

# SMOKE- & VAPE-FREE MULTIUNIT HOUSING MODEL ORDINANCE

for New York State



**This model ordinance was prepared for municipalities and counties in New York State interested in creating smoke-free and vape-free areas in multiunit housing.**

The ordinance is comprehensive, covering all portions of multiunit housing, all types of products, and providing no exceptions. This model ordinance includes all the minimum clean indoor air restrictions required by New York State law and federal law in public housing. It also includes several additional provisions a community may choose to adopt to further protect public health.



Although this ordinance is tailored for communities in New York State, it is based on the Public Health Law Center's *National Smoke-Free Multi-Unit Housing Model Ordinance*, which was drafted with an emphasis on health equity. Health equity requires that unintended negative effects that disproportionately harm Black, Indigenous, people of color, low-income, and other subpopulations must be addressed and mitigated by any policy that purports to protect health. This national model policy was developed with significant input from stakeholders representing organizations nationwide with expertise in public health, housing, social justice, restorative justice, and racial and economic equity, as well as advocates for marginalized residents. The Public Health Law Center is grateful for the invaluable input that we received from these stakeholders as we sought to develop a policy that will protect the health of all residents while not jeopardizing residents' housing stability. While there is no perfect policy, the advisory group that helped craft this model carefully weighed the impacts of each policy provision and enforcement measure and arrived at consensus on the provisions included here.

### **Health Equity, Social Determinants of Health, Minimizing Eviction, and Fair Housing**

Smoke-free housing policies are important measures to protect the health of multiunit housing residents, who are more frequently low-income, Black, Indigenous, people of color, elderly, and people living with a disability. These policies must be implemented in ways that do not unfairly target or discriminate against residents or exacerbate challenges in securing housing, which is a key social determinant of health. Support for quitting or reducing smoking is critical in any smoke-free housing policy. Jurisdictions and properties implementing a smoke-free policy need to follow state and federal fair housing laws;<sup>1</sup> avoid eviction; minimize use of fines that may threaten housing stability; and preclude criminal penalties.

The severe and lasting harms of eviction threaten housing stability, employment, education, and health. As such, communities should support comprehensive solutions to minimize eviction and to ensure community members have access to affordable and healthy housing. Several organizations have initiatives, strategies, and policies to prevent eviction, including:

- National Housing Law Project's *Eviction Prevention Resource for Advocates Working with Public Housing and Voucher Tenants* (2022), which outlines steps and resources to prevent eviction.
- The U.S. Department of the Treasury Emergency Rental Assistance Program has compiled resources on strategies for communities to support *Eviction Diversion*.
- New York City's *Homebase*, a homelessness prevention network with 23 locations across the five boroughs of New York City.

Any community planning to adopt this model ordinance, in whole or in part, should review it with local legal counsel to determine its suitability for the community and compliance with state and federal laws. While model ordinance language can be modified by adding or omitting content on activities that a community does or does not seek to regulate, these changes may result in an ordinance that does not conform with best public health policy practices. The Public Health Law Center provides legal technical assistance to help communities that wish to adopt commercial tobacco control ordinances. We encourage communities to contact us for assistance when considering this model language.

### **A Note About Resources for Successful Implementation**

The strategies for ensuring an equitable approach to enforcement outlined in this model policy will likely require additional resources to support implementation. This might include developing materials to educate the community about the policy, establishing and administering a complaint process, conducting investigations, and hiring staff or contractors to support key elements of the policy, such as restorative justice procedures. Local public health staff will play an instrumental role in the policy's success. In addition, the jurisdiction may seek assistance from outside funders, including healthcare organizations and foundations, to support initial start-up costs. Ongoing costs may be addressed through rental license fees and taxes.

## **Customizing the Ordinance**

Context boxes are included throughout the ordinance to explain several key provisions. These boxes are not meant to be included in any final ordinance.

In some instances, blanks (such as [ \_\_\_\_ ]) prompt you to customize the language to fit your community's needs. In other instances, the model ordinance offers you a choice of options (such as [ choice one/choice two ]). Some options are followed by a comment that describes the legal provisions in more detail. A degree of customization is always necessary to make sure the ordinance is consistent with a community's existing laws. Such customization also ensures that communities are using the model ordinance to address local needs and engender health equity.

## **Tips for Using This Model Ordinance**

The best possible world is one without the death and health harms caused by commercial tobacco use and exposure to secondhand and thirdhand smoke. Communities differ on their

readiness and willingness to adopt certain commercial tobacco control policies that are intended to achieve this ideal. Accordingly, this model ordinance represents a balance among best public health policy practices, advancing health equity, and practicality for local governments.

This ordinance may be adopted as a stand-alone ordinance or may be revised and incorporated into an existing clean air ordinance, depending upon the needs of the locale.

While the Public Health Law Center does not lobby, advocate, or directly represent communities, we can provide legal technical assistance through our publications and tailored information and support to communities. In addition, we can provide referrals to experts in the field. Please contact the Public Health Law Center if you have any questions about this ordinance. You can reach us at (651) 290-7506 or [publichealthlawcenter@mitchellhamline.edu](mailto:publichealthlawcenter@mitchellhamline.edu).

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This national model ordinance was prepared by the Public Health Law Center at Mitchell Hamline School of Law, St. Paul, Minnesota, and was made possible by a contract with the New York State Department of Health. It is based on a model ordinance made possible with funding from the Robert Wood Johnson Foundation, the Minnesota Department of Health, and Blue Cross & Blue Shield of Minnesota. The Center would like to thank experts from the following organizations for their contributions in shaping the Minnesota model: Association for Nonsmokers Minnesota, Bloomington Public Health, Center for Black Health and Equity, National Housing Law Project, Restorative Response Baltimore, Minnesota Mediation Services, Rutgers Robert Wood Johnson Medical School, and Breathe California.

The Public Health Law Center is a nonprofit organization that provides information and legal technical assistance on issues related to public health law and policy. The Center does not provide legal representation or advice. The information in this document should not be considered legal advice.

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## AN ORDINANCE REGULATING SMOKING IN AND AROUND MULTIUNIT RESIDENCES IN THE [ MUNICIPALITY /COUNTY OF \_\_\_\_\_ ].

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The [ the Common Council/County Board of Supervisors ] of the [ the Municipality/County of \_\_\_\_\_ ] does ordain;

### Section 1. Findings of Fact and Purpose.

#### **Comment**

A Findings of Fact and Purpose section is important because it provides the evidentiary basis for the proposed commercial tobacco control policies and demonstrates the jurisdiction’s reasoning for adopting specific provisions. This Findings of Fact and Purpose section reflects language appropriate for all suggested provisions. The Public Health Law Center can provide support for communities to determine which Findings of Fact and Purpose statements and references should be retained in a final ordinance, depending on which provisions from the model ordinance the community chooses to adopt. The sample Findings of Fact and Purpose may be found in the [Appendix](#).

NOW THEREFORE it is the intent of the [ Common Council/County Board of Supervisors ] in enacting this ordinance, to provide for public health, safety, and welfare by discouraging the inherently dangerous behavior of smoking; by protecting children from exposure to smoking where they live and play; and by protecting the public from nonconsensual exposure to secondhand and thirdhand smoke in and around their homes.

## Section 2. Definitions.

Except as may otherwise be provided or clearly implied by context, all terms are given their commonly accepted definitions. For this ordinance, the following definitions apply unless the context clearly indicates or requires a different meaning. Note that some proposed definitions may vary slightly and be more expansive than current New York State law.

- “Common interest community” or “CIC” means contiguous or noncontiguous real estate where persons separately own or occupy by proprietary lease a described parcel of the real estate and where their ownership or occupancy requires them to pay real estate taxes, insurance premiums, and maintenance, construction, repair, and replacement of improvements located on one or more parcels or parts of the real estate other than the parcel or part that the person owns or occupies. Common interest community includes but is not limited to condominiums, townhomes, and cooperatives.

### Comment

Housing options like condominiums and cooperatives are common in New York State, and both are included here under the umbrella term “common interest community” for ease of reading. However, each has a very different ownership structure within a complicated area of law. Here are some materials that go into further detail on this distinction:

- New York City Bar Legal Referral Service, [“Co-ops, Condos, & Lofts”](#)
  - New York State Attorney General, [“Before You Buy A Co-Op or Condo”](#)
  - Smoke-Free Housing NY, [“Condos/Co-ops”](#)
  - *New York Times*, [“Co-op vs. Condo: The Differences Are Narrowing”](#)
  - *Washington Post*, [“Condo vs. Co-Op: Know the Differences Before Buying One”](#)
- “Day Fine System” means a fine system based on a process of identifying appropriate fines or penalties for individuals based on their ability to pay and the severity of the violation.

- “Dwelling Unit” means one or more rooms designed for residential use by a single household that contain cooking, living, sanitary, and sleeping facilities and that are physically separated from any other rooms or dwelling units that may be in the same structure.
- “Electronic Smoking Device” means any device that may be used to deliver any aerosolized or vaporized substance to the person inhaling from the device, including, but not limited to, an e-cigarette, e-cigar, e-pipe, vape pen, or e-hookah.
- “Indoor Area” means all space between a floor and a ceiling that is bounded by walls, doorways, or windows, whether open or closed, covering more than 50 percent of the combined surface area of the vertical planes constituting the perimeter of the area.
- “Indoor Common Area” means every indoor area, as defined, of a multiunit residence that is accessible for common use to residents, staff, and employees, including but not limited to, halls, lobbies, offices, storage facilities, janitorial facilities, utility facilities, elevators, stairs, community rooms, gym facilities, swimming pools, parking garages, restrooms, laundry rooms, cooking areas, and eating areas.
- “Landlord” means an owner of real property, a contract for deed vendee, receiver, executor, trustee, lessee, of rental property. Landlord includes any owner of a unit(s) within a common interest community whose unit is leased and occupied by a tenant as a part of a residential lease agreement. For purposes of this ordinance, a residential tenant who sublets a unit (e.g., a sublessor) is not a landlord.
- “Managing Body” means the body, regardless of name, designated in the articles of incorporation, bylaws, or declaration of a common interest community to act on behalf of the common interest community. The term includes boards of managers, boards of directors, and homeowners’ associations.
- “Mixed-Use Residential Development” means a development project that may provide more than one use within a shared building or development area. Mixed-use projects may include any combination of housing, office, retail, medical, recreational, commercial, or industrial components.
- “Multiunit Residence” means a building or portion thereof designed or used for residential occupancy by two or more households in separate dwelling units.\*

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\* Under New York State law, “multiunit residence” is defined differently than “multiple dwelling.” “Multiple dwelling” is defined as a dwelling which is either rented, leased, let or hired out, to be occupied, or is occupied as the residence or home of three or more families living independently of each other.” N.Y. State Multiple Dwelling Law, Art. 1, Sect. 4 §7, <https://www.nysenate.gov/legislation/laws/MDW/4>.

### Comment

This definition is used in conjunction with the definition of “dwelling unit” in this Model Ordinance, which makes clear that this term is limited to dwelling spaces within multiunit buildings. The jurisdiction may choose to apply a smoke-free policy to a broader range of housing types or types of dwellings, such as hotels, motels, dormitories, campgrounds, rented single family housing, and manufactured housing parks.

The U.S. Department of Housing and Urban Development requires public housing agencies to adopt a policy prohibiting smoking in all indoor areas, including residential units, and outside spaces within 25 feet of indoor areas of public housing. For more information on the HUD Rule, see the Public Health Law Center’s publication, *HUD’s Smoke-Free Public Housing Rule: An Overview* (2017).

- “Outdoor Area” means any area of the property that is not an indoor area or indoor common area.
- “Person” means any natural person, partnership, cooperative association, corporation, personal representative, receiver, trustee, assignee, or any other legal entity, including government agencies.
- “Resident” means a unit owner or residential tenant of a multiunit residence.
- “Residential Tenant” means a person who is occupying a dwelling designed for residential use under a lease or contract, whether oral or written, that requires the payment of money or exchange of services, and all other regular occupants of that dwelling unit.
- “Smoking” means inhaling, exhaling, burning, or carrying any lighted or heated cigar, cigarette, pipe, or any other lighted or heated product containing, made, or derived from nicotine, tobacco, marijuana, or other plant, whether natural or synthetic, that is intended for inhalation. Smoking includes carrying or using an activated electronic smoking device. Smoking does not include the use of traditional, sacred tobacco as part of an Indigenous practice or a lawfully recognized religious, spiritual, or cultural ceremony or practice.



### Comment

Although cannabis use is legal in New York State, smoking or vaping of any substance, including cannabis, may create harmful secondhand and thirdhand exposure to particles and chemicals from the substances smoked. For the purposes of a smoke-free housing policy, prohibiting smoking (including the use of electronic smoking devices, also known as “vaping”) of cannabis is covered under the comprehensive definition of “smoking” that is included in this model policy.

It should be noted that the smoking of medical cannabis in multiunit housing raises some complicated issues in New York State. The Office of Cannabis Management has stated that “A landlord cannot refuse to rent to a tenant who consumes cannabis, but landlords, property owners, and rental companies can still ban the smoking or vaporizing of cannabis on their premises.”<sup>2</sup> However, state statute states that no landlord’s smoke-free policy “may be construed to limit the certified medical use of cannabis.”<sup>3</sup>

### Comment

Smoke-free policies often provide exceptions for traditional, ceremonial, and sacred uses of tobacco practiced by some Indigenous communities, while prohibiting the use of commercial tobacco. For more information about this topic, please visit <https://keepitsacred.itcmi.org>.

- “Substantiated Complaint” means any alleged violation that is supported by a preponderance of the evidence or has resulted in a civil citation.
- “Unit Owner” means a declarant or other person who owns a unit, a lessee under a proprietary lease, or a lessee of a unit in a leasehold common interest community whose lease expires simultaneously with any lease the expiration or termination of which will remove the unit from the common interest community but does not include a secured party. In a common interest community, the declarant is the unit owner of a unit until that unit has been conveyed to another person.

### Section 3. Smoking Restrictions.

- (A) Effective [ 180 ] days from [ enactment date ], smoking is prohibited anywhere on:
- (1) The premises of a multiunit residence, including indoor and outdoor areas of multiunit residences, and
  - (2) The premises of mixed-use residential developments, including in all indoor and outdoor areas of those mixed-use residential developments.

#### Comment

Advance communication, training, and technical assistance for landlords and managing bodies, and provision of cessation resources by the public health department will be critical to successful implementation of the law. While this model ordinance provides a 180-day transition period before requirements are enforced, a jurisdiction may choose to have a shorter or longer transition period to provide the public health protections of the smoke-free law or to provide additional time to prepare the community. Considerations in timing for the effective date include adequate time for community and resident education, establishing or providing cessation resources, and providing training and technical assistance to managing bodies and landlords to facilitate implementation.

We do not believe it is necessary to allow a lengthy timeframe to accommodate lease renewals because lease provisions cannot conflict with local laws. However, to encourage compliance, a phase-in period may be useful to ensure that residents know and understand the law and that management has capacity for implementation and enforcement.

#### Comment

This model ordinance also protects residents in mixed-use residential properties that may include non-residential units or spaces. The ordinance prohibits smoking at any retailer or other business that is part of a mixed-use residential property. This ordinance also prohibits smoking in outdoor areas that may adjoin a non-residential business, such as a bar or restaurant if it is part of a mixed-use residential property. (Note that this proposed language goes further than many New York state or local laws and removes any exemptions that allow outdoor smoking areas.)

## Comment

Responsibilities of landlords and managing bodies under this ordinance include:

1. Landlords and managing bodies must not allow smoking anywhere on the premises — unless the ordinance provides for a designated smoking area (DSA). (Sec. 3(B))
2. Landlords and managing bodies must not place and must remove ashtrays and ashcans where smoking is prohibited. (Sec. 3(E))
3. Landlords and managing bodies are responsible for the acts of their agents, employees, and contractors. (Sec. 3(D))
4. Landlords and managing bodies with knowledge of alleged violations must take reasonable and timely steps to investigate and enforce the policy, with written notice to the resident allegedly violating the policy that includes: Knowledge of the alleged violation, a request to cease the violation, and the course of action to be taken if the violation is not corrected. (Sec. 3(E))
5. Landlords and managing bodies are not allowed to use this ordinance to intimidate, harass, or retaliate against residents. (Sec. 3(F))
6. Landlords and managing bodies must provide a copy of the ordinance and written notice to tenants/owners about the policy. LL/CIC unit owners must also provide prospective residents (tenant applicants and buyers) a copy of the ordinance and written notice about the policy. The city/county will provide a template for the required notice. The notice will include:
  - A statement of the no-smoking policy (specifying any DSAs, if allowed/applicable)
  - Responsibility of landlords and managing bodies to respond to complaints of violations in writing to the resident complaining
  - Information on how to file a complaint with the city/county for alleged violations by the landlords and managing bodies or residents
  - Cessation resources (Sec. 4(A) and (B), and Sec. 5(A) and (B))
7. Landlords and managing bodies must post and maintain clear and unambiguous “No Smoking” signs at entrances and exits, in indoor common areas, and in conspicuous places adjoining the property grounds. (Sec. 4(C) and Sec. 5(C))
8. Landlords and managing bodies must respond to complaints received from residents with acknowledgement of the complaint and steps taken to address the violation (Sec. 4(D) and Sec. 5(D))

- (B) No Landlord or managing body shall allow smoking anywhere on the premises of the multiunit residence.

**Comment**

This provision and other provisions in this ordinance create a maintenance responsibility for property owners that rent their space to residents to ensure smoking does not occur on their property. The responsibility to take measures to prohibit smoking can be satisfied in a variety of ways described below, including signage, responding in a timely and effective manner to resident complaints, providing cessation information and smoke-free reminders in the lobby, and creating a smoke-free policy that is incorporated into lease or managing body purchase agreements. This ordinance does not require property owners to create and implement a smoke-free policy for their property, but their doing so in alignment with this ordinance would help with enforcement and compliance. This rental property ownership responsibility will be evaluated and enforced by the city or county, providing greater protection to residents whose landlords and managing bodies do not have an established smoke-free policy for their property or who fail to enforce a smoke-free policy already in place.

Paragraph (B) combined with paragraph (D) below, creates an obligation of property owners by making the managing body or the landlord responsible for the acts of their agents, employees, and contractors to prohibit smoking on the premises.

**Comment**

The most protective approach, from a public health standpoint, is to prohibit smoking anywhere on the premises of a multiunit residence. However, if a jurisdiction wants to allow limited outdoor smoking, the narrowest way to do so would be to include a designated smoking area (DSA). From a public health standpoint, the preferable approach would be to allow on the premises only one DSA that is required to be at least 25 feet from interior areas and from outdoor areas frequented by other residents and children. Here is sample language that would allow this:

Replace the current subsection Sec. 3 (B) with the following new subsections:

- (B) Notwithstanding subsection (A), smoking is permitted in designated smoking areas if they meet the following conditions:
- (1) Must not be an indoor area

- (2) Must be at least twenty-five (25) feet from any:
    - (a) dwelling unit;
    - (b) common area;
    - (c) windows, doors, air conditioning unit, air intake, ventilation unit, or similar; outdoor recreation area such as a tennis court, swimming pool, and picnic area;
    - (d) parking lots and parking structures; and
    - (e) outdoor area primarily used by children, such as playgrounds and school bus stops
  - (3) Must have a clearly marked perimeter
  - (4) Must be identified by conspicuous signs
  - (5) Must comply with any state and local smoke-free laws.
- (C) No landlord or managing body shall permit smoking in the nonsmoking area, except as provided in subsection (B).

*Please contact the Public Health Law Center for more information on no-smoking buffer zones or designated smoking areas.*

- (C) Landlords and managing bodies shall not place, and shall remove, ashtrays, ashcans, or other receptacles designed for or primarily used for disposal of smoking waste from areas where smoking is prohibited by this [ chapter/article ] or other law.
- (D) Landlords and managing bodies are responsible for the acts of their agents, employees, and contractors.
- (E) Landlords and managing bodies with knowledge of any alleged violation shall take reasonable and timely steps, not longer than two weeks, to investigate and enforce the regulations, including providing written notice to the resident of the landlord's or managing body's knowledge of the alleged violation, a request to cease the alleged violation, and the course of action to be taken if the alleged violation is not corrected. The landlord or managing body shall also provide resources provided for free by the [ city/county ] to assist with nicotine dependence, such as referrals to quitline or online cessation resources.

### Comment

To ensure that residents understand the requirements of this ordinance, landlords and managing bodies could include smoke-free provisions in their leases, lease addenda, house rules, or declarations. The Public Health Law Center has a model smoke-free [condo policy](#) and [lease addendum](#) that complement this model ordinance and includes equitable enforcement measures to encourage compliance. Additional resources are available to support landlords and managing bodies with implementation, compliance, and enforcement at [Tobacco-Free NYS](#), [Smoke-Free Housing NY](#), and [Americans for Nonsmokers' Rights Foundation](#).

### Comment

In supplying information and resources on tobacco cessation, property management, boards, and owners should rely on evidence-based cessation programs. The New York State Smokers' Quitline has counselors who are trained specifically to help smokers quit and can be reached at 1-866-NY-QUITS (1-866-697-8487); by text at (716) 309-4688; and online at [nysmokefree.com](#). Also, the [North American Quitline Consortium](#) provides state-specific information including services offered, eligibility criteria, specialized materials, and provider referral programs. The Centers for Disease Control and Prevention website likewise provides [information on quitlines, apps, texting support, developing a quit plan, and much more](#). [Smokefree.gov](#) also contains a wealth of resources on quitting, including tips, tools, and smoke-free apps.

- (F) No person shall intimidate, harass, or otherwise retaliate against any person who seeks to comply with this [ chapter/article ]. No person shall use this [ chapter/article ] to harass or intimidate any resident with frivolous claims unsubstantiated by evidence or actual harm.

### Comment

Harassment or retaliation are sometimes risks in the context of smoke-free housing. The harassment or retaliation may come from the landlord/managing body for residents complaining about secondhand or thirdhand smoke or for residents suspected of violating the no-smoking requirements. Such retaliation or harassment may include the landlord/managing body targeting enforcement against specific residents and not others. Residents may also misuse the no-smoking requirements to harass or retaliate against other residents or the landlord/managing body by threatening to lodge complaints to the city/county or to initiate frivolous lawsuits. This provision is intended to prevent the potential misuse of the ordinance.

## Section 4. Requirements for Rental Properties.

The following requirements apply to multiunit residences that are offered and available for rent or are currently rented:

- (A) On or before [ enactment date + 180 days ], and annually thereafter, every landlord shall deliver to each tenant a written notice including the following information, which the [ city/county ] will provide in a notice form upon request:
- (1) Under [ city/county ] law, all individual units in multiunit housing and mixed-use residential developments are designated nonsmoking units, meaning that smoking is prohibited inside all units, including any associated private balcony, porch, deck, or patio, as of [ effective date ];
  - (2) Smoking in any indoor common area, including lobbies, laundry rooms, management offices, utility areas, garages, and mailrooms, is a violation of [ this chapter/article ] as of [ effective date ];
  - (3) Smoking in any outdoor areas of a multiunit residence, including playgrounds, pools, and entryways, [ except for specifically designated outdoor smoking areas, ] is a violation of [ this chapter/article ] as of [ effective date ];
  - (4) Landlords must respond in writing to complaints made by residents upon receipt of a complaint from the resident or from the city for alleged violations of [ chapter/article ] as of [ effective date ]; and,

- (5) Information on how residents can file a complaint with the [ city/county ] department of public health about either:
  - (a) An alleged smoking violation on the property by a person in an area where smoking is prohibited under this ordinance; or
  - (b) A landlord who has failed to comply with this ordinance.
- (6) Cessation resources in the community.

### Comment

Local public health authorities could offer to provide sample language and form letters that could be used by property owners and managers to meet the notification requirements of this ordinance.

- (B) As of [ enactment date ], every landlord shall provide prospective residential tenants with written notice including the following information:
  - (1) Under [ city/county ] law, all individual units in multiunit housing and mixed-use residential developments are designated nonsmoking units, meaning that smoking is prohibited inside all units, including any associated private balcony, porch, deck, and patio, as of [ effective date ];
  - (2) Smoking in any indoor common area, including lobbies, laundry rooms, management offices, utility areas, garages, and mailrooms, is a violation of [ this chapter/article ] as of [ effective date ];
  - (3) Smoking in any outdoor areas of a multiunit residence, including playgrounds, pools, and entryways, [ except for specifically designated outdoor smoking areas, ] is a violation of [ this chapter/article ] as of [ effective date ];
  - (4) Landlords must respond in writing to complaints made by residents upon receipt of a complaint from the resident or from the [ city/county ] for alleged violations of [ chapter/article ] as of [ effective date ]; and



- (5) Information on how residents can file a complaint with the [ city/county ] department of public health about either:
  - (a) An alleged smoking violation on the property by a person in an area where smoking is prohibited under this ordinance; or
  - (b) A landlord who has failed to comply with this ordinance.
- (6) Cessation resources in the community.

### Comment

Local public health authorities could offer to provide sample language and form letters that could be used by property owners and managers to meet the notification requirements of this ordinance. Examples of notification to prospective residents may include signage on-site, information on the property website, social media, or any place the rental property may be publicized.

- (C) As of [ effective date ], the landlord shall post and maintain clear and unambiguous “No Smoking” signs at entrances and exits, in indoor common areas, and in conspicuous places adjoining the property grounds. Signs must use written and visual images to indicate that smoking of both combustible products and use of electronic smoking devices is prohibited and must be printed in any languages in addition to English that reflect the languages spoken by 25 percent of the residents. In addition, as of [ effective date ], the landlord shall post and maintain signs in sufficient numbers and locations in the multiunit residence to indicate that smoking is prohibited in all units. The absence of signs shall not be a defense to a violation of any provision of this [ chapter/article ]. “No Smoking” signs are not required inside or on doorways of units.

### Comment

Local public health authorities could offer to provide free signage or templates to property owners and managers to meet the notification requirements of this ordinance.

- (D) As of [ effective date ], the landlord shall respond to complaints made by residents of alleged violations with acknowledgment of the complaint and steps taken to address the alleged violation.

### Comment

To ensure that residents understand the requirements of the no-smoking policy, landlords could include smoke-free provisions in their lease agreements. The Public Health Law Center has a model smoke-free lease addendum for use in Minnesota that complements this model ordinance and includes equitable enforcement measures to ensure that compliance is the primary goal and eviction is a last resort.

- *Model Smoke-Free Lease Addendum (2020)*
- *Smoke-Free Multi-Unit Housing: Equitable Enforcement Strategies (2020)*

## Section 5. Requirements for Common Interest Communities.

The following requirements apply to common interest communities:

- (A) On or before [ enactment date + 180 days ], and annually thereafter, the managing body shall provide to all unit owners a copy of this [ chapter/article ] and written notice including the following information, which the [ city/county ] will provide in a notice form upon request:
- (1) Under [ city/county ] law, all individual units in multiunit housing and mixed-use residential developments are designated nonsmoking units, meaning that smoking is prohibited in all units, including on any associated private balcony, porch, deck, or patio, as of [ effective date ];
  - (2) Smoking in any indoor common area is a violation of [ this chapter/article ] as of [ effective date ];
  - (3) Smoking in any outdoor area of the multiunit residence [ , except for specifically designated outdoor smoking areas, ] is a violation of [ this chapter/article ] as of [ effective date ];
  - (4) [ city/county ] law requires managing bodies to respond to complaints made by residents of alleged violations of [ chapter/article ] as of [ effective date ]; and,
  - (5) Information on how residents can file a complaint with the [ city/county ] department of public health about either
    - (a) a smoking violation on the property by a person in an area where smoking is prohibited under this ordinance or

- (b) a managing body that has failed to comply with this ordinance.
- (6) Cessation resources in the community.
- (B) As of [ effective date ] a unit owner shall provide prospective buyers or renters of their unit, a copy of this [ chapter/article ] and written notice including the following information, which the [ city/county ] will provide in a notice form upon request:
  - (1) Under [ city/county ] law, all individual units in multiunit housing and mixed-use residential developments are designated nonsmoking units, meaning that smoking is prohibited in all units, including on any associated private balcony, porch, deck, or patio, as of [ effective date ];
  - (2) Smoking is prohibited in all indoor common areas;
  - (3) Smoking is prohibited in all outdoor areas [ , except for specifically designated outdoor smoking areas, ] as of [ effective date ];
  - (4) Managing bodies and landlords are required to respond to complaints by made by residents of alleged violations of [ chapter/article ] as of [ effective date ]; and,
  - (5) Information on how residents can file a complaint with the [ city/county ] department of public health about either
    - (a) a smoking violation on the property by a person in an area where smoking is prohibited under this ordinance, or
    - (b) a landlord or managing body that has failed to comply with this ordinance.
- (C) As of [ effective date ], the managing body shall post and maintain clear and unambiguous “No Smoking” signs at entrances and exits, in indoor common areas, and in conspicuous places adjoining the property grounds. Signs must use written and visual images to indicate that smoking of both combustible products and use of electronic smoking devices is prohibited and must be printed in any languages in addition to English that reflect the languages spoken by 25 percent of the residents. In addition, as of [ effective date ], the managing body shall post and maintain signs in sufficient numbers and locations in the multiunit residence to indicate that smoking is prohibited in all units. The absence of signs shall not be a defense to a violation of any provision of this [ chapter/article ]. “No Smoking” signs are not required inside or on doorways of units.

- (D) As of [ effective date ], the managing body shall respond to complaints of alleged violations made by residents with acknowledgment of the complaint and steps taken to address the alleged violation.

### Comment

To ensure that residents understand the requirements of the no-smoking policy, managing bodies could include smoke-free provisions in their house rules or declarations. The Public Health Law Center has a model smoke-free condo policy developed for Minnesota (but which can be adapted for other jurisdictions) that complements this model ordinance and includes equitable enforcement measures to encourage compliance.

- [\*Model Smoke-Free Condominium Policy\* \(2020\)](#)
- [\*Smoke-Free Multi-Unit Housing: Equitable Enforcement Strategies\* \(2020\)](#)

## Section 6. Other Remedies.

### Comment

In most jurisdictions, residents, landlords, and managing bodies of multiunit housing can bring a private lawsuit for the actions or inactions of their landlords, managing bodies, or other residents based on nuisance, trespass, and other bases. The challenge with such individual legal actions as the sole basis for enforcement of smoke-free housing policies is that it is costly and burdensome. Jurisdictions with a smoke-free multiunit housing ordinance, such as this, provide more opportunities for enforcement and therefore protections for residents as opposed to solely relying on individual lawsuits. However, nothing in this ordinance prohibits legal action by residents to seek remedies for secondhand smoke exposure. For more information on the potential bases for an individual lawsuit, see the Public Health Law Center's publications [\*Secondhand Smoke in Condominiums: Legal Options for Owners\* \(2022\)](#), [\*Smoke-Free Housing and Rent Abatement\* \(2019\)](#), and [\*Infiltration of Secondhand Smoke into Condominiums, Apartments and Other Multi-Unit Dwellings\* \(2009\)](#).

A residential tenant may terminate a lease agreement without penalty or liability, including withholding the tenant's security deposit, upon the third substantiated complaint of a violation of this [ chapter/article ] by a landlord and evidence of continued secondhand or thirdhand smoke exposure by the residential tenant.

**Comment**

The remedy of lease termination by a tenant is not new. In many states, victims of domestic abuse may end a lease without penalties after giving the required notice (often 30 days) and usually upon proof of domestic abuse survivor status (e.g., a court-issued protective order). This provision in the smoke-free multiunit housing ordinance would likewise protect the tenant by prohibiting any penalty or liability, including withholding the security deposit.

**Section 7. Enforcement.****Comment**

The enforcement of smoke-free multiunit housing policies should balance the goal of protecting residents from secondhand and thirdhand smoke exposure with the goal of ensuring housing stability for all residents. Several factors should be considered in this balance, such as: the likely effectiveness of enforcement; equity (balancing the public health benefits of smoke-free housing policies with the risks of housing instability and associated health harms or negative social outcomes posed by different enforcement mechanisms); and the process of enforcement. Criminal and monetary administrative penalties can carry significant risks of discriminatory enforcement, financial hardship, and housing instability for residents. In the context of housing, another concern is the prospect of unintended criminal, immigration, and due process consequences because of potential increased interactions with law enforcement.

Another consideration for such criminal charges and penalties is how the criminal process may trigger a probation or parole violation or similar significant ripple effect in a resident's interaction with the justice system. Increased involvement with the criminal justice system could lead to more severe criminal sanctions and possible incarceration. In turn, these criminal sanctions could jeopardize the individual's housing, benefits, education, and employment. These risks should be carefully weighed by the municipality as policymakers consider whether to include criminal and monetary penalties and how to structure those penalties.

For these reasons, the enforcement provisions in this model policy do not include criminal sanctions and focus primary accountability on landlords and managing bodies as the managers of such properties with appropriate civil penalties for any failure to meet the obligations required under this law.

The following provisions are designed to offer several enforcement options to the jurisdiction and residents. While not all enforcement mechanisms may be pursued, allowing multiple enforcement mechanisms in the ordinance may increase the likelihood of compliance, enforcement, and, in turn, protections from secondhand and thirdhand smoke.

- (A) Any person exposed to secondhand or thirdhand smoke as a result of a violation of this [ chapter/article ] or any person who becomes aware that a landlord or managing body is in violation of this [ chapter/article ] may initiate enforcement of this [ chapter/article ] by registering a complaint with the [ city manager/county administrator ], or their designee.

**Comment**

Evidence of smoking, in violation of this ordinance, may include eyewitness accounts, pattern of smell of smoke incursions from combustible products or aerosol from vaping, litter or ash left from smoking, burn marks, visible drifting smoke or aerosol, or residue on surfaces. It can be difficult to prove secondhand and thirdhand smoke exposure, so careful documentation of suspected violations is important.

- (B) Enforcement of this chapter shall be the responsibility of the [ department of public health and its designees ]. In addition, any code enforcement official may report suspected violations of this [ chapter/article ] to the [ department of public health or its designees ].

**Comment**

Local public health departments are identified in this model ordinance as the enforcement agency due to their expertise with implementation of clean air laws, secondhand and thirdhand smoke exposure, commercial tobacco use and addiction, and knowledge of cessation resources. The enforcement approach adopted throughout this model ordinance carefully balances the public health and health equity goals of ensuring housing stability for all multiunit housing residents and avoiding the over-policing of historically marginalized communities.

- (C) The [ department of public health ], in collaboration with the [ city/county ] attorney's office will:
- (1) Establish a process to receive and respond to complaints.
  - (2) Establish a digest of cessation resources for residents and to provide as a resource to landlords and managing bodies;
  - (3) Establish a community-led response team comprised of [ tobacco cessation provider, social worker, public health nurse, community health worker, and/or community mediation provider. ]
  - (4) Create a fine schedule based on ability to pay using a “day fine system” with the following criteria:
    - (a) The resident’s base income from all sources of income including pensions, dividends, wages, salary, and public benefits;
    - (b) Adjusted daily income of the resident based on deductions for self-support and support of dependents;
    - (c) Resident’s assets; and,
    - (d) Multiple or repeat violations of this [ chapter/article ].

### Comment

The Day Fine system is a process of identifying appropriate fines or penalties for individuals based on their ability to pay and the severity of the violation. In the context of smoke-free multiunit housing, using the Day Fine system to determine appropriate financial penalties would reduce the risk of housing instability of low-income residents and reduce the risk of civil penalties being escalated to more severe or criminal sanctions for failure to pay. (For more information on reforming fines and fees, see the [Fines and Fees Justice Center](#) and its resource, [First Steps Toward More Equitable Fines and Fees Practices](#) (2020).)

- (5) Develop or identify a community service program approved by the [ public health department ] as a diversion option for resident violations;
- (6) Use a community restorative justice program to implement restorative justice as an option for resident violations.

## Section 8. Penalties, Violations, and Restoration.

- (A) **Residents and their Guests.** Upon receipt of complaints of alleged violations of Section 3(A) of this [ chapter/article ], the [ city/county ] will initiate the following process:
- (1) Upon a first complaint, the public health department or designee will investigate and, if the complaint is substantiated, the department will provide the resident with notice of the complaint and the enforcement process for future complaints, information on cessation, information on harms of secondhand and thirdhand smoke exposure, [ free ] cessation resources available in the community, and process for refuting the complaint.
  - (2) Upon a second substantiated complaint within one year of the first complaint, the department or designee will activate the community-led response team to engage the resident in dialogue about the alleged violation, the enforcement process for future violations, information on harms of secondhand and thirdhand smoke exposure, [ free ] cessation resources available in the community, and process for refuting the alleged violation. The community-led response team will provide and offer additional assistance upon request by the resident or if additional barriers to compliance are identified.
  - (3) Upon a third substantiated complaint and subsequent substantiated complaints within one year of the first complaint, or if the resident will not engage with the community-led response team, the resident will be issued a civil citation and [ city/county ] may provide the managing body or landlord a letter with notice of the complaint. The resident must:
    - (a) pay a civil fine pursuant to the fine schedule established under Sec. 7 of this [ chapter/article ]; or
    - (b) participate in a community service program established by the public health department or complete an approved, evidence-based tobacco cessation program, including but not limited to, telephone counseling, group counseling, or individual counseling; or
    - (c) participate in a restorative justice process established by the public health department. The restorative justice program is only available if all interested parties are willing to fully participate in good faith.
  - (4) Subsequent substantiated complaints within one year of the first complaint, or failure of the resident to complete the community service program or restorative justice program, will result in a civil citation and may require repeat community service and/or payment of a civil fine pursuant to the fine schedule established under Sec. 7 (C)(4) of this [ chapter/article ].



- (5) If no substantiated complaints occur for a one-year period, a subsequent complaint would be considered a first complaint.

The [ city/county ] shall adopt a fine system based on the criteria developed under Sec. 7 (C)(4) of this [ chapter/article ] for any fines levied under this paragraph. The fine system may be updated from time to time.

### Comment

This provision provides a compliance-focused enforcement process for residents in violation of the ordinance. A first violation is addressed with a warning, a second violation would trigger engagement of the community response team to work with the resident to gain compliance, a third violation results in escalation to give the resident the choice of paying a fine that is based on ability to pay, community service or diversion program participation, or participation in a restorative justice process. It provides for a focus on compliance with provision of cessation resources and allows for a “reset” if the resident has no violations for a one-year period after the first complaint.

- (B) **Landlords or Managing Bodies.** Landlords or managing bodies found to have violated this [ chapter/article ], or whose agents, employees, or contractors have violated Section 3 of this [ chapter/article ], will be issued a civil citation and are subject to the following civil penalties:
  - (1) A civil fine of [ two hundred fifty dollars (\$250) ] for the first violation;
  - (2) A civil fine of [ \$500 ] for the second violation;
  - (3) A civil fine of [ \$750 ] for the third violation;
  - (4) A civil fine of [ \$1,000 ] for the fourth violation or any subsequent violations;
  - (5) If no violations occur for a one-year period, a subsequent violation would be considered a first violation.

The department may initiate a restorative justice process as an alternative to, or in addition to, the civil fine.

### Comment

This provision provides civil fines for landlords and managing bodies who are in violation of the ordinance. It provides escalating civil monetary fines and allows for a “reset” if the landlord or managing body has no violations for a one-year period. At the time of investigating each alleged violation, the public health department would provide assistance and resources to the landlord or managing body to support them in compliance with and implementation of the law. This support would occur in advance of the law’s implementation but should be ongoing to ensure the law is followed.

The jurisdiction may also provide the opportunity for a restorative justice process as an alternative to, or in addition to, the civil citation.

### (C) Violations.

- (1) Notice. A person violating this ordinance may be issued, either personally or by mail, a civil citation or letter of notice of an alleged violation from the [ city/county ] that sets forth the alleged violation and that informs the alleged violator of their right to a hearing on the matter and how and where a hearing may be requested, including a contact address and phone number.
- (2) Hearings.
  - (a) Upon issuance of a civil citation or letter of notice of an alleged violation, a person accused of violating this ordinance may request in writing a hearing on the matter. Hearing requests must be made within 30 business days of the issuance of the civil citation or letter of notice of an alleged violation and delivered to the [ city manager/county administrator ] or other designated officer. Failure to properly request a hearing within 30 business days of the issuance of the civil citation or letter of notice of an alleged violation will terminate the person’s right to a hearing unless the resident can demonstrate extenuating circumstances requiring additional time to respond.
  - (b) The [ city manager/county administrator ] or other designated officer will set the time and place for the hearing. Written notice of the hearing time and place will be mailed or delivered to the alleged violator at least 10 business days prior to the hearing.

- (3) Hearing Officer. The [ Common Council/County Board of Supervisors ] will designate a hearing officer. The hearing officer will be an impartial employee of the [ city/county ] or an impartial person retained by the [ city/county ] to conduct the hearing.
- (4) Decision. A decision will be issued by the hearing officer within 10 business days of the hearing. If the hearing officer determines that a violation of this ordinance did occur, that decision, along with the hearing officer's reasons for finding a violation and the penalty to be imposed, will be recorded in writing, a copy of which will be provided to the [ city/county ] and the alleged violator by in-person delivery or mail as soon as practicable. If the hearing officer finds that no violation occurred, or finds grounds for not imposing any penalty, those findings will be recorded, and a copy will be provided to the [ city/county ] and the acquitted alleged violator by in-person delivery or mail as soon as practicable. The decision of the hearing officer is final, subject to an appeal as described in Section 8, paragraph (C)(5) of this section.
- (5) Appeals. Appeals of any decision made by the hearing officer must be filed in [ \_\_\_\_\_ County ] conciliation court within 10 business days of the date of the decision.
- (6) Continued violation. Each violation, and every day in which a violation occurs or continues, shall constitute a separate offense.
- (7) Violations of Section 3(A) of this [ chapter/article ] by multiunit housing residents shall not be used as a basis to support evictions or any criminal penalties.

#### **Comment**

This provision specifies that resident violations of Section 3(A) (the no-smoking provision) of this ordinance cannot be used as a basis for an eviction or for any criminal penalties. This provision would require that a landlord independently investigate and substantiate any alleged violations of the lease that could lead to lease termination.

### **Section 9. Construction, Severability.**

If any section or provision of this ordinance is held invalid, such invalidity will not affect other sections or provisions that can be given force and effect without the invalidated section or provision.

## Section 10. Effective Date.

This ordinance becomes effective on [ \_\_\_\_\_ ].

### Comment

An ordinance is a local law that is passed by municipal governing authorities, such as a Common Council or County Board of Supervisors, and that applies only within the local jurisdiction. The process by which an ordinance gets passed, its effective date, and any subsequent amendments are controlled by state law. The city or county attorney in your community should review any proposed effective date to ensure it conforms with state law.

## Appendix: Sample Findings of Fact and Purpose.

WHEREAS tobacco use causes death and disease and continues to be an urgent public health threat, as evidenced by the following:

- The World Health Organization (WHO) estimates that tobacco kills up to half of its users, amounting to more than 8 million deaths each year worldwide,<sup>4</sup> including nearly half a million people who die prematurely from smoking in the United States alone;<sup>5</sup>
- Tobacco use can cause disease in nearly all organs of the body and is responsible for an estimated 87 percent of lung cancer deaths, 32 percent of coronary heart disease deaths, and 79 percent of all chronic obstructive pulmonary disease deaths, in the United States;<sup>5</sup>
- 5.6 million of today's Americans who are younger than 18 are projected to die prematurely from a smoking-related illness; and<sup>5</sup>
- The estimated economic damage attributable to smoking and exposure to secondhand smoke in the United States is nearly \$300 billion annually;<sup>5</sup> and

WHEREAS smoking is the number one cause of preventable death and disease in New York State and continues to be an urgent public health issue, as evidenced by the following:

- An estimated 28,200 adults in New York State die from smoking annually;<sup>6</sup>
- Each year, smoking costs New York State an estimated \$12.07 billion in direct health care expenses, \$7.12 billion in Medicaid costs, and \$18.2 billion in productivity losses;<sup>7</sup>

- Research indicates that more than 26.5% of all adult cancer deaths in New York State are attributable to smoking;<sup>8</sup> and
- [ Insert local data if available ]

WHEREAS significant disparities in tobacco use exist in New York State that create barriers to health equity;

- The following groups of people smoke at higher rates than the statewide average for adults (12.0%), reflecting health disparities: adults with less than a high school education (19.2%); adults enrolled in Medicaid (19.1%); adults who are unemployed (20.2%); and adults living with disability (17.4%);<sup>9</sup>
- In 2016 in New York City, Latino adults (56%) were more likely to smell secondhand smoke at home from outside than all other non-Latino racial/ethnic groups, and Black adults (44%) were more likely to smell cigarette smoke than White and Asian/Pacific Islander adults (38% and 35%);<sup>10</sup>
- Compared with residents of New York City living in the wealthiest neighborhoods, those living in neighborhoods with higher poverty were more likely to smell secondhand smoke coming from outside;<sup>10</sup> and
- [ Insert local tobacco toll data if available ]

WHEREAS secondhand smoke has repeatedly been identified as a health hazard, as evidenced by the following:

- In 2006, the U.S. Surgeon General concluded that there is no risk-free level of exposure to secondhand smoke;<sup>11</sup>
- The American Society of Heating, Refrigerating, and Air Conditioning Engineers (ASHRAE) finds that acceptable indoor air quality in multiunit housing requires the absence of secondhand smoke, cannabis smoke, and aerosol from electronic smoking devices;<sup>12</sup>
- The American Heart Association and the American Lung Association recommend all adults and children be protected from secondhand smoke in multiunit housing;<sup>13</sup>
- The New York State Department of Health recognizes the toxicity of secondhand smoke;<sup>14</sup>

WHEREAS exposure to secondhand smoke causes death and disease, as evidenced by the following:

- Since 1964, approximately 2.5 million nonsmokers have died from health problems caused by exposure to secondhand smoke;<sup>5</sup>
- In 2017, 1,384 deaths in New York State among all ages were attributable to secondhand smoke exposure, and 22,290 attributed to smoking and secondhand smoke exposure.<sup>11</sup>
- Secondhand smoke was responsible for an estimated 34,000 heart disease-related and 7,300 lung cancer-related deaths among adult nonsmokers each year during 2005–2009 in the United States.<sup>5</sup>
- Research indicates that exposure to secondhand smoke increases the risk of coronary heart disease by 25 percent to 30 percent and increases the risk of stroke by 20 percent to 30 percent;<sup>5, 15</sup>
- Secondhand smoke kills more than 400 infants every year;<sup>16</sup>

WHEREAS electronic smoking device aerosol may be considered a health hazard, as evidenced by the following:

- Research has found at least twelve chemicals in electronic smoking device aerosol known to cause cancer, birth defects, or other reproductive harm, such as formaldehyde, acetaldehyde, lead, nickel, chromium, arsenic, and toluene;<sup>17, 18, 19, 20</sup>
- Electronic smoking device aerosol is not harmless water vapor as it contains varying concentrations of particles and chemicals, with some studies finding particle sizes and nicotine concentrations similar to, or even exceeding, conventional cigarette smoke;<sup>21, 22, 23, 24</sup>
- Evidence continues to build that exposure to electronic smoking device aerosol, including secondhand exposure, has immediate impacts on the human respiratory and cardiovascular systems, and poses a risk to human health;<sup>24, 25, 26, 27, 28, 29, 30, 31, 32</sup>
- Given the increasing prevalence of electronic smoking device use, especially among youth and young adults, widespread nicotine exposure resulting in addiction and other harmful consequences is a serious concern;<sup>31, 33</sup>
- Indoor air experts and health authorities, including the U.S. Surgeon General and the American Society of Heating Refrigerating and Air Conditioning Engineers, support inclusion of electronic smoking devices in regulations of smoking and other tobacco product use;<sup>18, 22, 25</sup>

WHEREAS secondhand smoke or aerosol from cannabis may be considered a health hazard, as evidenced by the following:

- Cannabis smoke contains many toxic chemicals and high levels of fine particulate matter.<sup>34, 33</sup>
- Compared to breathing clean air, cannabis smoke and the combustion of hard physical matter, whether organic or synthetic, is a health hazard, particularly for those with serious lung conditions, infants, and children.<sup>35</sup>

WHEREAS nonsmokers who live in multiunit dwellings can be exposed to neighbors' secondhand smoke, as evidenced by the following:

- Research demonstrates that secondhand smoke in multiunit housing can and does transfer between units, seeping into smoke-free areas from areas where smoking occurs;<sup>36</sup>
- Residents of multiunit housing have higher levels of cotinine (a biomarker for nicotine) in their blood and saliva than those living in detached houses;<sup>37</sup>
- Among children who live in homes in which no one smokes indoors, those who live in multiunit housing have 45 percent higher cotinine levels than children who live in detached houses;<sup>23, 34</sup>
- Twelve studies have found between 26 percent and 64 percent of residents of multiunit housing report secondhand smoke drifting into their home;<sup>16</sup>
- Surveys have found that 65 percent to 90 percent of multiunit housing residents who experience secondhand smoke in their home are bothered by it;<sup>16</sup>
- In New York State, 47 percent of nonsmokers and 40 percent of smokers who prohibit smoking in their own multiunit dwelling reported being exposed to secondhand smoke in their unit in the past 12 months;<sup>38</sup>
- In 2016, 44 percent of New York City residents reported smelling cigarette smoke in their home coming from another home or apartment or from the outside; and<sup>39</sup>
- [ Insert local data if available ]

WHEREAS harmful residues from tobacco smoke can be absorbed by and cling to virtually all indoor surfaces long after smoking has stopped and then be emitted back into the air, making this thirdhand smoke a potential health hazard, as evidenced by the following:

- Thirdhand smoke contains carcinogenic materials that accumulate over time, presenting a health hazard long after the initial smoke is gone;<sup>40, 41</sup>

- Studies consistently find that thirdhand smoke remains months after nonsmokers have moved into units where smokers previously lived,<sup>42</sup> and a recent study documents that it can remain in units for years;<sup>43</sup>
- Human exposure to these thirdhand smoke carcinogens can occur through inhalation, ingestion, or skin absorption through contact with carpeting, furnishings, or clothing;<sup>44</sup>
- Thirdhand smoke potentially poses the greatest danger to infants and toddlers, who crawl on rugs and furnishings and place household items in their mouths;<sup>13</sup>
- Nonsmoking people who are exposed to thirdhand smoke have significantly higher nicotine and cotinine levels than those who have not been exposed to thirdhand smoke;<sup>45, 46, 47</sup>
- Research has shown that thirdhand smoke damages human cellular DNA<sup>40, 41</sup> and is carcinogenic at exposure levels relevant to residents of multiunit housing;<sup>16</sup>

WHEREAS smoking is a leading cause of fire-related injury and death,<sup>48</sup> and contributes to health inequities, as evidenced by the following:

- In 2021, U.S. fire departments responded to an estimated 7,800 smoking-related structure fires, resulting in 275 deaths, an estimated 750 injuries, and \$361,500,000 in dollar loss due to direct property damage;<sup>48</sup>
- During 2012–2016, smoking materials caused 5 percent of reported home fires, 37 percent of home fire deaths, 10 percent of home fire injuries, and 7 percent of the direct property damage from home fires;<sup>49</sup>
- African American males and American Indian males have the highest mortality rates for fire-related deaths; altogether, African Americans accounted for 19 percent of all fire-related deaths in 2017, but made up only 13 percent of the U.S. population;<sup>17</sup>
- Elderly people 85 or older have the highest fire death rate, and the risk of dying from smoking-related fires increases with age;<sup>17</sup> and
- [ Insert local data if available ]

WHEREAS an estimated [ insert percentage of [ state ] population ] live in multiunit housing;

WHEREAS the U.S. Surgeon General has concluded that eliminating smoking in indoor spaces is the only way to fully protect nonsmokers from secondhand smoke exposure; and that separating smokers from nonsmokers, cleaning the air, and ventilating buildings cannot completely prevent secondhand smoke exposure;<sup>11</sup>



WHEREAS, where smoke-free housing policies were implemented, there was a 24 percent reduction in self-reported exposure to secondhand smoke exposure among racially and ethnically diverse seniors living in low-income multiunit housing properties;<sup>50</sup>

WHEREAS several studies have confirmed that smoke-free multiunit housing policies are an effective method to reduce secondhand smoke exposure in multiunit housing;<sup>51, 52, 53</sup>

WHEREAS secondhand smoke exposure occurs more often in multiunit housing compared to separate, single-unit housing;<sup>47, 54, 55</sup> and therefore contributes to tobacco-related health inequities.

- [ Insert local data if available ]

WHEREAS secondhand smoke in multiunit housing is a significant threat to the health and safety of [ state ] children, as evidenced by the following:

- The home is the primary source of secondhand smoke exposure for children;<sup>27, 56</sup>
- A national survey found that 56.4 percent of U.S. youth living in apartment units in which no one smokes have elevated blood cotinine levels above 0.05 ng/mL, indicating they have been exposed to potentially dangerous levels of secondhand smoke;<sup>17</sup>
- The same survey also found that children who live in homes in which no one smokes indoors have 45 percent higher cotinine levels if they live in apartments compared with detached homes;<sup>50</sup>
- [ Insert state/local data if available ]

WHEREAS research consistently demonstrates that a majority of multiunit housing residents, including a large portion of smokers, supports smoke-free policies in multiunit residences, and that support is even greater among residents with children;<sup>57, 58, 59</sup>

WHEREAS research demonstrates that a majority of adults supports smoke-free policies in multiunit residences, as evidenced by the following:

- 73.7 percent of U.S. adults surveyed favor smoke-free public housing;<sup>59</sup>
- In New York State, 80 percent of nonsmokers and 34 percent of smokers living in multiunit dwellings do not allow smoking inside their own unit;<sup>60</sup>
- In 2016 in New York City, among adults who knew their building policy, 40 percent living in multiunit buildings reported they lived in a building that prohibited smoking in all areas, including apartments;<sup>61</sup> and
- [ Insert local data if available ]

WHEREAS there are significant savings from adopting a smoke-free multiunit housing policy, as evidenced by the following:

- Prior to implementation, the U.S. Department of Housing and Urban Development’s smoke-free public housing policy was conservatively estimated to produce an annual savings of 1.26 to 3.50 million dollars per year for U.S. public housing authorities in renovation-related costs;<sup>62</sup>

WHEREAS in 2016, the United States Department of Housing and Urban Development issued a final rule requiring all public housing agencies to adopt smoke-free policies to protect residents from secondhand smoke exposure effective February 2017;<sup>63</sup>

WHEREAS children, low-income tenants of public housing, and members of racial and ethnic minority groups are disproportionately exposed to secondhand smoke; and smoke-free housing policies have shown potential to reduce exposure in these populations;<sup>5, 53</sup>

WHEREAS the repercussions of eviction disproportionately impact low-income, Black, Indigenous, and people of color leading to greater displacement from neighborhoods, job loss, depression and mental health hardships, and homelessness;<sup>64, 65</sup>

WHEREAS there is no Constitutional right to smoke;<sup>65</sup>

NOW THEREFORE, it is the intent of the [ city council/county board of supervisors ] in enacting this ordinance, to provide for the public health, safety, and welfare by discouraging the inherently dangerous behavior of smoking around nontobacco users; by protecting children from exposure to smoking where they live and play; and by protecting the public from nonconsensual exposure to secondhand smoke in and around their homes.

## Endnotes

- 1 U.S. Dept. of Housing and Urban Development, Housing Discrimination Under the Fair Housing Act, [https://www.hud.gov/program\\_offices/fair\\_housing\\_equal\\_opp/fair\\_housing\\_act\\_overview](https://www.hud.gov/program_offices/fair_housing_equal_opp/fair_housing_act_overview), see also N.Y. Exec. Law, Art. 15, Sec. 296, <https://www.nysenate.gov/legislation/laws/EXC/296>.
- 2 N.Y. State Office of Cannabis Management, Adult Use Information, <https://cannabis.ny.gov/adult-use-information>.
- 3 New York Cannabis Law, Sec. 127(2)(b), <https://www.nysenate.gov/legislation/laws/CAN/127>.
- 4 World Health Org., WHO Report on the Global Tobacco Epidemic, 2019: Offer Help to Quit Tobacco Use (2019), <https://apps.who.int/iris/handle/10665/326043>.
- 5 U.S. DEP’T HEALTH & HUM. SERVS., THE HEALTH CONSEQUENCES OF SMOKING — 50 YEARS OF PROGRESS: A REPORT OF THE SURGEON GENERAL (2014), [https://www.ncbi.nlm.nih.gov/books/NBK179276/pdf/Bookshelf\\_NBK179276.pdf](https://www.ncbi.nlm.nih.gov/books/NBK179276/pdf/Bookshelf_NBK179276.pdf).
- 6 Extinguishing the Tobacco Epidemic in New York, Ctrs. for Disease Control & Prevention (Oct. 13, 2022), <https://www.cdc.gov/tobacco/stateandcommunity/state-fact-sheets/new-york>.

- 7 *Toll of Tobacco in New York*, Campaign for Tobacco-Free Kids (Oct. 19, 2022), [https://www.tobaccofreekids.org/problem/toll-us/new\\_york](https://www.tobaccofreekids.org/problem/toll-us/new_york).
- 8 Joannie Lortet-Tieulent et al., *State-Level Cancer Mortality Attributable to Cigarette Smoking in the United States*, 176 JAMA INTERNAL MED. 1792 (2016), <https://jamanetwork.com/journals/jamainternalmedicine/fullarticle/2571615>.
- 9 N.Y. State Dep't Health, Rep. No. 2023-05, *NYS BRFSS Brief: Cigarette Smoking, New York State Adults, 2021* (2022), [https://www.health.ny.gov/statistics/brfss/reports/docs/2023-05\\_brfss\\_cigarette\\_smoking.pdf](https://www.health.ny.gov/statistics/brfss/reports/docs/2023-05_brfss_cigarette_smoking.pdf).
- 10 N.Y. State Dep't Health, NYC Vital Signs, *Secondhand Smoke and Smoke-Free Housing in New York City* (2018), <https://www.nyc.gov/assets/doh/downloads/pdf/survey/smoke-free-housing.pdf>.
- 11 U.S. DEP'T HEALTH & HUM. SERVS., THE HEALTH CONSEQUENCES OF INVOLUNTARY EXPOSURE TO TOBACCO SMOKE: A REPORT OF THE SURGEON GENERAL (2006), <https://pubmed.ncbi.nlm.nih.gov/20669524>.
- 12 Am. Soc'y Heating Refrigerating & Air Conditioning Eng'rs, *Ventilation for Acceptable Indoor Air Quality* (2015), [https://www.ashrae.org/file%20library/technical%20resources/standards%20and%20guidelines/standards%20addenda/62\\_1\\_2013\\_2015supplement\\_20150203.pdf](https://www.ashrae.org/file%20library/technical%20resources/standards%20and%20guidelines/standards%20addenda/62_1_2013_2015supplement_20150203.pdf).
- 13 Am. Lung Ass'n, *Public Policy Position — Healthy Air* (2022), <https://www.lung.org/policy-advocacy/public-policy-positions/public-policy-position-healthy-air>.
- 14 N.Y. State Dep't Health, *Cigarette Smoking and Secondhand Smoke*, [https://www.health.ny.gov/prevention/tobacco\\_control](https://www.health.ny.gov/prevention/tobacco_control).
- 15 Synde I. DiGiacomo et al., *Environmental Tobacco Smoke and Cardiovascular Disease*, 16 INT'L J. ENV'T RSCH. & PUB. HEALTH 96 (2018), <https://pubmed.ncbi.nlm.nih.gov/30602668>.
- 16 CTRS. FOR DISEASE CONTROL & PREVENTION, *Secondhand Smoke: An Unequal Danger*, (2015), <https://www.cdc.gov/vitalsigns/pdf/2015-02-vitalsigns.pdf>.
- 17 ENV'T PROTECTION AGENCY, *Initial List of Hazardous Air Pollutants with Modifications*, <https://www.epa.gov/haps/initial-list-hazardous-air-pollutants-modifications>.
- 18 Jefferson Fowles et al., *Cancer and Non-Cancer Risk Concerns from Metals in Electronic Cigarette Liquids and Aerosols*, 17 INT'L J. ENV'T RSCH. & PUB. HEALTH 2146 (2020), <https://www.ncbi.nlm.nih.gov/pmc/articles/PMC7142621>.
- 19 Env't Protection Agency, *What Are Hazardous Air Pollutants?*, <https://www.epa.gov/haps/what-are-hazardous-air-pollutants>.
- 20 Minn. Dep't Health, *E-Cigarettes and Vaping*, <https://www.health.state.mn.us/communities/tobacco/ecigarettes/index.html>.
- 21 NAT'L ACADS. SCIS., ENG'G, & MED., PUBLIC HEALTH CONSEQUENCES OF E-CIGARETTES (The National Academies Press 2018), <https://www.nap.edu/catalog/24952/public-health-consequences-of-e-cigarettes>.
- 22 Alexa R. Romberg et al., *Patterns of Nicotine Concentrations in Electronic Cigarettes Sold in the United States, 2013–2018*, 203 DRUG & ALCOHOL DEPENDENCE 1 (2019), <https://pubmed.ncbi.nlm.nih.gov/31386973>.
- 23 U.S. DEP'T HEALTH & HUM. SERVS., E-CIGARETTE USE AMONG YOUTH AND YOUNG ADULTS: A REPORT OF THE SURGEON GENERAL (2016), [https://www.ncbi.nlm.nih.gov/ebooks/NBK538680/pdf/Bookshelf\\_NBK538680.pdf](https://www.ncbi.nlm.nih.gov/ebooks/NBK538680/pdf/Bookshelf_NBK538680.pdf).
- 24 Wouter F. Visser et al., *The Health Risks of Electronic Cigarette Use to Bystanders*, 16 Int'l J. Env't Rsch. & Pub. Health 1525 (2019), <https://pubmed.ncbi.nlm.nih.gov/31052162>.
- 25 Dazhe James Cao et al., *Review of Health Consequences of Electronic Cigarettes and the Outbreak of Electronic Cigarette, or Vaping, Product Use-Associated Lung Injury*, 16 J. MED. TOXICOLOGY 295 (2020), <https://pubmed.ncbi.nlm.nih.gov/32301069>.

- 26 Michelle R. Staudt et al., *Altered Lung Biology of Healthy Never Smokers Following Acute Inhalation of E-Cigarettes*, 19 RESPIRATORY RSCH. 78 (2018), <https://pubmed.ncbi.nlm.nih.gov/29754582>.
- 27 Anna Tzortzi et al., *Passive Exposure to E-Cigarette Emissions: Immediate Respiratory Effects*, 4 TOBACCO PREVENTION & CESSATION 18 (2018), <https://www.ncbi.nlm.nih.gov/pmc/articles/PMC7205134>.
- 28 Peter G. Shield et al., *A Review of Pulmonary Toxicity of Electronic Cigarettes in the Context of Smoking: A Focus on Inflammation*, 26 CANCER EPIDEMIOLOGY, BIOMARKERS PREVENTION 1175 (2017), <https://pubmed.ncbi.nlm.nih.gov/28642230>.
- 29 Jennifer E. Bayly et al., *Secondhand Exposure to Aerosols From Electronic Nicotine Delivery Systems and Asthma Exacerbations Among Youth With Asthma*, 155 CHEST 88 (2019), <https://pubmed.ncbi.nlm.nih.gov/30359612>.
- 30 Anna Tzortzi et al., *Passive Exposure of Non-Smoker to E-Cigarette Aerosols: Sensory Irritation, Timing and Association with Volatile Organic Compounds*, 182 ENV'T RSCH. 108963 (2020), <https://pubmed.ncbi.nlm.nih.gov/31837549>.
- 31 Karen A. Cullen et al., *Notes from the Field: Use of Electronic Cigarettes and Any Tobacco Product Among Middle and High School Students — United States, 2011–2018*, 67 MORBIDITY & MORTALITY WKLY. REP. 1276 (2018), <https://www.cdc.gov/mmwr/volumes/67/wr/mm6745a5.htm>.
- 32 Xiaoyin Wang et al., *One Minute of Marijuana Secondhand Smoke Exposure Substantially Impairs Vascular Endothelial Function*, 5 J. Am. Heart Assoc. e03858 (2016), <https://www.ncbi.nlm.nih.gov/pmc/articles/PMC5015303>.
- 33 Wayne R. Ott et al., *Measuring Indoor Fine Particle Concentrations, Emission Rates, and Decay Rates from Cannabis Use in a Residence*, 10 Atmospheric Environment: X, 100106, ISSN 2590-1621 (2021), <https://doi.org/10.1016/j.aeaoa.2021.100106>.
- 34 David Moir et al., *A Comparison of Mainstream and Sidestream Marijuana and Tobacco Cigarette Smoke Produced Under Two Machine Smoking Conditions*, 21 CHEMICAL RESEARCH IN TOXICOLOGY 494-02 (2008), <http://www.ncbi.nlm.nih.gov/pubmed/18062674>.
- 35 Xiaoyin Wang et al., *One Minute of Marijuana Secondhand Smoke Exposure Substantially Impairs Vascular Endothelial Function*, 5 J. AM. HEART ASSOC. e03858 (2016), <https://www.ncbi.nlm.nih.gov/pmc/articles/PMC5015303>.
- 36 Brian A. King et al., *Secondhand Smoke Transfer in Multiunit Housing*, 12 NICOTINE & TOBACCO RSCH. 1133 (2010), <https://pubmed.ncbi.nlm.nih.gov/20889473>.
- 37 Kimberly Snyder et al., *Smoke-Free Multiunit Housing: A Review of the Scientific Literature*, 25 TOBACCO CONTROL 9 (2016), <https://pubmed.ncbi.nlm.nih.gov/25566811>.
- 38 N.Y. State Dep't Health, Bureau of Tobacco Use Prevention and Control, *Tobacco Control Program StatShot Vol. 2, No. 5* (May 2009), [https://www.health.ny.gov/prevention/tobacco\\_control/reports/statshots/volume2/n5\\_secondhand\\_smoke\\_in\\_multiunit\\_dwelling.pdf](https://www.health.ny.gov/prevention/tobacco_control/reports/statshots/volume2/n5_secondhand_smoke_in_multiunit_dwelling.pdf).
- 39 N.Y. City Health, NYC Vital Signs, *Secondhand Smoke and Smoke-Free Housing in New York City* (2018), <https://www.nyc.gov/assets/doh/downloads/pdf/survey/smoke-free-housing.pdf>.
- 40 Ware G. Kuschner et al., *Electronic Cigarettes and Thirdhand Tobacco Smoke: Two Emerging Health Care Challenges for the Primary Care Provider*, 4 INT'L J. GEN. MED. 115 (2011), <https://pubmed.ncbi.nlm.nih.gov/21475626>.
- 41 Adam Whitlatch & Suzaynn Schick, *Thirdhand Smoke at Phillip Morris*, 21 NICOTINE & TOBACCO RSCH. 1680 (2019), <https://pubmed.ncbi.nlm.nih.gov/30053240>.
- 42 Georg E. Matt et al., *When Smokers Move Out and Non-Smokers Move In: Residential Thirdhand Smoke Pollution and Exposure*, 20 TOBACCO CONTROL e1 (2011), <https://pubmed.ncbi.nlm.nih.gov/21037269>.

- 43 Georg E. Matt et al., *Persistent Tobacco Smoke Residue in Multiunit Housing: Legacy of Permissive Indoor Smoking Policies and Challenges in the Implementation of Smoking Bans*, 18 PREVENTIVE MED. REPS. 101088 (2020), <https://www.ncbi.nlm.nih.gov/pmc/articles/PMC7186560>.
- 44 Mohamad Sleiman et al., *Formation of Carcinogens Indoors by Surface-Mediated Reactions of Nicotine with Nitrous Acid, Leading to Potential Thirdhand Smoke Hazards*, 107 PROC. NAT'L ACAD. SCIS. U.S. 6576 (2010), <https://www.ncbi.nlm.nih.gov/pmc/articles/PMC2872399>.
- 45 Bo Hang et al., *Thirdhand Smoke Causes DNA Damage in Human Cells*, 28 MUTAGENESIS 381 (2013), <https://pubmed.ncbi.nlm.nih.gov/23462851>.
- 46 Bo Hang et al., *Thirdhand Smoke: Genotoxicity and Carcinogenic Potential*, 6 CHRONIC DISEASES & TRANSLATIONAL MED. 27 (2019), <https://pubmed.ncbi.nlm.nih.gov/32226932>.
- 47 Louisa M. Holmes et al., *Drifting Tobacco Smoke Exposure Among Young Adults in Multiunit Housing*, 45 J. CMTY. HEALTH 319 (2020), <https://www.ncbi.nlm.nih.gov/pmc/articles/PMC7073272>.
- 48 U.S. Fire Admin., *Residential Building Smoking Fire Trends (2012–2021)* (2023), <https://www.usfa.fema.gov/statistics/residential-fires/smoking.html>.
- 49 Maya Vijayaraghavan et al., *The Effectiveness of Tobacco Control Policies on Vulnerable Populations in the USA: A Review*, 92 POSTGRADUATE MED. J. 670 (2016), [https://escholarship.org/content/qt00d3m9mk/qt00d3m9mk\\_noSplash\\_c89099398a125f7dd4b798fe6b546b77.pdf](https://escholarship.org/content/qt00d3m9mk/qt00d3m9mk_noSplash_c89099398a125f7dd4b798fe6b546b77.pdf).
- 50 T. Lucas Hollar et al., *Smoke-Free Multi-Unit Housing Policies Show Promise in Reducing Secondhand Smoke Exposure Among Racially and Ethnically Diverse, Low-Income Seniors*, 19 J. IMMIGRANT & MINORITY HEALTH 1281 (2017), <https://pubmed.ncbi.nlm.nih.gov/27189486>.
- 51 Andrea S. Gentzke et al., *Attitudes and Experiences with Secondhand Smoke and Smoke-Free Policies Among Subsidized and Market-Rate Multiunit Housing Residents Living in Six Diverse Communities in the USA*, 27 TOBACCO CONTROL 194 (2018), <https://pubmed.ncbi.nlm.nih.gov/28302920>.
- 52 Walter Young et al., *Health, Secondhand Smoke Exposure, and Smoking Behavior Impacts of No-Smoking Policies in Public Housing, Colorado, 2014–2015*, 13 PREVENTING CHRONIC DISEASE 160008 (2016), [https://www.cdc.gov/pcd/issues/2016/16\\_0008.htm](https://www.cdc.gov/pcd/issues/2016/16_0008.htm).
- 53 Amy Y. Hafez et al., *Uneven Access to Smoke-Free Laws and Policies and Its Effect on Health Equity in the United States: 2000–2019*, 109 AM. J. PUB. HEALTH 1568 (2019), <https://pubmed.ncbi.nlm.nih.gov/31536405>.
- 54 Martha J. Hewett et al., *Secondhand Smoke and Smokefree Policies in Owner-Occupied Multi-Unit Housing*, 43 AM. J. PREVENTIVE MED. S187 (2012), <https://www.sciencedirect.com/science/article/abs/pii/S074937971200548X>
- 55 Kimberly H. Nguyen et al., *Tobacco Use, Secondhand Smoke, and Smoke-Free Home Rules in Multiunit Housing*, 51 AM. J. PREVENTIVE MED. 682 (2016), <https://pubmed.ncbi.nlm.nih.gov/27423656>.
- 56 Karen M. Wilson et al., *Tobacco-Smoke Exposure in Children Who Live in Multiunit Housing*, 127 Pediatrics 85 (2011), <https://pubmed.ncbi.nlm.nih.gov/21149434>.
- 57 Angelica Delgado-Rendon et al., *Second and Thirdhand Smoke Exposure, Attitudes and Protective Practices: Results from a Survey of Hispanic Residents in Multi-unit Housing*, 19 J. IMMIGRANT & MINORITY HEALTH 1148 (2017), <https://pubmed.ncbi.nlm.nih.gov/28074306>.
- 58 Karen M. Wilson et al., *Tobacco-Smoke Incursions and Satisfaction Among Residents With Children in Multiunit Housing, United States*, 2013, 132 PUB. HEALTH REPS. 637 (2017), <https://pubmed.ncbi.nlm.nih.gov/28977766>.
- 59 Teresa W. Wang et al., *Attitudes Toward Smoke-Free Public Housing Among U.S. Adults, 2016*, 54 AM. J. PREVENTIVE MED. 113 (2018), <https://pubmed.ncbi.nlm.nih.gov/29153476>.

- 
- 60 N.Y. State Dep't Health, Bureau of Tobacco Use Prevention and Control, Tobacco Control Program StatShot Vol. 2, No. 5, May 2009, [https://www.health.ny.gov/prevention/tobacco\\_control/reports/statshots/volume2/n5\\_secondhand\\_smoke\\_in\\_multiunit\\_dwelling.pdf](https://www.health.ny.gov/prevention/tobacco_control/reports/statshots/volume2/n5_secondhand_smoke_in_multiunit_dwelling.pdf).
- 61 NYC Health, NYC Vital Signs, *Secondhand Smoke and Smoke-Free Housing in New York City* (2018), <https://www.nyc.gov/assets/doh/downloads/pdf/survey/smoke-free-housing.pdf>.
- 62 Brian A. King et al., *National and State Cost Savings Associated With Prohibiting Smoking in Subsidized and Public Housing in the United States*, 11 PREVENTING CHRONIC DISEASE E171 (2014), <https://www.ncbi.nlm.nih.gov/pmc/articles/PMC4184089>.
- 63 Instituting Smoke-Free Public Housing, 81 Fed. Reg. 87430 (Dec. 5, 2016) (to be codified at 24 C.F.R. 965-66), <https://www.federalregister.gov/documents/2016/12/05/2016-28986/instituting-smoke-free-public-housing>.
- 64 Brittany Lewis, *The Illusion Of Choice: Evictions and Profit in North Minneapolis*, Center for Urban and Regional Affairs, University of Minnesota (2019), <https://evictions.cura.umn.edu/sites/evictions.cura.umn.edu/files/2023-04/Illusion-of-Choice-full-report-web-v2.pdf>.
- 65 Hudson B. Kingston, *There Is No Constitutional Right to Smoke or Toke*, Tobacco Control Legal Consortium (2019), <https://publichealthlawcenter.org/sites/default/files/resources/No-Constitutional-Right-Smoke-Toke-2019.pdf>.