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Banning smoking in subsidized housing could save half a billion dollars a year

By Niraj Chokshi October 2 at 4:25 PM

Smoking isn't just expensive for smokers: The costs associated with the habit in subsidized housing approach nearly half a billion dollars annually.

Nearly \$497 million could be saved every year if smoking were universally banned in subsidized and public housing, according to [a new study](#) by a team of National Centers for Disease Control and Prevention researchers. That policy — already in effect in some subsidized housing — would yield huge annual savings to taxpayers, employers, the federal government, state governments and others.

The savings would be largest in New York, where an annual \$125 million would be saved, as the interactive below shows. (The state happens to be home to about 15 percent of all subsidized housing residents.) Wyoming, with its small general population, would see the smallest amount saved: \$580,000 annually.

Savings would come from multiple sources and be enjoyed by multiple groups, the CDC researchers wrote in their peer-reviewed study. To determine the overall savings, they estimated how much would be saved in each state from health care related to secondhand-smoke inhalation, renovation of smoke-damaged units and fires caused by smoking.

The groups most likely to benefit from the health care savings are primarily taxpayers, employers and state or federal governments, the authors write. Renovation and fire cost savings would generally go to property owners or housing authorities and insurance carriers. In 41 states, health care costs from secondhand smoke inhalation represented the largest costs incurred. In eight states, however, renovation costs were larger.

Such bans aren't unprecedented: As of October 2013, more than 300 public housing authorities had banned smoking, with more and more owners and managers of multi-unit housing doing the same on their own. In Maine, a ban was in place for all 20 authorities, generating roughly \$1.09 million in annual savings, according to the study.

Of course, there are potential downsides. While some multi-unit housing owners

and managers worry that smoking bans would increase turnover or vacancy rates, past experience and research suggest those concerns are overblown. Others worry that low-income people who refuse to accept the smoking ban might be further marginalized by being forced to move somewhere where they can freely smoke at home. But, the report's authors argue, the positives outweigh the negatives.

“[O]n balance, these policies actually have the potential to considerably reduce health disparities and the associated costs of secondhand smoke exposure across states, particularly considering the higher rates of secondhand smoke exposure among populations that traditionally comprise a large portion of subsidized housing, including children, racial/ethnic minorities, and residents of low socioeconomic status,” they write.

The authors conclude by listing limitations to their analysis, several of which suggest their estimate is a conservative one. They failed to consider all the costs of smoking, such as its effect on long-term health care costs, lost productivity from the sicknesses smoking can induce, or benefits to smokers who quit. Health care cost estimates were sharply focused on conditions linked to secondhand-smoke exposure in a 2006 surgeon general's report. Newer or weaker linkages were left out. They also failed to account for individuals who live in the same building as subsidized housing residents but whose own housing is not subsidized. Finally, they write, they didn't consider the—likely cheap—costs associated with implementing such policies, including educating residents on them.

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