



## The Impact of Smoke-free Housing on Quitting Smoking

The implementation of smoke-free policies in multi-unit housing is a growing trend. Non-smokers should not have to breathe the toxic second-hand smoke that infiltrates from neighbouring units, as it is a proven health risk. There is another powerful reason for the creation of smoke-free multi-unit housing – the positive health impact it has on smokers.

Research demonstrates that in addition to clearing the air of second-hand smoke, smoke-free policies also lead to smokers choosing to quit. <sup>1</sup> A review of 37 studies found that smoke-free policies decreased the number of people who smoked and the number of cigarettes smoked per day.<sup>2</sup>

Studies about smoking bans in individual homes (i.e. a ‘house rule’) have also shown a similar effect. <sup>3</sup> A smoke-free home seems to increase the desire to quit by creating barriers to smoking, such as having to go outside. These barriers disrupt smokers’ established habits, which increases their ability to quit and avoid relapse. <sup>4</sup> Even when this disruption does not result in successfully quitting, it can contribute to reduced consumption of cigarettes. <sup>5</sup>

In general, home smoking bans are associated with

- increased number of quit attempts
- a longer duration of quit attempts
- greater use of smoking cessation medications
- reduced cigarette consumption
- increased quit rates <sup>6</sup>

Many smokers make quit attempts when they live in smoke-free housing. According to a large study conducted across the US, as many as half of smokers living in smoke-free housing attempted to quit in the last year. <sup>7</sup>

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<sup>1</sup> Callinan JE, Clarke A, Doherty K, Kelleher C. Legislative smoking bans for reducing secondhand smoke exposure, smoking prevalence and tobacco consumption. *Cochrane Database Syst Rev.* 2010;(4):CD005992. doi(4):CD005992.

<sup>2</sup> Hopkins DP, Razi S, Leeks KD, Priya Kalra G, Chattopadhyay SK, Soler RE, et al. Smokefree policies to reduce tobacco use. A systematic review. *Am J Prev Med.* 2010;38(2 Suppl):S275-89

<sup>3</sup> Mills AL, Messer K, Gilpin EA, Pierce JP. The effect of smoke-free homes on adult smoking behavior: a review. *Nicotine Tob Res.* 2009;11(10):1131-41.

<sup>4</sup> IBID

<sup>5</sup> IBID

<sup>6</sup> Kernoghan, A., Lambraki, I., Pieters, K., & Garcia, J.M. (2014). *Smoke-Free Housing: A Review of the Evidence*. Toronto, Ontario: Program Training and Consultation Centre and the Propel Centre for Population Health Impact, University of Waterloo.

<sup>7</sup> Smoking and smoking-related health issues high in public housing. Retrieved March 31, 2017, from <https://www.elsevier.com/connect/smoking-and-smoking-related-health-outcomes-high-in-public-housing>

A study in Oregon observed a self-reported annualized quit rate of 14.7% over the study compared with a historical quit rate of 2.6%. Also, almost half of ongoing smokers reduced their cigarette consumption.<sup>8</sup> Dr. Pam Kaufman, a scientist at the Ontario Tobacco Research Unit, explains that: “Smoke-free housing policies protect residents from harmful tobacco smoke exposure and also support smokers who want to reduce or quit smoking.”<sup>9</sup> Other experts agree. Dr. Patricia Czapp describes the process of apartments going smoke-free by stating, “The Smoke-free Policy has helped the overall wellness of this community. When we make it easier for people to quit ... it normalizes the quitting behavior.”<sup>10</sup>

Although a smoke-free policy does **not** mean smokers cannot live in multi-unit housing, quitting definitely makes life more convenient for smokers because it avoids having to go outside to smoke. For property managers and landlords who have put a smoke-free policy in place, it also is preferable because it supports the idea of creating healthier living spaces. For those reasons, it is important to consider the best way to encourage smoking cessation.

There is good reason to think that some smoking tenants will be interested in information about quitting. In Canada, about 63% or 1.7 million daily smokers are considering quitting in the next 6 months.<sup>11</sup> In addition, 50% of daily cigarette smokers aged 15 years and older, have made at least one quit attempt lasting 24 hours in the past year and 33% tried to quit on two or more separate occasions.<sup>12</sup> Studies in the US also have observed the high desire of smokers to quit.<sup>13</sup>

Quitting may feel impossible or difficult for smokers but there are also many former smokers who have successfully quit. Among Ontario adults who have ever been smokers, over half (53.1%) have now quit.<sup>14</sup> That said, it is important to recognize that some groups have a more challenging but not impossible time quitting. For example, lower income smokers<sup>15</sup> and those with mental health challenges sometimes find it more difficult to quit.<sup>16</sup> Smokers from these groups may need extra support and encouragement but are able to successfully stop smoking.<sup>17</sup>

## How to support quit attempts in multi-unit housing?

Focus on providing information and resources in a non-judgemental manner. In your messaging, avoid nagging, preaching, teasing, etc. This may make smokers feel worse about themselves. Remember, this is a powerful addiction and most smokers would love to quit.

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<sup>8</sup> Pizacani, B. A., Maher, J. E., Rohde, K., Drach, L., & Stark, M. J. (2012). Implementation of a Smoke-free Policy in Subsidized Multiunit Housing: Effects on Smoking Cessation and Secondhand Smoke Exposure. *Nicotine & Tobacco Research*, 14(9), 1027-1034. doi:10.1093/ntr/ntr334

<sup>9</sup> (2017, January 30). Home. Retrieved March 17, 2017, from <http://www.smokefreehousingon.ca/>

<sup>10</sup> Implementing and Enforcing Smoke-Free Housing Policies. (2015, September 18). Retrieved March 31, 2017, from <https://youtu.be/jZ6Uyw3xOL4>

<sup>11</sup> Canada, (2017, March 13). Canadian Tobacco Alcohol and Drugs (CTADS): 2015 summary. Retrieved April 04, 2017, from <https://www.canada.ca/en/health-canada/services/canadian-tobacco-alcohol-drugs-survey/2015-summary.html>

<sup>12</sup> IBID

<sup>13</sup> Babb S, Malarcher A, Schauer G, Asman K, Jamal A. Quitting Smoking Among Adults — United States, 2000–2015. *MMWR Morb Mortal Wkly Rep* 2017;65:1457–1464. DOI: <http://dx.doi.org/10.15585/mmwr.mm6552a1>.

<sup>14</sup> Cancer Care Ontario. *Cancer Risk Factors in Ontario: Tobacco*. Toronto, Canada, 2014.

<sup>15</sup> IBID

<sup>16</sup> Banham L, Gilbody S. Smoking cessation in severe mental illness: What works? *Addiction*. 2010;105(7):1176-89

<sup>17</sup> Centre for Addiction and Mental Health. (2012). *Mental Illness and Smoking [Brochure]*. Author.

<https://www.nicotinedependenceclinic.com/English/teach/SiteAssets/Pages/Smoking-Fact-Sheets2/Mental%20Illness%20and%20Smoking%20Fact%20Sheet%20for%20Healthcare%20Providers.pdf>

Partnerships with public health units can help residents quit smoking. Quit attempts made without support are successful only about 3-5% of the time whereas with counselling and medication, success rises to about 20%.<sup>18</sup>

Ensure that residents and staff know where they can access products like the “patch”, gum, and other aids. In some cases they may be able to get them for little or no cost from your local public health unit. Also, some aids (e.g. varenicline or bupropion) are covered by some drug plans such as the Ontario Drug Benefit Plan.

When the Region of Waterloo implemented their smoke-free policy in 2010, they offered a range of support services before and after the policy came into effect. Programs and services were promoted using flyers, their website and through conversations with staff and tenants. According to follow-up research, “Ensuring specific services were in place for those who may find it difficult to comply with the policy was important as it showed the Region was considering the needs of all tenants.”<sup>19</sup>

Sharing information about available services, even when direct support from public health units is not manageable, can be a big help. Letting people know about helplines such as [www.smokershelpline.ca](http://www.smokershelpline.ca) or 1-877-513-5333 can assist residents if they would like to quit. Sometimes contests that offer the chance to win cash for quitting such as the *First Week Challenge* offered by the Canadian Cancer Society can appeal to residents. Keep in mind that several studies have shown that financial incentives can increase the likelihood of a smoker quitting.<sup>20</sup>

Combining information about quitting smoking with other aspects of healthy living can benefit everyone. By promoting healthy living in general, residents who smoke will not feel as ‘picked on’ and therefore may be more responsive.

Consider that people use different languages and read at various levels. Try to ensure the information you are posting is clear for all residents.

Timing makes a difference when it comes to providing support for quitting. Consider offering information about services before residents move in. For example, if you have a waitlist, include information about quitting when you do a mailing.

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<sup>18</sup> Fiore MC, Jaén CR, Baker TB, et al. Treating Tobacco Use and Dependence: 2008 Update. Clinical Practice Guideline. Rockville, MD: U.S. Department of Health and Human Services. Public Health Service. May 2008.

<sup>19</sup> McCammon-Tripp, L.1, Stich, C., & Region of Waterloo Public Health and Waterloo Region Housing Smoke Free Multi-Unit Dwelling Committee. (2010). The development of a smoke-free housing policy in the Region of Waterloo: Key success factors and lessons learned from practice. Toronto, Canada: Program Training and Consultation Centre, LEARN Project.

<sup>20</sup> Giles EL, Robalino S, McColl E, Sniehotta FF, Adams J. The effectiveness of financial incentives for health behaviour change: systematic review and meta-analysis. PloS one. 2014;9(3):e90347.