



<b>Title:</b>	<b>Second-hand Smoke in Multi-unit Dwellings</b>
<b>Approved by:</b>	Executive Director, Acting Medical Officer of Health and the Board of Health
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### Position of Elgin St. Thomas Public Health

#### Position Statement:

The position of Elgin St. Thomas Public Health is that:

1. There is no safe level of second-hand smoke.
2. There is a dose-response relationship with exposure to second-hand smoke. The more exposure one has, the greater damage is done to one's organs and health. Second-hand smoke is more concentrated in enclosed settings such as homes and vehicles.
3. Drifting second-hand smoke is an environmental carcinogen that travels through ventilation systems, underneath doors, through window cracks and by other means.
4. Children have higher breathing rates than adults and are subsequently more vulnerable to the effects of second-hand smoke exposure, particularly in enclosed settings.
5. Regular exposure to drifting second-hand smoke, particularly in enclosed settings such as multi-unit dwellings, can lead to chronic disease such as lung cancer, heart disease and even death.
6. Third-hand smoke which is the residual gases, chemicals and heavy metals that remain long after a cigarette is extinguished can produce off-gassing for weeks or even months after vacancy and is now understood to be a public health hazard. Third-hand smoke like second-hand smoke is of particular concern for young children, especially when exposed long-term.
7. There is increasing public demand for smoke-free housing in the Province of Ontario and specifically within South Western Ontario.
8. Residents of low-income housing do not have the same options as mid-to-high income earners to live in housing that is free from exposure to second-hand and third-hand smoke. This disparity must be addressed by increasing the availability of smoke-free housing.

#### Introduction:

In May 2006, the *Smoke-Free Ontario Act* (15) came into effect. The *Act* prohibits smoking in all enclosed workplaces and public places. Although the *Smoke-Free Ontario Act* bans smoking in common areas (i.e. elevators, stairwells, hallways, and lobbies) of multi-unit dwellings, there are

currently no laws or legislation in Elgin St. Thomas or elsewhere in Ontario, that explicitly prohibit people from smoking in their own apartments or condominiums.

Second-hand smoke in multi-unit dwellings (apartments, condominiums, housing co-ops, townhouses, etc.) is an emerging public health issue. Thousands of men, women and children are involuntarily exposed to second-hand smoke in their own homes because they have a neighbour who smokes. The 2011 Canadian Tobacco Use Monitoring Survey (CTUMS) reported that 2.9% of children between the ages of 0 and 17 years in Ontario were regularly exposed to second-hand smoke in the home. (11) The 2011 Canadian Community Health Survey (CCHS) indicates that over four hundred thousand non-smokers aged 12 years and older in Ontario were exposed to second-hand smoke at home every day or almost every day. (28) Drifting smoke in multi-unit dwellings can get into ventilation systems, and seep through walls and ceilings, under doors and into hallways. (7) Non-smoking residents are not only involuntarily exposed to “fresh” second-hand smoke, but also to aged second-hand smoke which deposits on surfaces and becomes more toxic over time. (24)

Now that Ontarians are protected inside public places and workplaces, demand for other smoke-free environments is on the rise. Unfortunately, this choice has been limited as the housing sector has been slow in responding to the increasing public demand for smoke-free accommodation. (1) In 2009, 84% of Ontario adults said smoking should be banned in multi-unit dwellings, (2) which represents an increase of 20% in just three years. 2010 survey data released by Ipsos Reid for Smoke-free Housing Ontario showed that one third of people in Ontario who rent are regularly exposed to second-hand smoke in their homes. Furthermore 73% of renters in Southwestern Ontario would be either “very likely” or “somewhat likely” to choose a smoke-free building over a building that allowed smoking (29). Clearly, it is evident from these surveys that there is a growing demand for smoke-free housing in Ontario.

There are various ways that smoke can infiltrate other people's private residential units. Indoor air studies show that, depending on the age and construction of a building, up to 65% of the air in a private residence can come from elsewhere in the building. (1) This smoke can drift into the ventilation systems, underneath doors and onto outdoor balconies and patios and cause a disturbance for other tenants. Second-hand smoke is also a serious public health concern for many residents who live in multi-unit dwellings and are exposed to drifting second-hand smoke on a regular basis. In fact, recent case law has emerged in which residents of multi-unit dwellings site discrimination because chronic health conditions (such as asthma) are made worse by involuntary exposure to second-hand smoke in their own homes.

In October 2010, the Tobacco Strategy Advisory Group, a provincial committee of experts informed by a Scientific Advisory Committee of leading researchers in tobacco control, released a report with recommendations for the next phase of the Smoke-free Ontario Strategy (2011-2016). Included in these recommendations was an eventual ban on smoking in multi-unit dwellings as well as other recommendations pertaining to smoke-free housing which include:

- *Continue and intensify a voluntary approach to smoke-free Multi-Unit Dwellings*
- *Amend the Residential Tenancies Act 2006 to include a disclosure requirement for landlords to prospective tenants declaring whether or not there is a smoke-free policy and to make a non-smoking policy a material term of the lease*
- *Offer a provincial tax credit to developers of new affordable housing who commit to designating their developments 100% smoke-free*

- *Align programs to enable grassroots advocacy aimed at decreasing the social norm around tobacco use and increase protection from exposure to tobacco smoke, which may include: selected outdoor public places, multi-unit dwellings, and homes*

## **Rationale:**

### **Health evidence:**

Second-hand smoke contains over 4000 chemicals, over 60 of which are known to cause cancer (3). Scientific evidence indicates that there is no risk-free level of exposure to second-hand smoke and the World Health Organization has concluded that there is no safe level of second-hand smoke. Breathing even a little second-hand smoke can be harmful to your health. (4) Second-hand smoke has been proven to cause lung cancer in non-smoking adults (5). While a number of multi-unit residents take precautions to ensure second-hand smoke does not seep into their units, second-hand smoke cannot be fully controlled by ventilation or air cleaning. In June 2005, the American Society of Heating, Refrigerating and Air conditioning Engineers stated that “the only means to effectively eliminate health risks associated with indoor exposure [to second-hand smoke] is to ban smoking activity” (8). The Physicians for a Smoke-Free Canada state that second-hand smoke is the third leading cause of preventable death in Canada and estimate that 1,100 Canadian non-smokers die each year from exposure to second-hand smoke.

New data presented by the Ontario Tobacco Research Unit at the 2011 National Conference on Tobacco or Health about third-hand smoke (gases, chemicals and heavy metals that persist after a cigarette is extinguished) indicates that off-gassing of toxic substances can occur for weeks and even months after a cigarette is extinguished. Off-gassing can occur from materials such as carpets, furniture, upholstery and even walls. Infants and children are particularly susceptible as they crawl on the floor and on furniture and put items into their mouths; all of which may contain traces of these toxic substances (Ferrence, 2011). Furthermore, nicotine residue from second-hand smoke, which readily sticks to indoor surfaces, can react with ambient nitrous acid to form potent carcinogenic tobacco-specific nitrosamines (TSNAs). Given the low volatility of TSNAs and their ability to persist in the indoor environment, they represent an unappreciated health hazard through skin exposure, dust inhalation, and for infants, ingestion (23).

Non-smokers who are regularly exposed to second-hand smoke have a higher risk of getting lung cancer, heart disease as well as other types of cancer. In Elgin-St. Thomas between 2007 and 2009 there were 60.6 new cases of lung cancer per 100,000 population and between 2005 and 2007 there were 46.5 deaths due to lung cancer per 100,000 population (30).

Statistics Canada reports that having a low income is associated with having more chronic health conditions [including those precipitated by smoking] than individuals with a higher income (6). The social determinants of health explain that individuals and families with less education and subsequently less income are more likely to suffer from poor health, and engage in unhealthy behaviours such as smoking which may lead to exposure to second-hand smoke, than those with a higher income and education.

Since families and tenants living in multi-unit dwellings, particularly those living in geared-to-income housing, are more likely to have a low household income and lower level of education than families living in single homes, they are already at increased risk for chronic health conditions. Residents of multi-unit dwellings, particularly young children, do not have the choice

or the ability to remove 100% of drifting second-hand smoke from their unit/home, unless they are able to move out. Due to financial circumstances, moving out is often not an option.

**Mandate:**

The new Ontario Public Health Standards (2008) require public health units to focus on priority populations including those with low income, lower levels of education and those at a higher risk of being exposed to health hazards or engaging in risky behaviours.

**Public Support:**

Evidence from survey data suggests that there is strong support for smoke-free housing and that the majority of tenants (almost ¾), if given the choice, would choose smoke-free housing.

**Complaints received by Elgin St. Thomas Public Health:**

Between 2010-2011 Elgin St. Thomas Public Health received seven complaints related to smoking in multi-unit dwellings. In 2012, one particular tenant called ESTPH on several occasions looking for information and support in order to support her claim to the housing tribunal and ultimately obtain low-income housing that was free of exposure to second and third hand smoke. This tenant was particularly concerned about how her children were being involuntarily affected by exposure to drifting second-hand and residual third-hand smoke from previous tenants.

The Region of Waterloo Public Health conducted a post implementation smoke-free housing policy survey that indicated that tenants of the Region of Waterloo Community Housing Incorporated often *did not complain* even when they were affected by second-hand smoke because they did not want to create conflict with neighbouring tenants (25). This evidence indicates that the extent of the negative effects of exposure to second-hand and third-hand cannot be determined solely based on the number of complaints received.

**Safety and Fire Risk:**

Smokers' materials (cigarettes, cigars, pipes) remain the leading sources of ignition in fatal residential fires in Ontario (12). Multi-unit dwellings that become 100% smoke-free can reduce their risk for fire and be a safer place for people, non-smokers and smokers alike to live.

**The Rights Debate:**

There is no inherent "right to smoke" enshrined anywhere in Canadian law. Second-hand smoke has been identified as a breach of the covenant of reasonable enjoyment at the Ontario Landlord and Tenant Board (22).

**Laws that Serve to Protect the Health of Children**

There are laws that exist to protect the health of children such as the Health Protection and Promotion Act and the Day Nurseries Act, yet there is a lack of adequate legislation to protect children from exposure to second-hand smoke in their own homes. In January 2009, the Government of Ontario enacted new legislation to protect children under the age of 16 from exposure to second-hand smoke in vehicles (27). Yet many children are still exposed to drifting second-hand smoke on a regular basis simply by living in multi-unit housing.

**Gaining Momentum in other Jurisdictions:**

In recent years, more and more municipalities have acknowledged the implications of drifting second-hand smoke and have subsequently begun to pass smoke-free indoor policies. The table below includes a sample of some of the municipalities that have proceeded with a policy in the last few years. For an up to date list of municipalities that have endorsed smoke-free

housing policy, please visit <http://www.smokefreehousingon.ca/sfho/directory.html>

<b>Municipality</b>	<b>Date of Smoke-free Policy Implementation</b>	<b>Details of Policy to be Implemented</b>
Haliburton Community Housing Corporation	June 2009	100% smoke-free buildings, including balconies and patios
South Chatham Village Apartments	January 2010	100% smoke-free property
Spruce Lodge Non-Profit Housing, Stratford	January 2010	Three buildings smoke-free. Some units grandfathered.
Region of Waterloo Community Housing Incorporated	April 2010	100% no smoking policy with 5m buffer rule for all doors windows and exits
County of Lambton Housing Services Department	October 2009	100% no smoking policy for new 57 unit affordable housing program for seniors and people with disabilities
Bruce County Housing Corporation	TBD	New building 100% smoke-free
CityHousing Hamilton, City of Hamilton	2010-2011	Pilot project to examine the feasibility of transitioning 2 or 3 buildings to smoke-free
Elgin St. Thomas Housing Corporation, Kiwanis Garden Court Apartment for Seniors		Units 105-139 will be 100% smoke-free.

### **Implications for Elgin St. Thomas Public Health:**

- 1) Elgin St. Thomas Public Health will support the recommendations set forth in the 2010 Tobacco Strategy Advisory Group's report: *Building on our Gains, Taking Action Now: Ontario's Tobacco Control Strategy for 2011-2016* and the goals of the Ontario Coalition for Smoke-free Housing by:
  - a) Working with the Elgin St. Thomas Housing Corporation, the housing providers, and private landlords to provide information, resources and to advocate for and support the development and implementation of smoke-free housing policies for multi-unit dwellings in St. Thomas and Elgin County.
  - b) Responding to complaints received by the public on drifting second-hand smoke exposure in multi-unit dwellings will provide both tenants and landlords with relevant information and, in the absence of a smoke-free policy, suggestions to improve or amend the health and safety concerns.
  - c) Working with other community and public health partners such as the South West Tobacco Control Area Network to educate and advocate for smoke-free housing.

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