

March 2, 2018

To: House Committee on General, Housing and Military Affairs  
From: Rebecca Ryan, Sr. Director, Health Education & Public Policy  
Subj: H.127: An Act Related to Prohibiting Smoking in Multi-Unit Housing

On behalf of the American Lung Association (ALA) in Vermont, thank you for the opportunity to testify today in support of H.127. Our mission is to save lives by preventing lung disease and promoting lung health. We have long supported initiatives to implement smokefree policies in multi-unit housing. The ALA's [web-based course](#) offers expert guidance and tools on how to implement a successful smokefree multi-unit housing policy. It is designed for property managers, residents and public health advocates

**There is no safe level of secondhand smoke exposure.**

Secondhand smoke (SHS) exposure is a significant cause of disease and premature death. A recognized cause of lung cancer (the leading cancer killer among men and women in the U.S. and in Vermont), SHS is also associated with heart disease and respiratory problems in non-smoking adults. Children exposed to SHS are at increased risk of sudden death syndrome (SIDS), respiratory infections, asthma and ear infections.

According to the U.S. Surgeon General, there is *no risk-free* level of secondhand smoke exposure<sup>1</sup>. The American Society of Heating, Refrigerating and Air-Conditioning Engineers stated that no ventilation can completely eliminate toxins from secondhand smoke.<sup>2</sup>

**The home is the main place where children are exposed to secondhand smoke.**

There are laws that protect Vermonters from secondhand smoke in public places and workplaces, and even 25 feet from the entry of state-owned buildings. There is a law to prohibit smoking in the presence of children (8 and under) in motor vehicles and a regulation that bans smoking in homes that provide foster care. However, the home continues to be the main place where children are exposed to secondhand smoke. Multi-unit housing is particularly challenging. SHS smoke can travel into an apartment from other apartments and common areas, through doorways, cracks, in walls, electrical lines, ventilation systems and plumbing. If you smell smoke, you breathe smoke.

**Smokefree multi-unit housing policy is in demand and on the rise.**

Approximately 82% of Vermonters do not smoke, and 93% of Vermonters ban smoking in their home (69% of smokers ban smoking in their home).<sup>3</sup> The majority of renters prefer smokefree housing and some will pay more or move to avoid SHS. As of July 1, 2018, the U.S. Department of Housing and Urban Development requires all public housing authorities to ban smoking in all buildings and 25 feet from entryways. More and more market properties have smokefree policies in place.

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<sup>1</sup> The Health Consequences of Secondhand Smoke: A Report of the Surgeon General, June 2006.

<sup>2</sup> The American Society of Heating, Refrigerating and Air-Conditioning Engineers (ASHRAE), June 2005.

<sup>3</sup> Vermont Department of Health, Tobacco Data Pages, January 2017

**Smokefree laws help to reduce fire deaths.**

Despite the fact that fire-safe cigarettes are required in all states including Vermont, they aren't fire proof. According to the Vermont Department of Fire Safety, eight civilians in Vermont have died since 2012 due to smoking materials, more than any other known cause.

**Smokefree laws save property owners money.**

Many property insurance carriers provide discounts for fire-safe plans, including smokefree housing policy. According to a 2009 survey of New England housing authorities and subsidized housing, the cost to turn over an apartment of a non-smoker was \$560 compared \$3,515.00 for the apartment of a heavy smoker. And finally, smoking costs all of us. Vermont spends \$348 million each year, \$72 million of which are direct Medicaid expenditures, due to tobacco use.

**Smokefree laws often motivate smokers to quit smoking.**

A 2013 study showed that when there is a 100% smoking ban in the home, smokers are more likely to reduce tobacco consumption and attempt to quit than when they are allowed to smoke in the house. Fortunately, Vermont offers free tobacco treatment and nicotine replacement therapy (NRT) for smokers through 802Quits (1-800-QUIT-NOW). In addition, Vermont Medicaid has a comprehensive medication benefit, covering NRT and tobacco cessation prescription drugs in addition to covering in-person provider counseling.

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