



# Smokefree Multi-Unit Housing

AMERICAN LUNG ASSOCIATION PROGRESS LEADING  
UP TO IMPLEMENTATION OF THE HUD RULING

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## Contents

BACKGROUND .....	2
LUNG ASSOCIATION PROJECTS .....	3
DIRECT IMPACT.....	5
REFERRALS.....	6
MAP OF PROJECT REACH.....	7
PRESENTATIONS AND EDUCATION.....	8
MARKETING .....	8
SUCCESS STORIES .....	8
IMPLICATIONS .....	11
APPENDICES.....	12

## BACKGROUND

In November 2016, the U.S. Department of Housing and Urban Development (HUD) announced a final rule requiring all Public Housing Agencies/Authorities (PHAs) to implement a smokefree policy in all of its federally-owned public housing properties. The policy must prohibit smoking in all indoor spaces and within 25 feet of all buildings. The rule went into effect on February 3, 2017, and all PHAs had 18 months to implement a compliant policy. Approximately two million people living in public housing owned by 3,300 PHAs across the country<sup>1</sup> and one-third of adults living in public or assisted housing are current smokers.<sup>2</sup> In many ways residents of public housing are among the most vulnerable in the United States, exposed to health risks caused by poor living conditions, such as second-hand smoke. For residents of public housing, tobacco smoke circulating throughout the building is a serious, unavoidable threat to their health and well-being.

The American Lung Association and its partners have been working to protect the health of public housing residents through smokefree public housing policies for nearly ten years. However, the work did not stop when HUD announced its smokefree ruling. In order to ensure implementation of sound policies that benefit all residents – without unintended consequences – and leverage successful implementation to reach more tobacco users at risk for adverse health outcomes, the Lung Association developed and implemented a series of innovative projects centered on public housing (Appendices A and B).

## METHODS

The Smokefree Multi-Unit Housing Survey was administered as an online survey accessed by a web-link. Invitations to participate were delivered primarily via email to Lung Association Health Promotion staff and links could be forwarded, if appropriate, to colleagues working on local smokefree multi-unit housing projects who may not have received the invitation email. Staff members with the most knowledge of a project were directed to complete the survey to ensure accurate reporting. The survey was open from January 16 – February 13, 2019.

The purpose of the survey was to document smokefree housing activities conducted by Lung Association staff between September 2016 and December 2018. The survey collected basic information about the project such as project name, scope, funder, partnering organizations and agencies, project duration, key deliverables and project goals. Surveys then covered seven broad areas for reporting, when applicable:

- Use of the ALA suite of programs, such as Freedom From Smoking®;
- Use of incentives with staff or residents;
- Partnerships formed with housing providers, stakeholders, other organizations;
- Education and presentations;
- Marketing efforts;
- Referrals; and
- Successes.

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<sup>1</sup> American Nonsmokers' Rights Foundation. (2017). *Supporting Implementation of HUD's Smokefree Public Housing Rule: Recommendations for Health Departments and Public Health Partners*. Retrieved from <https://no-smoke.org/supporting-implementation-huds-smokefree-public-housing-rule/>.

<sup>2</sup> Helms, V. E., King, B. A., Ashley, P. J. (2017) Cigarette smoking and adverse health outcomes among adults receiving federal housing assistance. *Preventive Medicine*, 99, 171-177. doi: 10.1016/j.ypmed.2017.02.001.

## LUNG ASSOCIATION PROJECTS

American Lung Association program staff reported 18 smokefree multi-unit housing support projects leading up to implementation of the HUD-ruling (Table 1). Projects were implemented at the local, county, state and national levels and were funded primarily by state health departments. Of the reported smokefree multi-unit housing initiatives, most were conducted on a local-level in a specific state or community. However, three projects were conducted nationally in select states<sup>3</sup>, and one was conducted in all fifty states (Table 2). Thirty-eight Lung Association staff completed the survey on behalf of the 18 projects, including a unique response from each state representative for projects implemented in multiple states: Bristol-Myers Squibb Foundation (BMSF) (10 states) and Anthem Blue Cross and Blue Shield Foundation (Anthem) (10 states). Reported projects were diverse in funding organization, timeframe of delivery, geographic scope, project components and key deliverables (Appendices A, B).

**Table 1. Summary of Lung Association projects**

Project Name*	State	Funder Name
<b>Advancing Tobacco Free Communities</b>	New York	New York State Department of Health
<b>Arkansas Tobacco Control Coalition</b>	Arkansas	Arkansas Department of Health, Tobacco Prevention & Cessation Program
<b>Arizona Smokefree Living</b>	Arizona	Arizona Department of Health Services
<b>Community Partnership Grant</b>	Iowa	Iowa Department of Public Health
<b>IDPH Smokefree Air</b>	Indiana	State of Indiana
<b>Lee County Tobacco Grant</b>	Florida	State of Florida; Lee County Health Department
<b>Mississippi Tobacco-Free Coalition of Jackson County</b>	Mississippi	Mississippi State Health Department, Office of Tobacco Control
<b>Metro Omaha Tobacco Action Coalition Communities in Excellence in Tobacco Control</b>	Nebraska	Tobacco Free Nebraska
<b>Northwest Wisconsin Community Interventions Grant</b>	Wisconsin	State of Wisconsin
<b>Pennsylvania Tobacco Control Grants</b>	Pennsylvania	Pennsylvania Department of Health
<b>POW'R Against Tobacco</b>	New York	New York State Bureau of Tobacco Control
<b>Quitline Project</b>	Pennsylvania	Pennsylvania Department of Health
<b>Smokefree at Home</b>	All 50 States	Robert Wood Johnson Foundation
<b>Smokefree at Home New Mexico</b>	New Mexico	New Mexico Department of Health
<b>Smokefree Multi-Unit Housing</b>	Minnesota	Minnesota Department of Health, Statewide Health Improvement Partnership Grant

<sup>3</sup> The IDPH Smokefree Air project is considered “National, Performed in Select States” in scope, but was implemented in only one state, Indiana.

<b>Smokefree Multi-Unit Housing Alaska</b>	Alaska	State of Alaska Tobacco Prevention and Control Program
<b>Smokefree Public Housing Initiative</b>	Alabama; Arkansas; Illinois; Mississippi; North Carolina; Oklahoma; South Carolina; Tennessee; Texas; West Virginia	Bristol-Myers Squibb Foundation
<b>Smoking Cessation for Low-Income Housing Residents**</b>	Colorado; Georgia; Indiana; Maryland; Missouri; Nevada; New Jersey; Texas; Virginia; Wisconsin	Anthem Blue Cross and Blue Shield Foundation

\* Data for at least one major smokefree multi-unit housing project was not submitted - Clearing the Air: Smokefree Housing is a project funded by the District of Columbia Department of Health Tobacco Prevention and Control Community Grant.

\*\*The Anthem grant is implemented in 14 states, but state-specific data was not submitted for Arizona, Louisiana, and Ohio.

**Table 2. Summary of Lung Association project scope**

Project Name	Local	National (in select states)	National (in all 50 states)
Advancing Tobacco Free Communities (NY)	✓		
Arkansas Tobacco Control Coalition (AR)	✓		
Arizona Smokefree Living (AZ)	✓		
Community Partnership Grant (IA)	✓		
IDPH Smokefree Air (IN)		✓	
Lee County Tobacco Grant (FL)	✓		
Mississippi Tobacco-Free Coalition of Jackson County (MS)	✓		
Metro Omaha Tobacco Action Coalition Communities in Excellence in Tobacco Control (OK)	✓		
Northwest Wisconsin Community Interventions Grant (WI)	✓		
Pennsylvania Tobacco Control Grants (PA)	✓		
POW'R Against Tobacco (NY)	✓		
Quitline Project (PA)	✓		
Smokefree at Home (RWJF, National)			✓
Smokefree at Home New Mexico (NW)	✓		
Smokefree Multi-Unit Housing (MN)	✓		
Smokefree Multi-Unit Housing Alaska (AK)	✓		
Smokefree Public Housing Initiative (10 states)		✓	
Smoking Cessation for Low-Income Housing Residents (10 states)		✓	

## DIRECT IMPACT

Based on information provided by the program staff, projects had an impact on multi-unit housing residents in a variety of ways. Outreach activities included the formation of partnerships, recruiting stakeholders, providing technical assistance and offering residents access to Lung Association programs and services.

## PARTNERSHIPS

Establishing partnerships and collaborations between the Lung Association, multi-unit housing properties and local stakeholders was an important component of smokefree housing advocacy efforts. Partnerships helped enhance resident engagement in smokefree activities, increased awareness of the HUD-ruling and established smoking cessation support networks. Of the projects reported, at least 254 partnerships were formed with public housing authorities and both private and low-income multi-unit housing properties. Furthermore, 698 smokefree multi-unit housing stakeholders were convened or recruited by Lung Association program staff.

## FREEDOM FROM SMOKING & CESSATION NAVIGATORS

Almost half (n=7) of the 18 reported projects offered residents access to the Lung Association's evidence-based smoking cessation program, Freedom From Smoking®. The Freedom From Smoking program uses techniques based on pharmacological and psychological principles designed to help tobacco users gain control over their behavior and break their addiction. The program is available in an in-person group clinic setting and as an online course known as Freedom From Smoking® Plus.

Lung Association program staff trained 282 individuals to act as Freedom From Smoking® Facilitators, and staff and newly trained facilitators conducted 119 in-person Freedom From Smoking group clinics. Approximately 1,304 multi-unit housing residents enrolled in Freedom From Smoking clinics and an estimated 69% (n=896) of residents completed the course. Furthermore, 29 residents enrolled in the online Freedom From Smoking Plus class with eight residents completing the program.

Several projects recruited and trained multi-unit housing residents to act as Cessation Navigators within their communities. Cessation Navigators help residents start on the path to a smokefree life by discussing cessation options and connecting them to free resources. Of the reported projects, approximately 117 Cessation Navigators were trained to act as a smoking cessation resource for their peers and communities.

## TECHNICAL ASSISTANCE

All but one of the 18 reported projects provided technical assistance services to multi-unit housing properties. Primary technical assistance activities included:

- Providing resources or materials that offer guidance concerning the HUD-ruling (n=31 responses);
- Giving presentations (n=28);
- Engaging in phone calls with property managers or stakeholders (n=26);
- Attending meetings with housing entities and other stakeholders (n=24);
- Conducting site visits (n=24);

- Assisting with the development of tools and resources (n=20); and
- Hosting and participating in webinars (n=8).

Lung Association staff also conducted tobacco cessation classes at multi-unit housing properties and assisted with policy development. In addition to technical assistance, 35 respondents from 17 projects reported providing materials to properties. Materials included handouts (n=33), presentations (n=28), window clings (n=19), outdoor signs (n=18), door hangers (n=15), magnets (n=11), Freedom From Smoking guidebooks (n=1) and educational brochures (n=1).

Together, the 17 projects provided technical assistance to approximately 2,965 multi-unit housing properties across 25 states. This accounts for a potential reach of nearly 111,600 units and about 212,232 residents. Of the properties that were provided technical assistance, 618 implemented a new or strengthened smokefree policy after working with or receiving technical assistance from Lung Association staff. Therefore, at least 74,807 units and approximately 88,134 residents were directly impacted by improved smokefree policies.

## REFERRALS

Of the 18 unique smokefree housing projects, all but one included a referral component in which residents were directed to lung health services.<sup>4</sup> Among multi-state projects, referral processes differed from state to state. For the Anthem grant, four states did not provide resident referrals to services, and five states did provide referrals. For the BMSF grant, seven of the ten states provided residents with referrals to services. The nationwide RWJF grant did not include resident referrals to services and the data submission did not distinguish between state protocols.

Smokefree housing projects referred residents to a variety of lung health services, including state quitlines (n=15), Freedom From Smoking classes (n=10), the Lung Helpline (n=10), Better Breathers Clubs (n=9), lung cancer screening programs (n=7), community-based cessation services (n=5), and other services (flu shot, n=1). All projects providing information about specific types of resident referrals referred to quitlines, indicating a concerted effort by the Lung Association to integrate smokefree housing projects with strong integration between Lung Association smokefree housing programs and state quitlines.<sup>5</sup> See Appendix I for a summary of resident referral services by project.

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<sup>4</sup> This number excludes the PA Department of Health Quitline project; this question is not relevant/applicable because the Pennsylvania Quitline *receives* referrals from other entities.

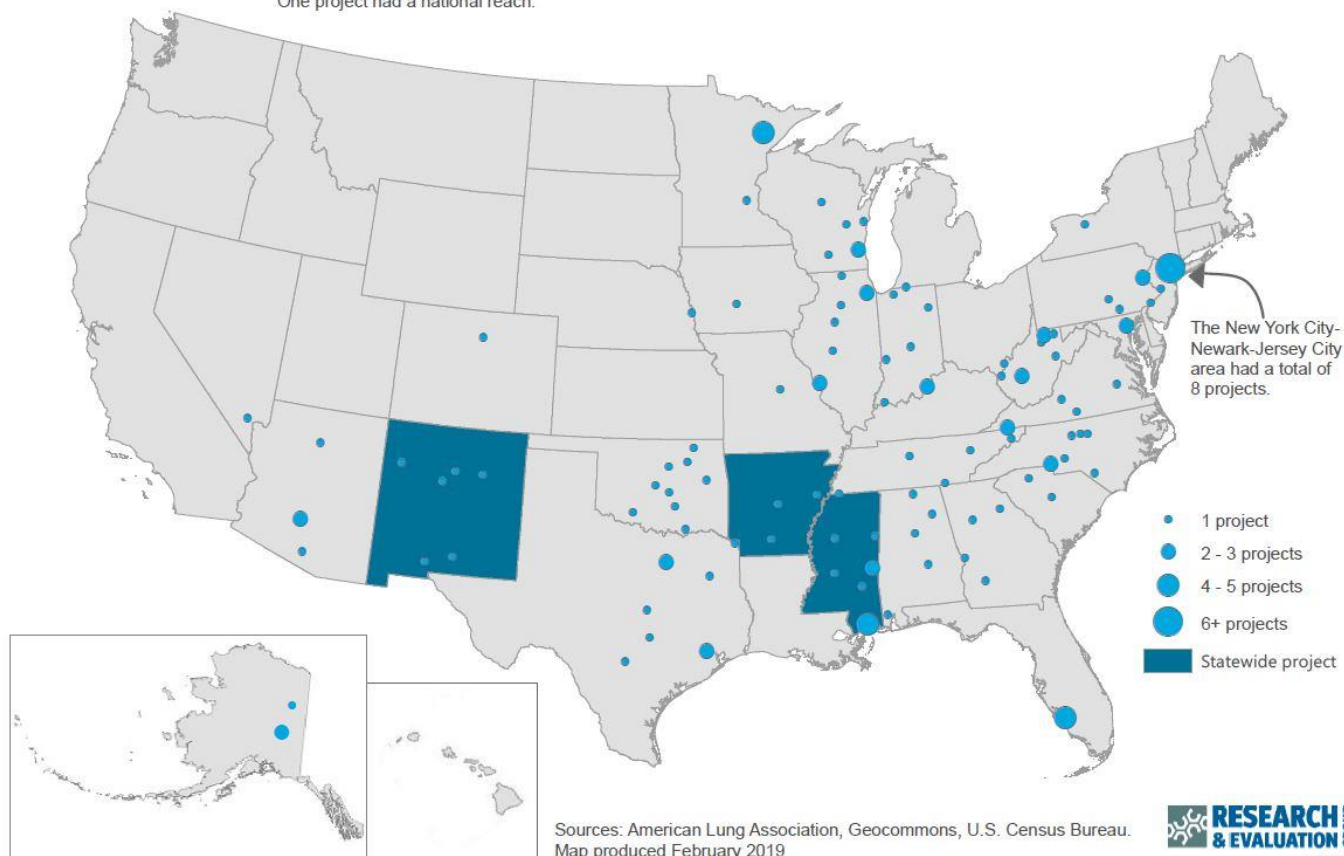
<sup>5</sup> Three of the eighteen unique projects did not provide information about specific referral types: Iowa Community Partnership Grant, PA Department of Health Quitline, and RWJF Smokefree at Home.

## MAP OF PROJECT REACH

### Smokefree Multi-Unit Housing Project Coverage September 2016 - December 2018



Projects covered a total of 108 municipalities and 27 counties across the United States.  
Three statewide projects took place in Arkansas, Mississippi, and New Mexico.  
One project had a national reach.





## PRESENTATIONS AND EDUCATION

Twenty-nine respondents from 14 projects made over 450 presentations (n=453) directly to properties, on topics such as the harmful effects of secondhand smoke (n=28 respondents), the benefits of smokefree multi-unit housing (n=24), smoking cessation (n=24), lung cancer (n=18), Cessation Navigators (n=7) and e-cigarette use (n=1). Sixteen respondents from 11 projects gave a total of 195 presentations to community groups. Community presentations included topics such as the benefits of smokefree housing (n=15), the harmful effects of secondhand smoke (n=14), smoking cessation (n=13), lung cancer (n=7), Cessation Navigators (n=3), ALA resources (n=1) and the smokefree public housing initiative (n=1).

Nearly 700 stakeholders (n=698) were convened across ten projects and more than 600 properties (n=618) that Lung staff provided technical assistance to strengthened an existing or implemented a new policy.

## MARKETING

A variety of marketing strategies were used by the projects. Social media, including Facebook (n=17 respondents), Twitter (n=4) and Instagram (n=3) were used broadly for marketing purposes, accounting for an estimated 12,373 impressions.<sup>6</sup> Newsletters (n=4), print media (e.g., newspapers and press releases) and community events (e.g., health fairs) were the most commonly reported marketing strategies after social media.



## SUCCESS STORIES

Lung Association staff completing the survey on behalf of smokefree multi-unit housing projects were also asked to share a success story related to technical assistance, policy change, resident services or another project-related topic. The majority of success story responses came from the multi-state Robert Wood Johnson Foundation and Bristol-Myers Squibb Foundation grants. The selected success stories below represent a variety of states and topic areas from survey submissions and are not necessarily exhaustive of all successes achieved across the 18 Lung Association projects.

<sup>6</sup> The Iowa Community Partnership Grant reported 400,000 social media impressions via Facebook, Instagram, and state-run radio promotions. This value was an outlier and not included in calculations.



### **Clean Air for Housing Staff | RWJF Smokefree at Home, IL**

Through the RWJF Smokefree at Home grant, the American Lung Association works with housing properties across the country. In Illinois, the Manager of Supportive Services at one property reported on the huge change she's noticed. Lung Association staff reported that, "Since she works every day in the same residence as the tenants, she is grateful that the new smokefree rule has made the air easier to breathe. In the past, she has gotten migraines from being around too much secondhand smoke, and has noticed a huge change in her own health and comfort each day at work since the rule was implemented."



### **The Power of Creativity | BMSF Smokefree Public Housing Initiative, IL**

Through this grant trained residents peers, called Cessation Navigators, act as liaisons and resources for fellow residents who may be interested in accessing cessation services. They do this in a variety of creative ways. In October, the Resident Services Coordinator and Cessation Navigator hosted a "Smokefree Pep Rally" at the housing property at which she "shared the purpose of the smokefree [HUD] rule and how it would benefit residents, [discussed the] dangers of second-hand smoke, disseminated lung cancer education materials, and shared smoking cessation programs like the Illinois Tobacco Quitline."



### **Partnering with Homeless Serving Organization | RWJF Smokefree at Home, KY**

Through a partnership with the Central Kentucky Homeless and Housing Initiative (CKHHI), the Lung Association was able to work closely with a coalition of organizations providing mental health and housing services, with the goal of protecting residents with mental health conditions and developing processes for linking residents to mental health and homeless services. Discussions with these organizations helped to develop a plan for the "inevitable, when someone gets evicted for smoking" situation. The Lung Association was able to identify contacts within Lexington HUD for relationship building, develop a list of topics anticipated by topic-area experts/professionals, identify volunteers for review of clinical content, and develop community solutions.



### **Parkview Villa Smokefree Policy Success | Smokefree Multi-Unit Housing, MN**

Through a partnership between the Minnesota Department of Health Statewide Health Improvement (SHIP) grant and the American Lung Association, Parkview Villa in Anoka County was able to improve upon and effectively enforce an existing smokefree policy. “Many of the residents at Parkview Villa are seniors and individuals with disabilities,” said Rochelle Holmes, Parkview Villa Assistant Site Manager. “Making this change was important to ensure good health to them, their guests, and the staff of the building.” Read more about this success here:

<https://www.anokacounty.us/DocumentCenter/View/20545/Parkview-Villa-Success-Story>



### **Resident Lung Cancer Screening | BMSF Smokefree Public Housing Initiative, MS**

Through this grant, American Lung Association staff and trained peers, called Cessation Navigators, support residents who use tobacco and meet eligibility criteria to speak with their health care provider about lung cancer screening. Lung Association staff reported that, “While presenting a lung cancer screening presentation at Jackson Manor Apartments, one of the participants confessed that he would not have a lung cancer screening. His doctor informed him if he didn't stop smoking he only had a few years to live. I thoroughly reviewed the lung cancer screening brochure and held a fun Q&A session with the participants in addition to using a visual aid that simulated damage to the lungs from smoking. With encouragement from participants, he agreed to have a lung screening and to try to quit smoking.”



### **Community Partnerships | BMSF Smokefree Public Housing Initiative, OK**

In Oklahoma, the Lung Association built relationships with local, community-based organizations and trained staff at these organizations to become Cessation Navigators. Lung Association staff noted that “this organization prioritizes trust and positive relationships in their community, meaning that the population largely trust these individuals...We believe that this partnership will allow us to serve the [community] in a larger capacity than would [have been] possible without this partnership.” Lung Association staff also found it to be beneficial that Cessation Navigators were separate from the local housing authority because residents felt more comfortable about making a quit attempt.

## IMPLICATIONS

Through advocacy, technical assistance, evidence-based cessation services and coalition building, the American Lung Association has been working to implement smokefree public housing policies for nearly ten years. In the 27 months (September 2016 – December 2018) spanning lead-up and initial implementation of the HUD ruling, the Lung Association has provided technical assistance to nearly 3,000 properties (n=2,965) containing 111,600 units.<sup>7</sup> In addition to technical assistance around policy implementation, the Lung Association played and will continue to play a critical role in linking housing entities with critical health and community services for residents. This includes ensuring that all residents receive necessary cessation services and referrals and that enforcement of newly implemented policies does not disproportionately impact the most vulnerable public housing residents. The Lung Association will continue to monitor the implementation and impact of its programs to protect the lung health of multi-unit housing residents across the country.



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<sup>7</sup> This includes a combination of private, low-income and PHA properties across projects.

## APPENDICES

**Appendix A: American Lung Association Project Summary** (pgs. A1-A4)

**Appendix B: American Lung Association Project Deliverables** (pgs. A5-A10)

**Appendix C: Housing Type** (pg. A11)

**Appendix D: Project Incentives** (pg. A12)

**Appendix E: Technical Assistance** (pgs. A13-A14)

**Appendix F: Participant Resources** (pg. A15)

**Appendix G: Presentations** (pgs. A16-A17)

**Appendix H: Social Media** (pg. A18)

**Appendix I: Referrals** (pg. A19)

**Appendix J: Marketing Strategies** (pg. A20)