

# Secondhand Smoke Policy and Exposures in Multi-Unit Housing: Experiences of Immigrant Arab American Women



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## INTRODUCTION

- ❖ The Arab Institute estimates that 3.7 million Americans in the United States are of Arab ancestry, with the largest number residing in California's (CA) Bay Area, the majority having arrived as immigrants, refugees, or asylees.<sup>1</sup> Most Arab Americans in the Bay Area reside in low-income multi-unit housing (MUH) within under-resourced neighborhoods.
- ❖ CA comprehensive tobacco control program has prohibited smoking cigarettes and cannabis in public spaces, but the city of Oakland has yet to implement comprehensive tobacco control efforts to regulate smoking in MUH complexes.
- ❖ Home smoking bans effectively reduce secondhand smoke (SHS) exposure, especially for low-income families.<sup>2,3</sup> However, enforcing these bans can be difficult due to cultural norms and gender roles that impact women's ability to implement and uphold smoking restrictions. Even in smoke-free apartments, secondhand smoke can travel between units in multi-dwelling buildings, making it hard to fully protect non-smokers.<sup>3</sup>
- ❖ Exposure to secondhand tobacco smoke can have acute health impacts, such as asthma attacks and respiratory infections.<sup>4</sup> Underserved Arab Americans that are most vulnerable to the adverse effects of secondhand smoke (SHS), such as pregnant women, children, and the elderly, are also most reliant on public MUH housing.<sup>4</sup>

## OBJECTIVES

- ❖ To develop and test a culturally, linguistically, and gender appropriate primary prevention program for Arab American women "Hayat Jayida" (Good Life), utilizing intervention strategies to reduce the environmental risks of secondhand smoke in multi-unit housing.
- ❖ To utilize the results of these participatory research activities to develop and test advocacy actions to reduce multi-unit housing smoke exposures for underserved Arab American women.
- ❖ To develop the capacities of Arab American women to be change agents for themselves, their families, and communities through advocacy on second smoke.

## METHODS

- ❖ The project was guided by Community Systems theory, using a Community-Based Participatory Research (CBPR) approach deploying Freirean pedagogy within a decolonial-feminist praxis.
- ❖ 21 women aged 22-68 years were recruited from a prior prevention program.
- ❖ Participants were primarily new immigrants from Yemen, and all lived in MUH.
- ❖ For 8-months, bi-weekly meetings were held in Arabic, with meeting topics that included SHS exposure risks, smokefree MUH policies and, advocacy actions to reduce home smoke exposures.
- ❖ 17 Interviews were conducted, audio recorded, and transcribed to be analyzed thematically.
- ❖ A WhatsApp group encouraged dialogue about their experience and fostered community.
- ❖ A community advisory board (CAB) made up of Arab American community leaders, helped guide and oversee all program activities.



## CONCLUSION

- ❖ Culturally, linguistically, and gender tailored programming was effective in reducing residents' own smoking and implementing smoke-free home rules, by empowering Arab American women to be activated as change agents in their homes.
- ❖ The study concludes that a systemic solution, such as a city-wide smoke-free housing ordinance, is necessary. Residents believe this would empower building management and ultimately create a healthier living environment for all, especially children and families.
- ❖ However, several local grassroots organizations trying to pass a no smoking ordinance worry that enforcement of this law could potentially be used by MUH landlords to evict low-income families. This presents the need for broader community-based coalition needs to partner with MUH tenant rights advocates in order to create a smoke free MUH law which both protects low-income families from eviction, and which also protects families in MUH from SHS.

## RESULTS

### THEMES

#### Lack of Protection from SHS in MUH

- ❖ Despite efforts to create smokefree homes, participants are exposed to SHS from neighboring units
- ❖ Weekends and summers have increased exposure due to socializing and open windows, while winters offer some relief due to closed doors (though smoke persists through vents).

"We are very near each other, so even when someone smokes in their house, or outside their house we smell it."

"There is a little sitting area in front of our house, so if they smoke, we easily smell it, like when we open the window in the morning."

#### Seeking a Systemic Solution – Empowering Change Through Smoke-Free Housing Laws

- ❖ Residents' desire for a broader solution, such as a county-wide smoking ban, to address SHS, and shift the burden away from individual communication with neighbors.
- ❖ They believe a no-smoking ordinance would empower building managers to enforce smoke-free policies more effectively.
- ❖ To protect the health of children and families within MUHs, residents demonstrated a commitment to collective action and advocating for their rights.

"I hope to learn about our rights and help others understand their rights... that we can change the laws, get a law passed for no smoking... if we can work together, we are able to make changes especially for the rights of kids and families in their apartments."

#### Frustration, Powerlessness, and Fear addressing smoking concerns

- ❖ Participants are hesitant to confront neighbors or involve building management due to fear of racial prejudice and retaliation
- ❖ Feelings of powerlessness also stem from language barriers and perceived limitations of building management

"I could tell my neighbors who smoke outdoors how smoking affects our health badly, but because of fears I talked about before, and a lack of knowledge of the laws, I don't say anything."

#### SHS in MUH – A Trapped Exposure

- ❖ Smoke infiltrates their living spaces through various pathways – shared areas, ventilation systems, and even walls – regardless of smoking bans or their own efforts.
- ❖ The residents express frustration at the pervasiveness of smoke and the difficulty of escaping its health hazards, even within their own apartments.

"We have regulations against smoking in their apartments and building but people are doing whatever they want to do. Tobacco and marijuana smoke really do affect us. I can barely breathe. This secondhand is very harmful."

"I rarely open my windows. When I open them, my house gets filled with smoke from my neighbors because they smoke outdoors."

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### ACKNOWLEDGEMENTS:

We acknowledge and thank project staff, Community Advisory Board, and members of the community who have supported this work.

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This research was funded by the California Breast Cancer Research Program. B28PP5757

The work being presented has received funding or other means of support from any of the following sources:	Tobacco Industry	E-cigarette & nicotine product industry (excluding pharma)	Pharma Industry
Any of the authors have received funding (including consultancy) from any of the following sources in the past 5 years:	NO	NO	NO