

January 19, 2016

Secretary Julian Castro  
Office of Public and Indian Housing  
Department of Housing and Urban Development  
451 7th Street SW., Washington, DC 20410-0500

**RE: Docket Number FR 5597-P-02 “Instituting Smoke-Free Public Housing”**

To Secretary Julian Castro:

The National Council for Behavioral Health (National Council) welcomes the opportunity to submit comments on the proposed rule, *Instituting Smoke Free Public Housing* (FR 5597 P 02). We commend HUD for its attention to the important issue of smoke-free public housing and urge you to make several modifications to strengthen the rule, as noted below.

The National Council is the unifying voice of America’s community mental health and substance use treatment organizations. Together with our 2,500+ member organizations employing 1 million staff, we serve our nation’s most vulnerable citizens – more than 10 million adults and children living with mental illnesses and addictions.

The National Council operates the [National Behavioral Health Network for Tobacco & Cancer Control](#), a 5-year program jointly funded by the Centers for Disease Control & Prevention’s (CDC) Office on Smoking and Health and Division of Cancer Prevention and Control. On behalf of the National Council and the National Behavioral Health Network’s members, we are pleased to have the opportunity to comment on this proposed rule.

**The Issue**

According to the Substance Abuse & Mental Health Services Administration (SAMHSA), approximately 1 in 5 US adults has either a mental illness, substance use disorder, or both<sup>1</sup>. People with mental illnesses and addictions use tobacco at rates that are nearly double that of the general population. Adults with addictions and mental illnesses frequently report that they want to quit and can succeed when they have access to evidence-based cessation treatments and support. Ultimately, tobacco cessation supports and tobacco free environments are critical for this population.

**Responses to Key HUD-posed Questions**

*Does this proposed rule create burdens, costs, or confer benefits specific to families, children, persons with disabilities, owners, or the elderly, particularly if any individual or family is evicted as a result of this policy?*

The National Council strongly believes that no individual or family should experience eviction as a result of this policy. As described in the *Northwestern Journal of Law and Social Policy*, “Reliable housing is

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<sup>1</sup> Center for Behavioral Health Statistics and Quality. Behavioral health trends in the United States: Results from the 2014 National Survey on Drug Use and Health (HHS Publication No. SMA 15-4927, NSDUH Series H-50). Retrieved from <http://www.samhsa.gov/data/>

necessary for well-being, particularly for persons with severe and persistent mental illness...The necessity of providing people who have a severe mental illness with safe and stable housing is recognized by federal housing laws, but rubber-stamp evictions undermine this intended right, with disastrous results for this often fragile segment of society. Evictions hit persons with disabilities with a particular punch because of the difficulty of obtaining housing in the first place.”<sup>2</sup>

For these reasons, the National Council strongly urges HUD to put forth financial support to public housing authorities in order to ensure provision of and access to cessation treatments and services. Cessation treatment supports include, but are not limited to: cessation counseling, cessation support groups, and FDA-approved cessation medications. Cessation treatment supports can be provided by a variety of individuals, such as volunteers, peers, and case managers, in easily accessible settings like in one’s residence and in communal spaces.

*Are there specific areas of support that HUD could provide PHAs that would be particularly helpful in the implementation of the proposed rule?*

There are many areas of support that HUD can provide to PHAs that would be particularly helpful in the implementation of the proposed rule. These include:

- Easy access to affordable cessation treatments, supports, and information. Cessation supports may include, but are not limited to:
  - Educational materials (e.g., pamphlets)
  - Quit Line calling cards
  - On-site *Freedom From Smoking*<sup>®</sup> classes
  - Affordable access to FDA-approved cessation medications
  - Ample pre-approved signage for use by PHAs as they transition to smoke-free indoor policies
- Talking points provided by HUD to PHAs which clearly outline the reasons for the new rule and benefits for residents.

An effective strategy for providing cessation services would be to utilize peers and volunteers. A systematic review of peer-support programs for smoking cessation in disadvantaged groups revealed promising results in providing cessation support and building capacity in the community.<sup>3</sup>

*Should the policy extend to electronic nicotine delivery systems, such as e-cigarettes?*

The National Council fully supports the policy’s inclusion of electronic nicotine delivery systems, such as e-cigarettes. A recent study from Harvard School of Public Health revealed that the flavoring of e-cigarettes contain hazardous chemicals long associated with lung disease<sup>4</sup>. In addition, the use of e-cigarettes normalizes smoking behavior, especially for youth. In fact, public health advocates consider

<sup>2</sup> Meghan P. Carter, *How Evictions from Subsidized Housing Routinely Violate the Rights of Persons with Mental Illness*, 5 Nw. J. L. & Soc. Pol’y. 118 (2010). <http://scholarlycommons.law.northwestern.edu/njisp/vol5/iss1/5>

<sup>3</sup> Ford P, Clifford A, Gussy K, Gartner C. A Systematic Review of Peer-Support Programs for Smoking Cessation in Disadvantaged Groups. *International Journal of Environmental Research and Public Health*. 2013;10(11):5507-5522. doi:10.3390/ijerph10115507.

<sup>4</sup> Roeder, Amy. *Chemical flavorings found in e-cigarettes linked to lung disease*, Harvard Gazette. Dec 8 2015. <http://news.harvard.edu/gazette/story/2015/12/popcorn-lung-seen-in-e-cigarette-smokers/>

e-cigarettes a gateway to smoking tobacco cigarettes and a major trigger for people in the process of quitting or those recently in recovery from tobacco<sup>5</sup>.

Enforcement of regular, combustible cigarettes is more challenging when e-cigarettes are excluded from rules like this. For example, it is difficult to discern if someone is smoking a regular cigarette or an e-cigarette<sup>6</sup>.

*Should the policy extend to waterpipe tobacco smoking? Does such smoking increase the risk of fire or property damage?*

The National Council fully supports the policy's inclusion of waterpipe tobacco smoking, in addition to traditional tobacco delivery systems. Contrary to beliefs that hookah/waterpipe smoke is less harmful than cigarettes, research has shown that "hookah smoke contains many of the same harmful toxins as cigarette smoke and has been associated with lung cancer, respiratory illness, low birth weight, and periodontal disease."<sup>7</sup> In addition to the harmful health effects of waterpipe smoking, this practice also creates a significant fire hazard and further increases maintenance costs associated with residential units that allow indoor smoking. The benefits of being wholly smoke-free inside public housing units are universal.

### Conclusions

1. Any individual or family in violation of this policy should not be evicted and be granted access to cessation treatment supports and services.
2. There are many areas of support that HUD can provide to PHAs that would be particularly helpful in the implementation of the proposed rule, as listed above.
3. The policy should extend to electronic nicotine delivery systems, such as e-cigarettes.
4. The policy should also prohibit waterpipe tobacco smoking within public housing units.

Thank you for the opportunity to comment on this rule.

Kind regards,



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President & Chief Executive Officer  
National Council for Behavioral Health

<sup>5</sup> Primack BA, Soneji S, Stoolmiller M, Fine MJ, Sargent JD. *Progression to Traditional Cigarette Smoking After Electronic Cigarette Use Among US Adolescents and Young Adults*. JAMA Pediatr. 2015;169(11):1018-1023. doi:10.1001/jamapediatrics.2015.1742.

<sup>6</sup> Tobacco Control Legal Consortium, *Regulating Electronic Cigarettes and Similar Devices*, August 2015, <http://www.publichealthlawcenter.org/sites/default/files/resources/tclc-guide-reg-ecigarettes-2015.pdf>.

<sup>7</sup> Morris DS, Fiala SC, Pawlak R. Opportunities for Policy Interventions to Reduce Youth Hookah Smoking in the United States. *Prev Chronic Dis* 2012;9:120082. DOI: <http://dx.doi.org/10.5888/pcd9.120082>