure to Tobacco Smoke

A Report of the Surgeon General

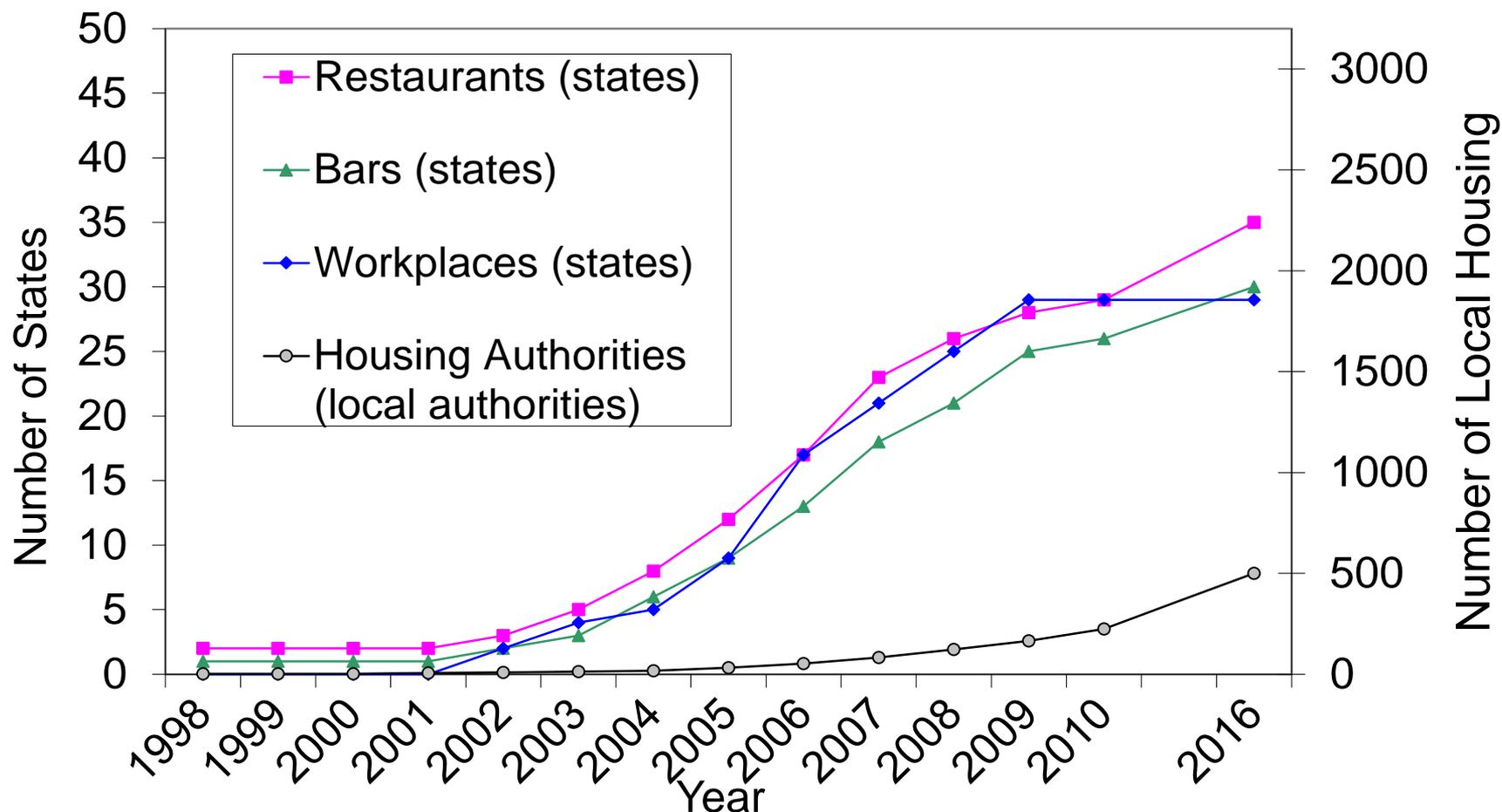


Department of Health and Human Services

# HUD Calls for Smoke-free PHAs



# Smoke-free policies through 2016



# Boston Herald, January 2010



## COLD SHOULDER

The mannequins aren't nearly as well prepared for the frigid weather as the pedestrians on Boylston Street yesterday. Luckily, today is expected to be in the balmy upper 20s.

STAFF PHOTO BY MARK GAFFINIEL

# MAYOR KICKS ASH



Menino vows to ban smoking in public housing projects, P. 2-3

- Policy initially planned for 2014 implementation



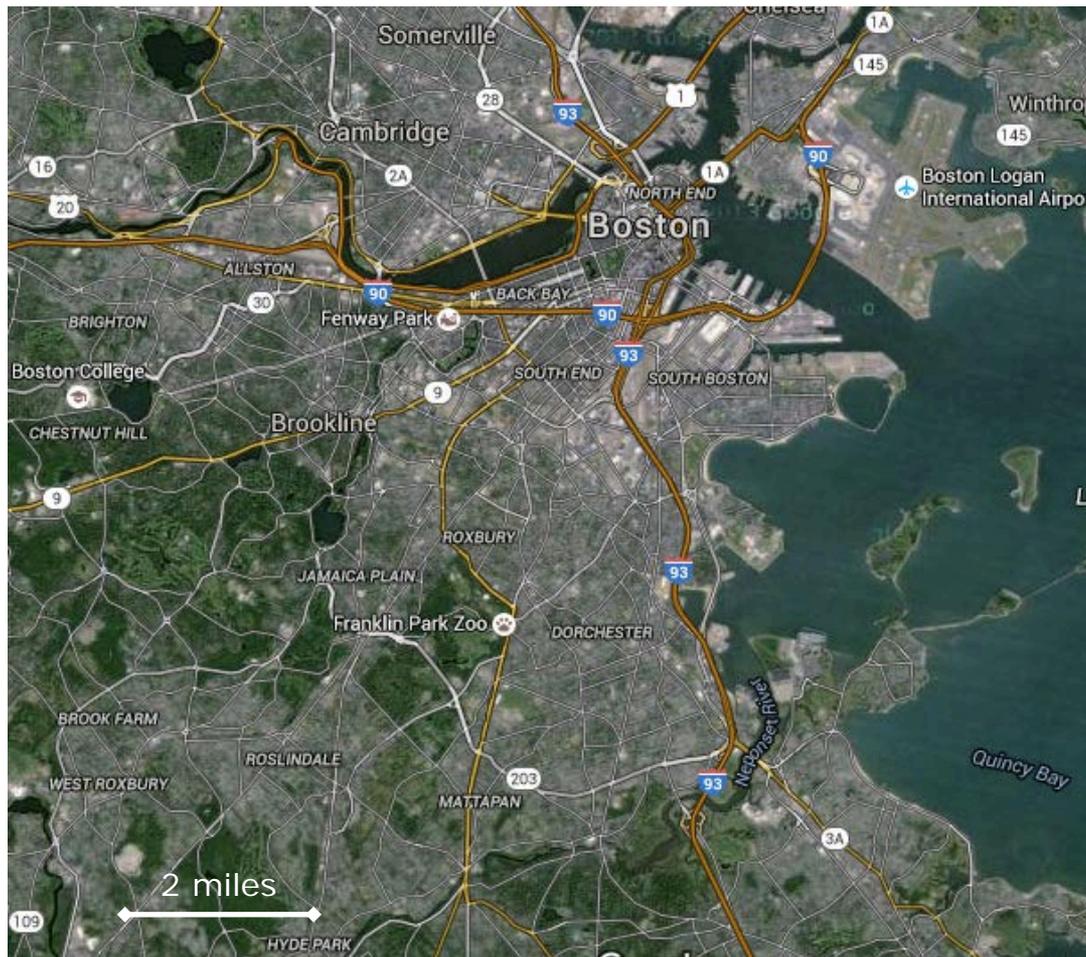
# Outline

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- Boston as a Smoke-free PHA lab
  - Pilot research studies
  - The FreshAir Study
  - Follow-ons
  
- Lessons learned
  
- Questions left unanswered

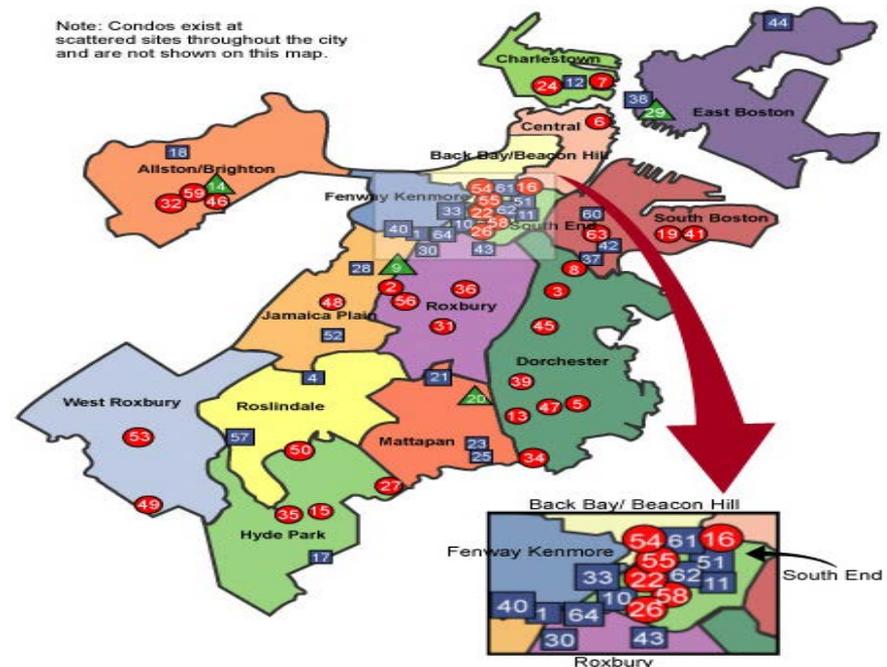


# Boston



# About the BHA

- Houses ~10% of city residents
  - >22,000 in BHA-owned buildings
- ~11,000 units
- 64 developments
  - 37 elderly/disabled
    - 25% of residents
  - 27 for families
    - 75% of residents



# About BHA residents

## □ Race/Ethnicity

- 16% white
- 32% black
- 42% Hispanic
- 10% Asian

## □ Language

- 44% English
- 28% Spanish
- 5% Mandarin/Cantonese
- Many other languages



# About BHA residents

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## □ Age

- 34% 0-17yo
- 47% 18-61yo
- 20% 62+yo

## □ Smoking

- 19%
- (vs. 14% statewide, 20% nationally)



# The Boston Housing Authority

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- A few units in BHA went smoke-free voluntarily in fall 2009
- BHA established a smoke-free housing “working group”
- Jan. 2010, mayor announces smoke-free for 2014
  - Largest PHA in U.S at the time to do so
  - Implemented September 30, 2012



# BHA's New Smoke-free Policy

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- ❑ No smoking *anywhere* in BHA buildings (including apartments) or within specified distance of building
  - Applies to residents, visitors, employees
- ❑ Violation of policy is a lease violation that could result in fines up to \$250 and ultimately eviction
- ❑ Not a ban on smokers, just a ban on smoking.

# Implementation

- ❑ Meetings to inform residents
  - Offer smoking cessation treatment
- ❑ Notify/train building managers
- ❑ Establish development-specific rules
  - Dedicated smoking areas?
  - No-smoking perimeters around buildings?
- ❑ Establish signage on properties
- ❑ Remind each household of policy at lease renewal
- ❑ Enforcement?



# Why the policy might *not* reduce SHS exposure

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- ❑ Non-compliance/ poor enforcement
- ❑ New sources of exposure as locations where smoking is permitted shift
  - E.g., non-smoker walks past smokers outside the building before entering
  - Smoke enters units through windows if smokers are too close to the building



# Pilot Studies

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- 1) Cotinine testing of BHA residents
  - *Levy et al., AJPM, 2013*
- 2) Environmental monitoring of tobacco smoke in public spaces on BHA properties
  - *Arku et al., Indoor Air, 2015*
- 3) Comparison of BHA indoor air quality in smoking-allowed vs. smoke-free units
  - *Russo et al., NTR, 2014*



# Pilot #1 – Cotinine Assessment

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- ❑ Winter 2011 (pre-policy), 2 BHA locations
- ❑ 61 volunteer subjects
- ❑ Non-smokers
- ❑ Adults and children
- ❑ \$15 for participation
- ❑ Measured
  - Saliva cotinine (a nicotine metabolite)
  - Self-reported exposure



# Pilot #1 – Results (1)

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- 88% of residents had detectable cotinine (0.15ng/mL LLD)
  - Nationally (NHANES: 0.015ng/mL LLD)
    - 40% adults (all housing)
    - 36% children in detached homes
    - 56% children in MUH
- Geometric mean cotinine = 0.52ng/mL
  - Nationally (NHANES)
    - 0.05ng/mL adults
    - 0.10ng/mL children



# Pilot #1 – Results (2) – Survey

Outcome variables		%	Cotinine (ng/mL)	p
Q1. Household smokers	No	82	0.42	0.03
	Yes	18	1.57	
Q2. Smoking rule	Smoking not allowed	70	0.40	0.006
	Smoking allowed sometimes/somew here	30	1.07	
Q3. Perceived development smoking prevalence	Half or fewer residents	54	0.62	0.33
	More than half of residents	46	0.44	
Q4. Smell tobacco smoke within home [non-smoking homes]	No	34	0.63	0.06
	Yes	66	0.36	
Q5. Smell tobacco smoke in hallways	Never/ rarely/ sometimes	40	0.86	0.03
	Usually/ always	60	0.39	

Levy et al., *AJPM*, 2013

# Pilot #2 – Environ. Monitoring

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## Study Aim:

- ❑ Compare levels of tobacco smoke pollution (TSP) in common areas of **6** BHA properties ***prior*** to the policy roll-out
  - Across building types
    - ❑ Family vs. elderly/disabled
  - Across smoking policies
    - ❑ Smoking allowed vs. not
  - Across season
    - ❑ Winter vs. summer

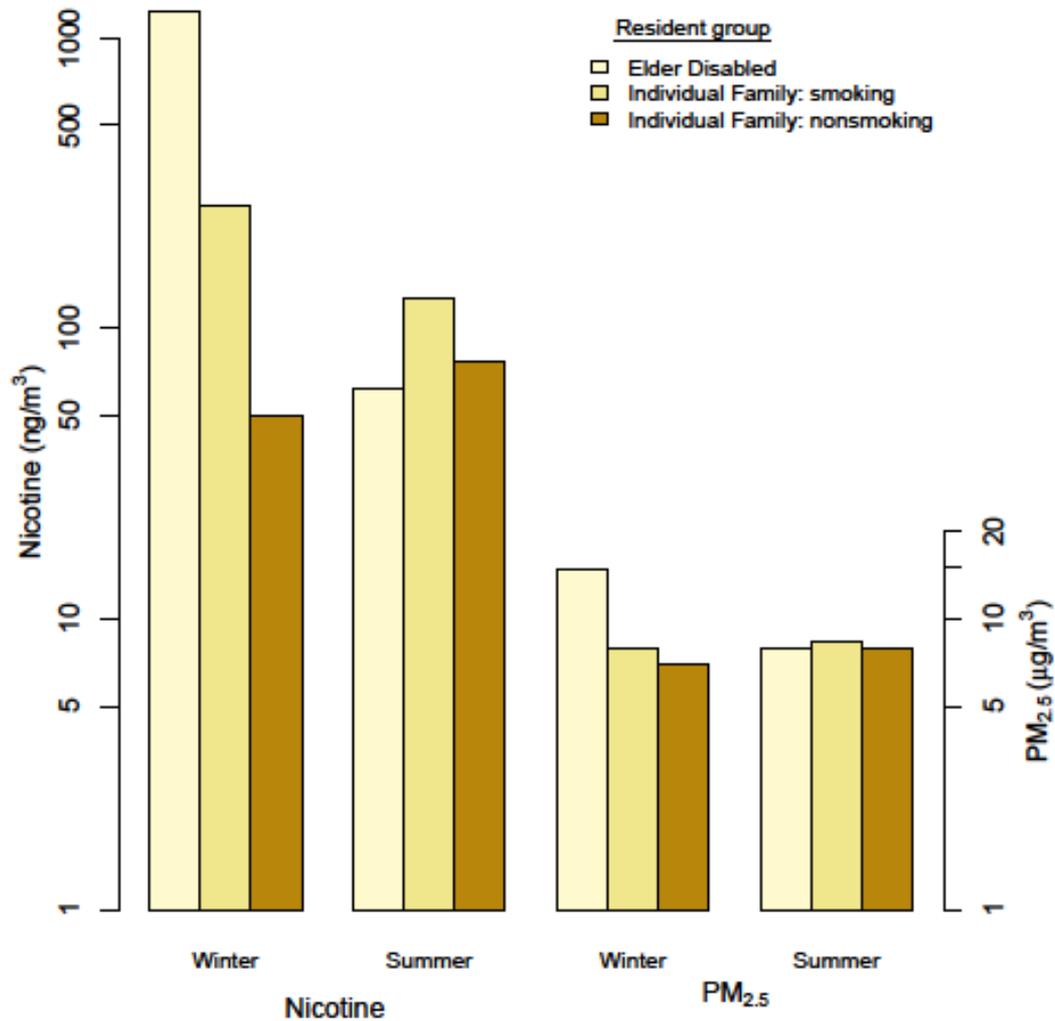


# Pilot #2 – Measures

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- Measure over 7 days each period
- Airborne nicotine
  - Passive, needs 3-7 days exposure for environments without active smoking
  - Tobacco-specific
- PM 2.5
  - Active real-time monitoring
  - Also gravimetric measurement
  - Not tobacco-specific





Arku et al., *Indoor Air*, 2015

# Pilot #3 – BPHC Study

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- BHA residents, 15 households with smokers, 17 households with no smokers in 5 housing developments
  - Some developments smoke-free pre-policy, others transitioned during measurement
- Measured air nicotine,  $PM_{2.5}$ , self-report
  - In-unit and hallway measurement



# Pilot #3 – Results (1)

## Smoking vs. Smoke-free

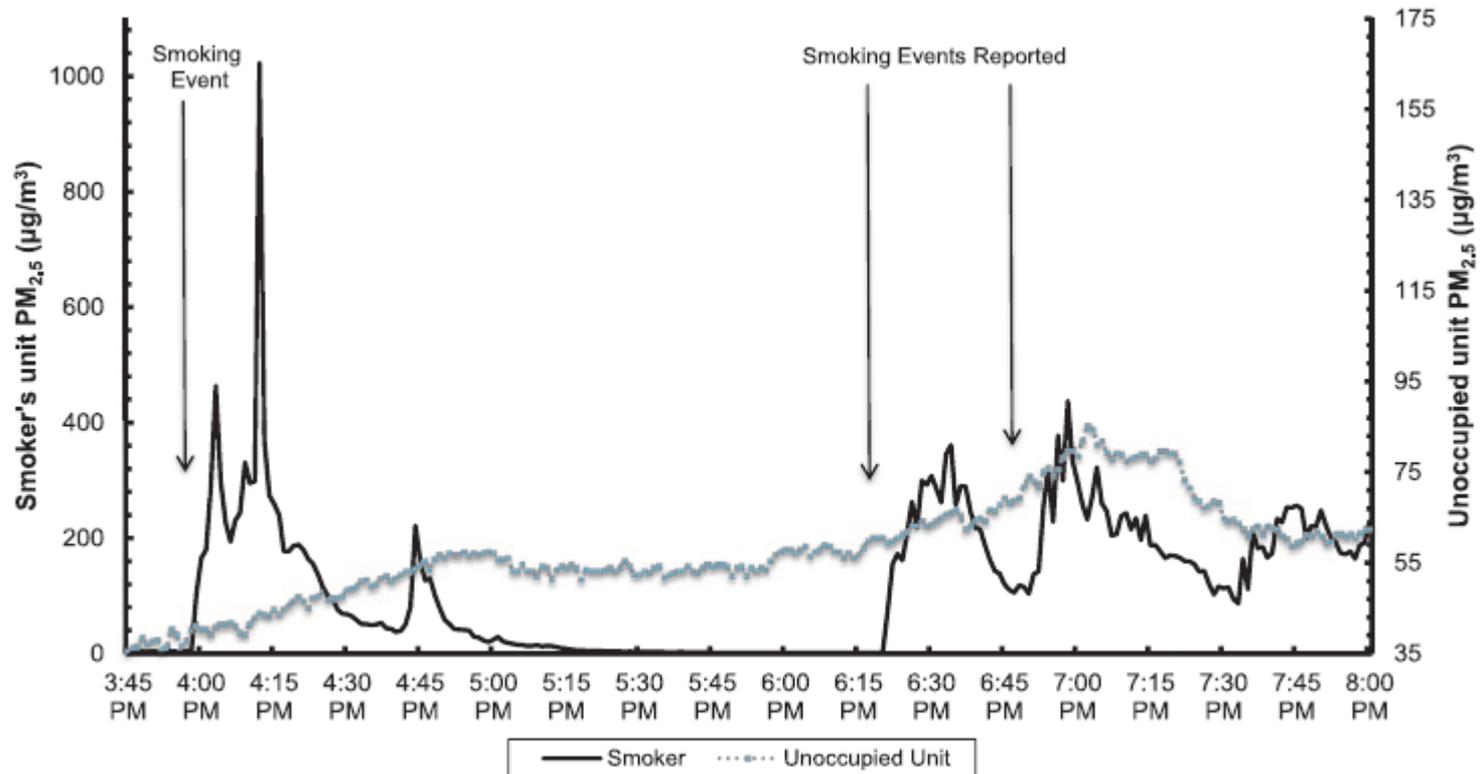
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- PM 2.5 lower in smoke-free sites
  - Households with smokers
    - 14.3 (smoking-allowed) vs. 7.0 (smoke-free) ug/m<sup>3</sup>
  - Households with no smokers
    - 5.1 (smoking-allowed) vs. 4.0 (smoke-free) ug/m<sup>3</sup>
  - Differences significant at  $p < 0.001$



# Pilot #3 Results (2)

## PM<sub>2.5</sub> in adjacent apartments



Russo et al., *NTR*, 2014



# Fresh Air Aire Fresco



A 3-year R01 to study the  
BHA's smoke-free policy

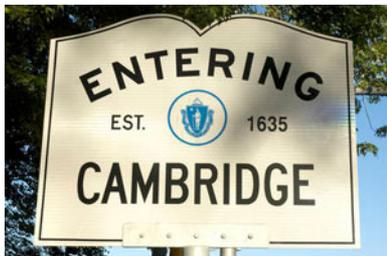
NIH/NHLBI  
R01-HL112212



# Study Design

Summer/Fall 2012

Summer/Fall 2013



Survey



Saliva  
Cotinine



Air  
Nicotine



Air  
PM 2.5



# Aims

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- ❑ Aim 1. Does smoke-free policy reduce SHS exposure/TSP?
  - Saliva cotinine, in-unit airborne nicotine, self-report
  
- ❑ Aim 2. Investigate TSP sources in BHA/CHA before and after policy
  - Common space PM<sub>2.5</sub>, airborne nicotine, survey data
  
- ❑ Aim 3. Explore resident knowledge, attitudes, beliefs, & behaviors regarding SHS/TSP and the smoke-free policy



# Inclusion Criteria

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- ❑ Residents of family developments
- ❑ Who speak English or Spanish
- ❑ Households where no one smokes
  - Also, excludes those with other use of nicotine
- ❑ Enrolled 192 eligible households in BHA, 95 households in CHA
  - 80%(157 BHA, 72 CHA) reached at f/u



# Exposure measure details

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- Self-report 
  - Survey items inquiring about locations, circumstances, duration of SHS exposure
- Nicotine monitor 
  - Deployed at interview, retrieved after  $\geq 7$  days
  - Also checklist of smoking, air conditioning, window use
- Saliva cotinine 
  - Collected at interview – 0.02ng/ml LLD

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# Fresh Air Aire Fresco

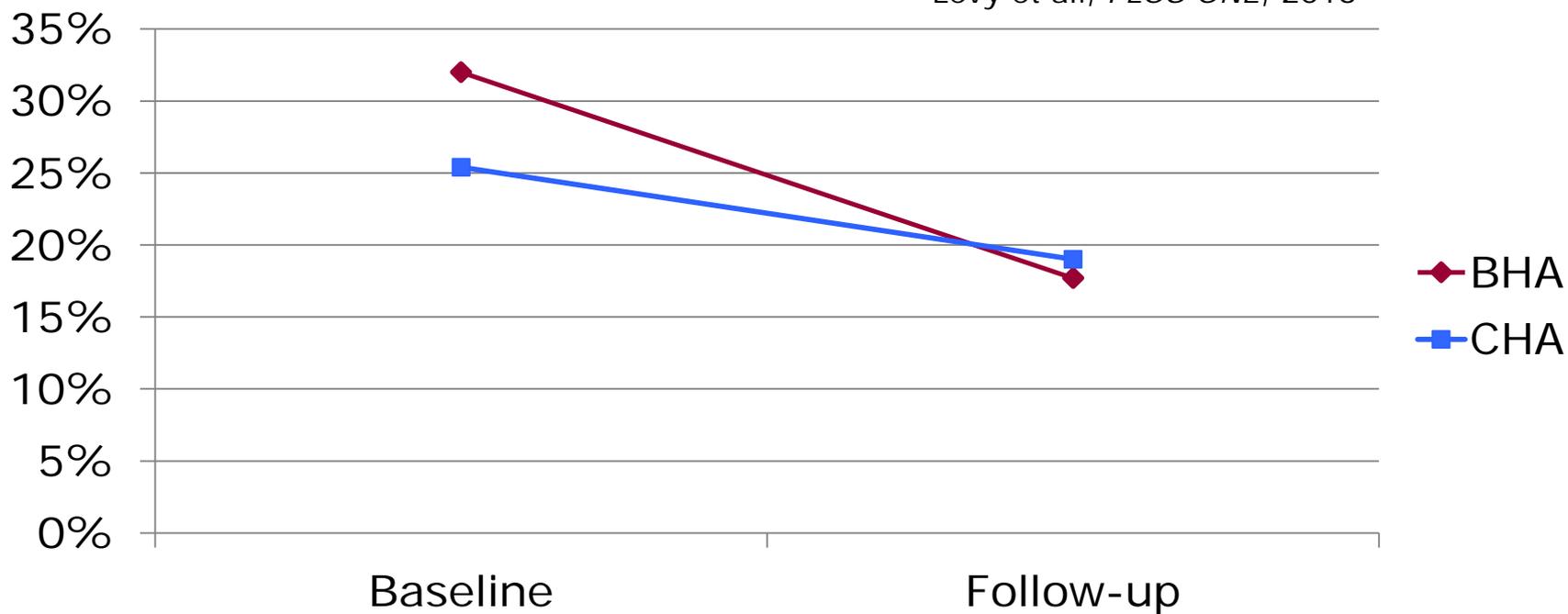
## Results



# % Residents who smell smoke in their apartments (7d)



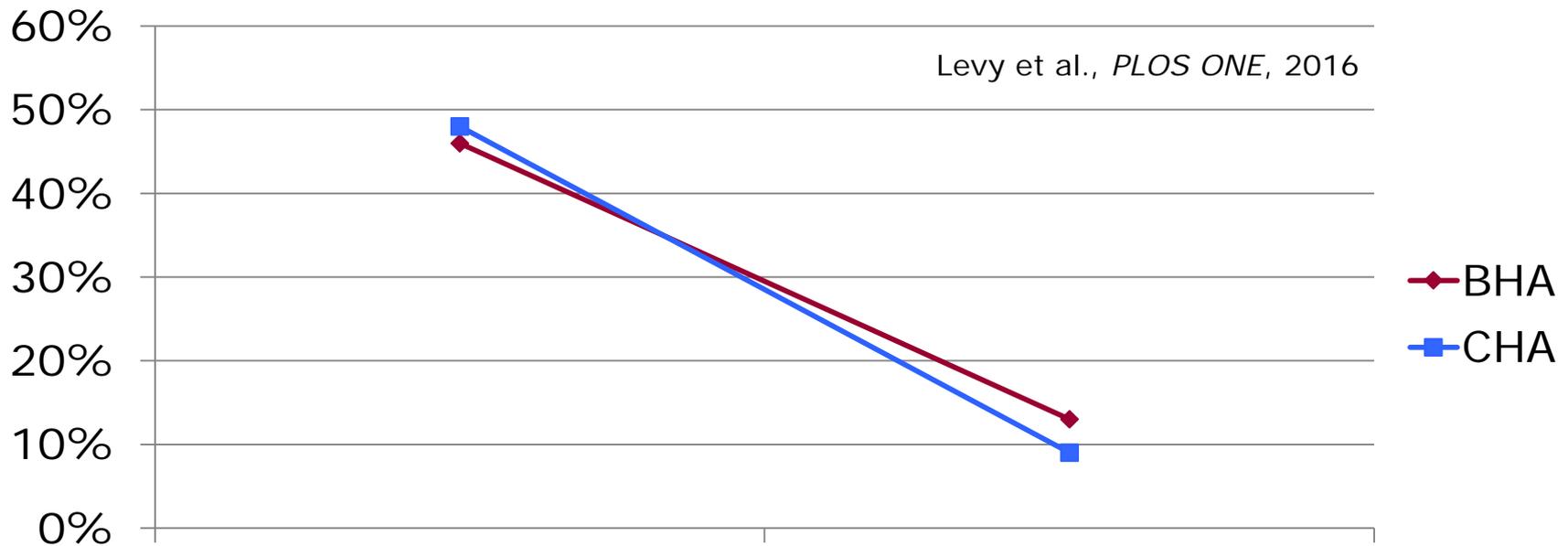
Levy et al., PLOS ONE, 2016



	BL	FU	Dif	Dif-in-Dif	P-value
BHA	32	18	-14	-8	0.34
CHA	25	19	-6		

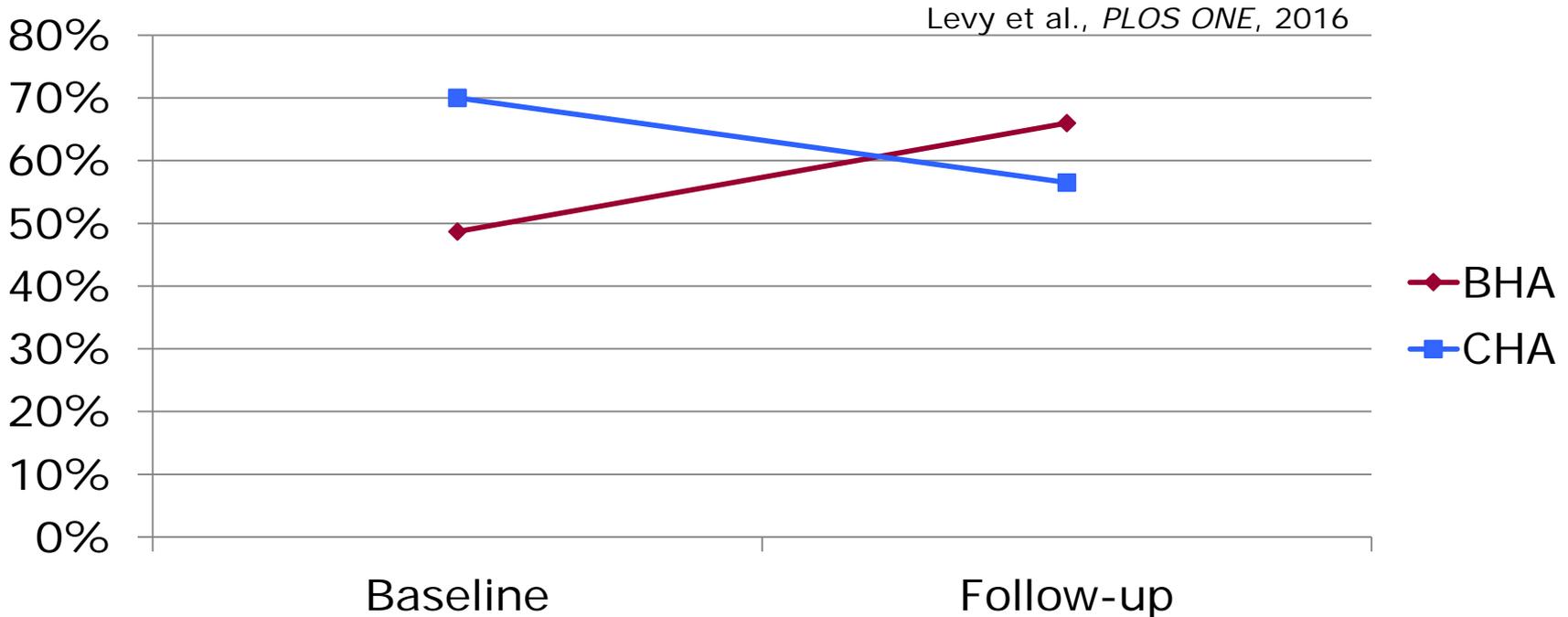


# Apartment Nicotine - % detectable



	Baseline	Follow-up			
	BL	FU	Dif	Dif-in-Dif	P-value
BHA	46	13	-33	6	0.40
CHA	48	9	-39		

# Residents' Cotinine - % detectable

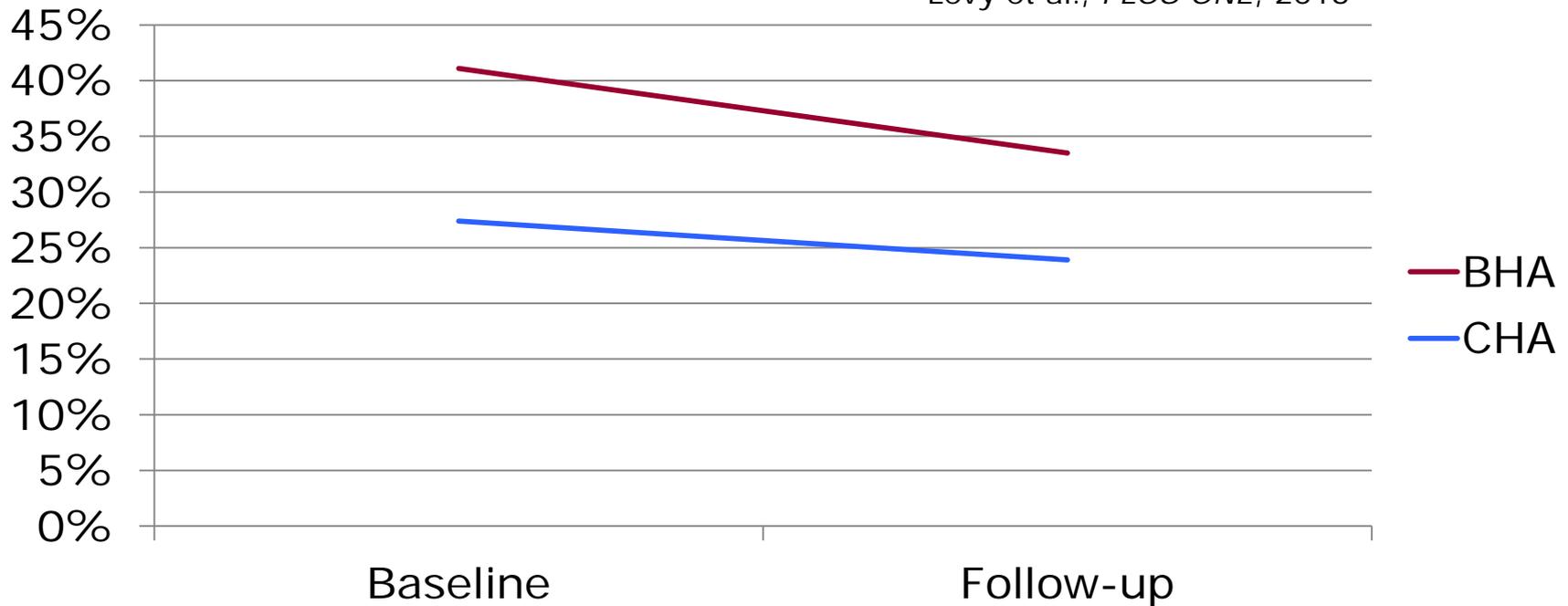


	BL	FU	Dif	Dif-in-Dif	P-value
BHA	49	66	17	30	0.002
CHA	70	57	-13		

# % Residents smell smoke outside doorways of their buildings (7d)



Levy et al., PLOS ONE, 2016

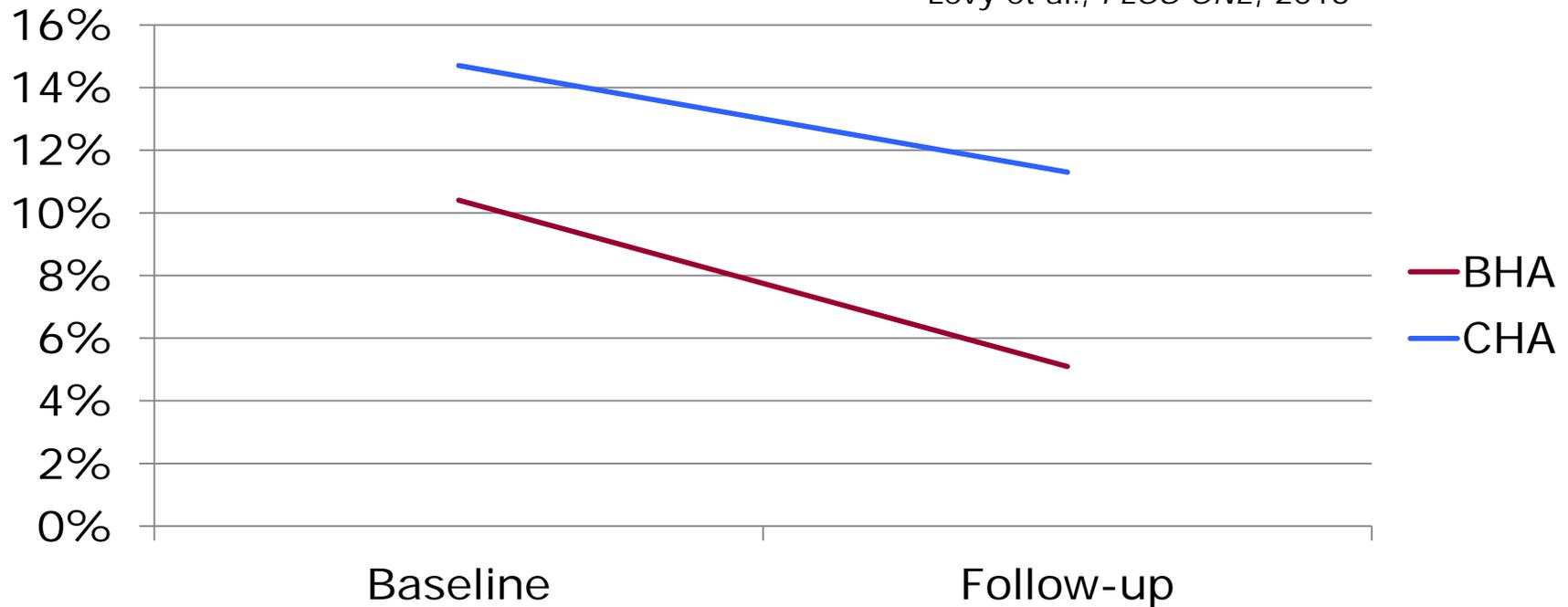


	BL	FU	Dif	Dif-in-Dif	P-value
BHA	41	34	-7	-4	0.52
CHA	27	24	-3		



# % Residents smell smoke at work (7d)

Levy et al., *PLOS ONE*, 2016

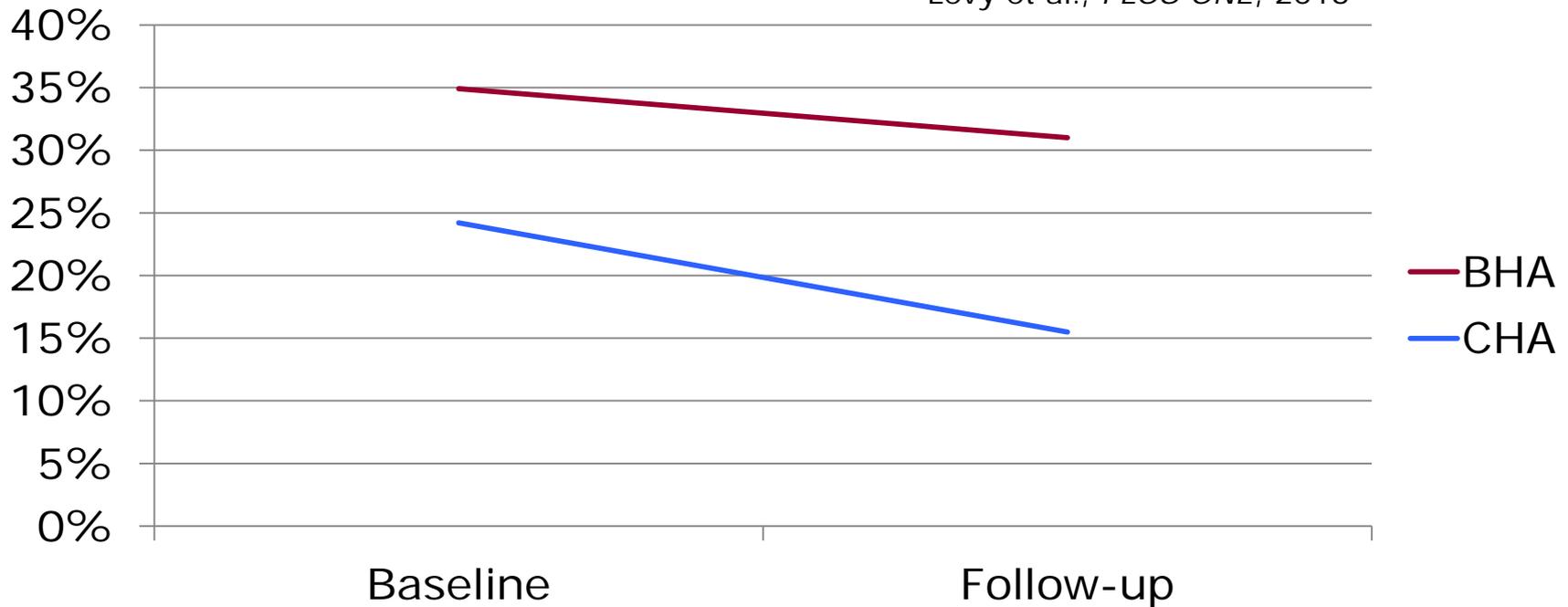


	BL	FU	Dif	Dif-in-Dif	P-value
BHA	10	5	-5	-1	0.48
CHA	15	11	-4		

# % Residents smell smoke in public areas of their buildings (7d)



Levy et al., PLOS ONE, 2016



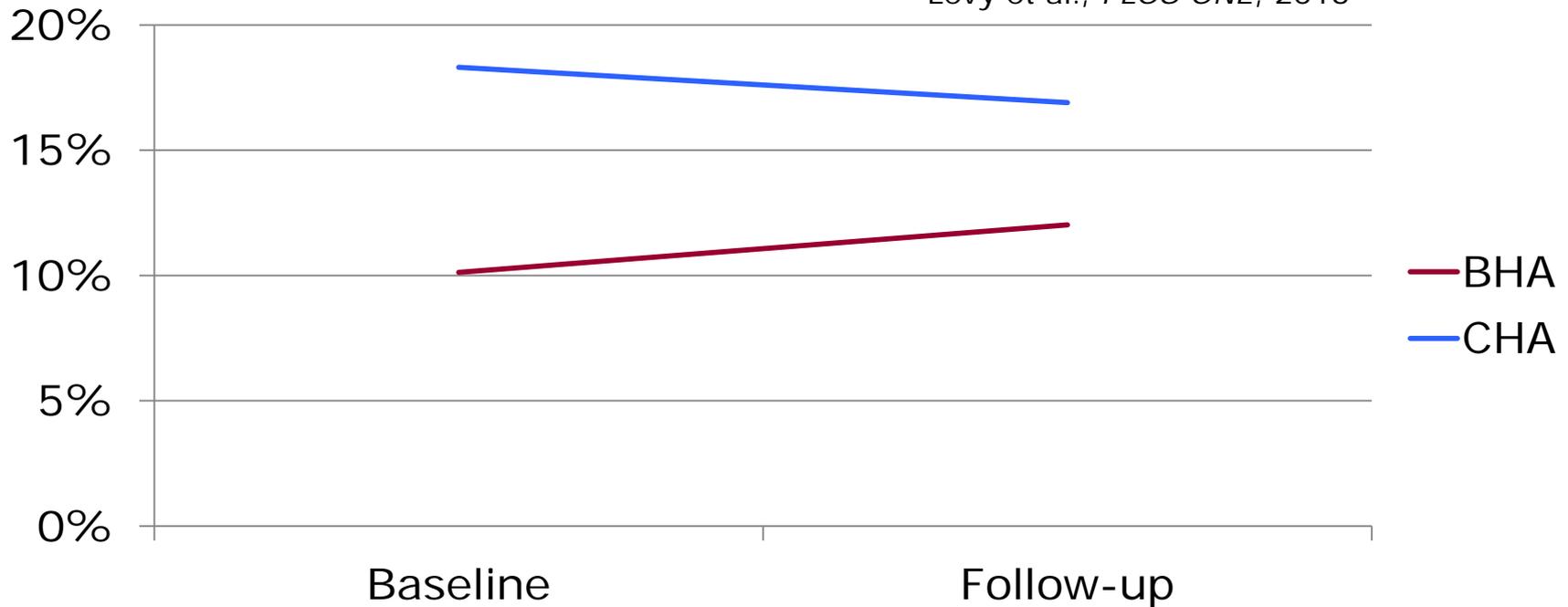
	BL	FU	Dif	Dif-in-Dif	P-value
BHA	35	31	-4	4	0.54
CHA	24	16	-8		



# % Residents smell smoke at non-BHA friend's home (7d)



Levy et al., PLOS ONE, 2016



	BL	FU	Dif	Dif-in-Dif	P-value
BHA	10	12	2	2	0.41
CHA	17	17	0		



# Common area air quality

- 10 BHA (family & elderly/disabled) and 6 CHA buildings, Jan 2012-October 2013 (FreshAir + pilot data)
- 7-day measurement; PM continuous, nicotine multiple monitors
- Adjusted for season and within-site clustering

Parameter	PM <sub>2.5</sub> (µg/m <sup>3</sup> ) Mean	Nicotine (ng/m <sup>3</sup> ) Log(mean)	Nicotine (ng/m <sup>3</sup> ) 90 <sup>th</sup> pctile
Intercept	-2.81	2.95	283
Smoking Ban	2.92	1.17	176
Boston	2.78	0.98	261
Boston*Ban	-4.05 (p=0.09)	-0.85 (p=0.08)	-191 (p=0.13)
Background PM	1.51	--	--

MacNaughton et al., *Sci. Total. Env.*, 2016



# Resident experience



- FreshAir survey (family housing, non-smokers, BHA only, post-policy only)
  - 91% Aware of the policy
  - 87% Satisfied with roll-out
  - Believe policy is fair
  - Support stiff penalties short of eviction
  - 51%: people rarely follow smoke-free rule
  - Low satisfaction with enforcement associated with low housing satisfaction

Rokicki et al., *Nicotine & Tobacco Research*, 2016



# Qualitative Follow-up

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- ❑ 1-on-1 semi-structured interviews (PI: Inez Adams, PhD)
  - English only
- ❑ Opportunistic sampling in elderly/disabled housing
- ❑ 30 smokers, 30 non-smokers
- ❑ Direct observation

Courtesy of Inez Adams, PhD



# Interview findings

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## □ Improvements

- Residents reported smelling smoke less in common areas
- Common areas cleaner, free of cigarette butts

## □ But...

- 23 of 30 smokers admitted to smoking in their units as much or more than before policy
- Smokers resent policy
- Non-smokers not concerned about SHS
  - Are empathetic about smokers' health, inconvenience

Courtesy of Inez Adams, PhD



# Summary – SHS Exposure

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- Cross-sectional studies:
  - Smoke-free policy associated with reduced SHS levels
- FreshAir studies:
  - Apartment SHS reduced — policy-related?
  - Common area SHS reduced
  - Resident SHS *increased*
    - Not due to identified exposure in BHA
    - Low levels + regression to the mean?
    - Small change in public area exposure that was not noticed by residents?

# Summary – Resident experience

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- Non-smokers
  - Like the policy
  - Think enforcement is lacking
- Smokers
  - Don't like the policy
  - Many don't comply with the policy
- BHA
  - Implementation is always evolving/improving
    - Now email and phone hotline for complaints



# Unanswered questions

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- ❑ What will happen to smoking rates in PHAs?
- ❑ What will happen in elderly/disabled housing?
- ❑ What effects on children's exposure?
- ❑ What effects on thirdhand smoke?
- ❑ What effect on health?



# Challenges ahead

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- Supporting smokers
  - Smoking cessation services
  - Safe places to smoke
  
- Enforcement/Compliance
  - HUD budget impact:
    - “Cost (recurring) -- Enforcement -- not quantified”
  - Personnel limitations
  - Technology?



# Study Team

- MGH 
  - Doug Levy (PI)
  - Jonathan Winickoff
  - Nancy Rigotti
  
- HSPH (Environmental Sciences) 
  - Gary Adamkiewicz
  - Jack Spengler
  
- Committee for Boston Public Housing 
  - Mae Bennett-Fripp
  
- New England Research Institutes (NERI) 
  - Andre Araujo
  - Shona Fang
  - Anne Stoddard
  
- Boston Housing Authority 
  - Kate Bennett, John Kane
  
- Cambridge Housing Authority 
  - Gloria Leipzig, James Comer, Sam Cohen

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