

Low-Income Housing and Tobacco Policy: Worcester and Southbridge (MA)

Timothy O'Malley, MS2

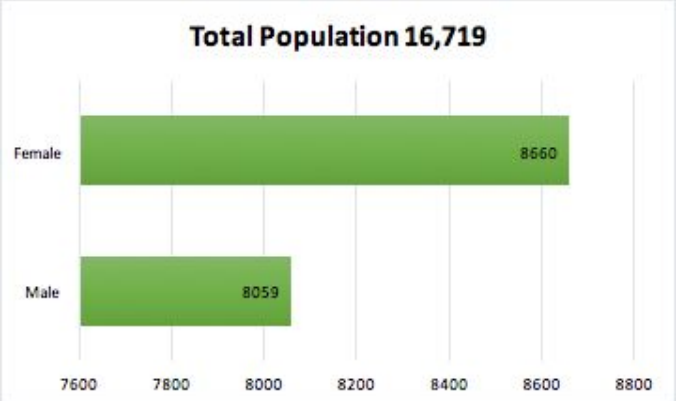
Lauren Marcov, MS2

Imani Williams, MBS, MS2

Andrew Wilkes, RN, DNP1

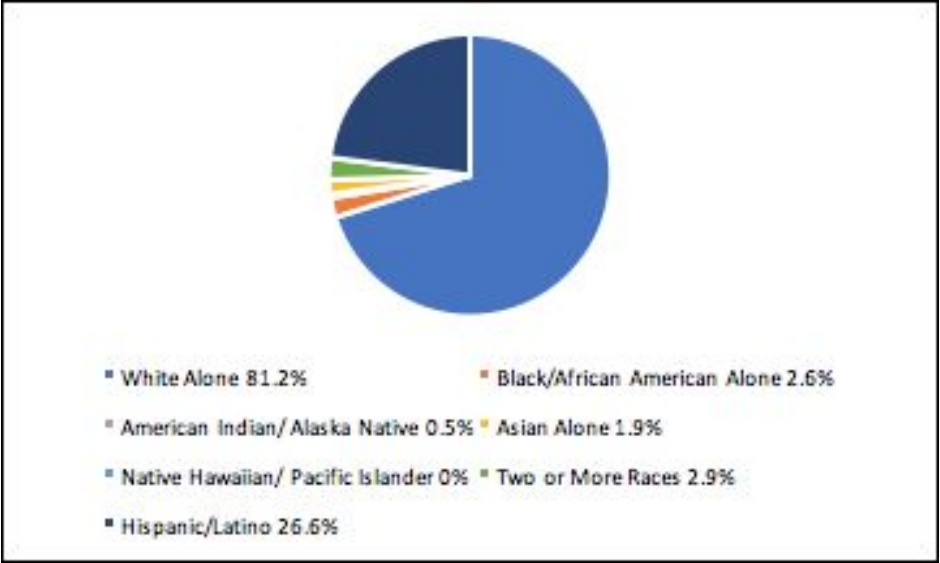


Demographic Data - Southbridge, MA



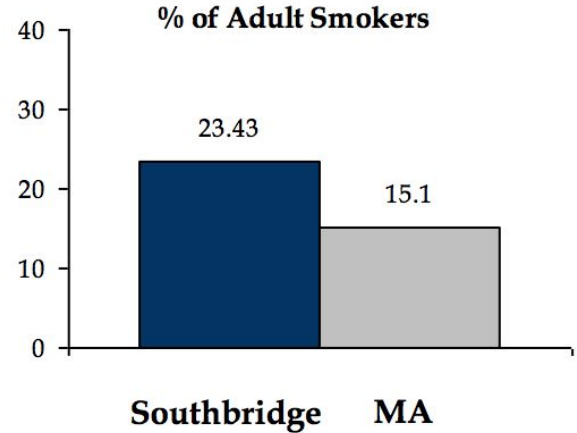
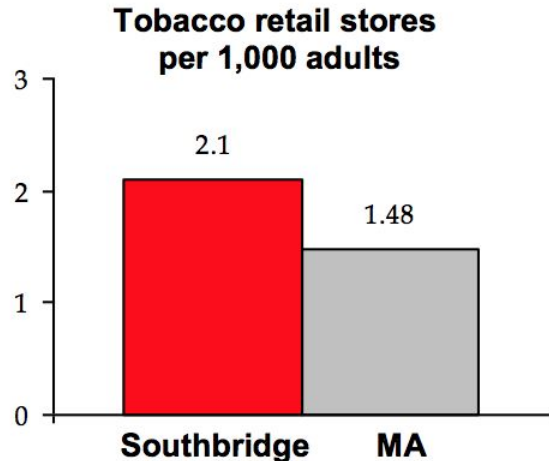
Median Income - \$43,870 Percent in Poverty - 16.9%

Top Cause of Death - Heart Disease



Southbridge - Tobacco Data

Estimated **3,012** Smokers live in Southbridge, putting the smoking rate **55%** higher than statewide.



In Southbridge there are **27** tobacco retailers, and illegal sales to minors is **41%** higher in Southbridge than statewide.

Low-Income Housing in Southbridge, MA

Brookside Terrace

- **168 Units - Family** Housing
- Privately owned and managed, HUD subsidized

Southbridge Housing Authority

- **140 Units - Family/Individual** Housing
- Public Housing Choice Voucher/Section 8 Housing

Lebanon Hill Housing

- **116 Units - Senior** Housing
- HUD subsidized

Forty West Street

- **7 Units - Affordable Senior Supportive Housing** for Disabled Persons
- Rental assistance for seniors with set or restricted income



Household Characteristics of SHA Voucher Holders

Wait List and Tenancy

- Annual turnover of 5%
- Average voucher holder has received housing benefits for **10 years 6 months**
- Average of **95 months** spent on housing voucher waiting list

Income Characteristics

- 98% very low income (VLI) / 79% extremely low income (ELI)
- Average household income: **\$15,310/year** (average voucher household = 2.1 persons)
- Major source of income: 24% wages, 2% welfare, 68% other (Social Security, Disability, Pension)

Head of Household Characteristics

- 42% headed by person 25-49
- 30% headed by person 51-60
- 27% headed by person 62-85
- 1% headed by person 85+

Other Household Characteristics

- 35% households included children
- **61%** of voucher households were headed by **minorities**

Rent and Assistance

- Average monthly tenant contribution: **\$380**
- Average monthly HUD expenditure: \$987

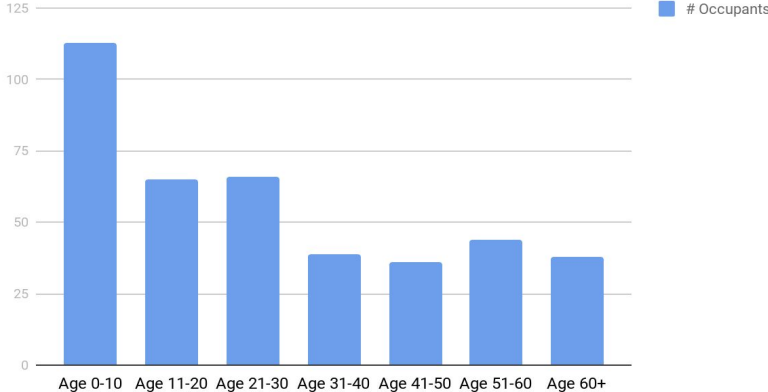
Demographic Data - Brookside Terrace

168 Units (all currently occupied)

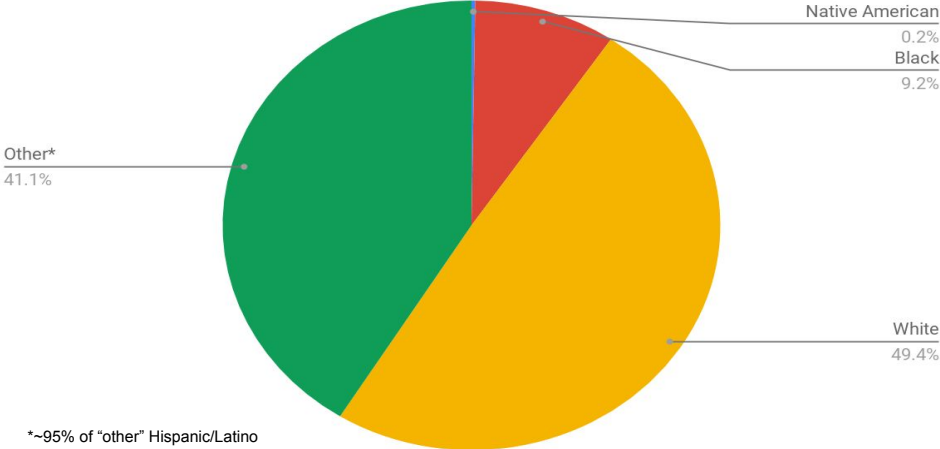
- 11 one-bedroom units
- 121 two-bedroom units
- 24 three-bedroom units
- 12 four-bedroom units

Total Number of Occupants: **401** (154 male, 247 female)

Age Breakdown of Occupants of Brookside Terrace



Race of Brookside Terrace Residents



Brookside Terrace Smoking Policy

- No smoking allowed in common areas
- **Smoking currently allowed in hallways and individual units**
- Smoke-free plans in “talking stages” and plan to be formally addressed in March 2019 by property ownership/management
- Goals: establish designated smoking areas away from housing units, eventually become completely smoke-free complex
- Major concerns: pushback from residents, compliance and enforcement of smoke-free policies, availability of smoking cessation resources for residents

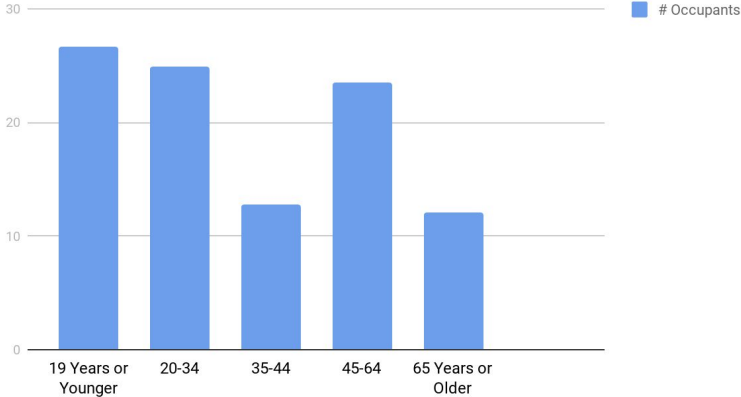


Demographic Data- Worcester, MA

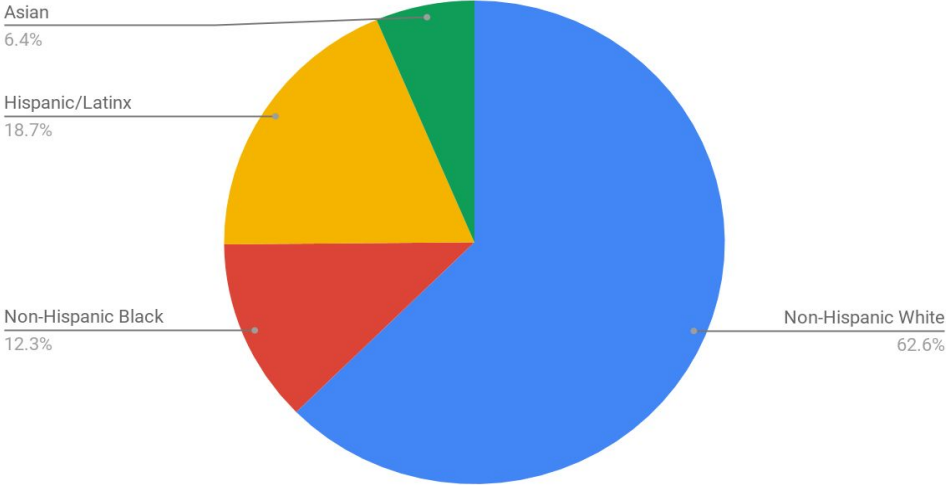
- Total Population 183,677
- Youth Population 37,372
- Median Income 45,599
- Percent Below Poverty Level 22.1%
- Percent MassHealth (2013-2015) 26.3%



Worcester Population Age Range



Worcester Racial Demographics



Worcester Housing Authority

The People

- 40% Elderly
- 20% Young disabled
- 40% Families
- 70-80% of families are Latinx
- 50-60% of elderly/younger disabled are Latinx
- Average annual income \$13,965
- Average monthly rent \$300



Raymond Mariano, former executive director of Worcester Housing Authority

The Properties

- 83% Federal
- 17% State
- 3000 Public housing units
- 3934 Leased housing units (3595 Federal, 339 State)
- 24 Separate developments
- 4 Elderly only developments
- 12 Elderly/young disabled
- 8 Family developments
- Largest development is Great Brook Valley consisting of two housing developments; Curtis Apartments (State) and Great Brook Valley Gardens (Federal)
- 15 transitional housing units
- 42 beds 689 developments (adults and adolescents with special needs)
- 423 DMH/DMR leased units (341 Federal, 82 State)



Apartments at Great Brook Valley

Great Brook Valley

Great Brook Valley Gardens (Federal) and Curtis (State)

Single Parent Units - 592

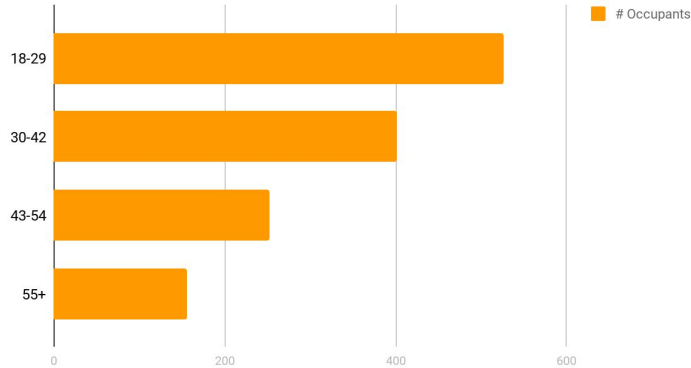
- Female single parents - 566

Total Adults - 1335

- Female Adults - 939
- Male Adults - 396

Adult Age Range

Adult Age Range at Great Brook Valley & Curtis



Have a Driver's License

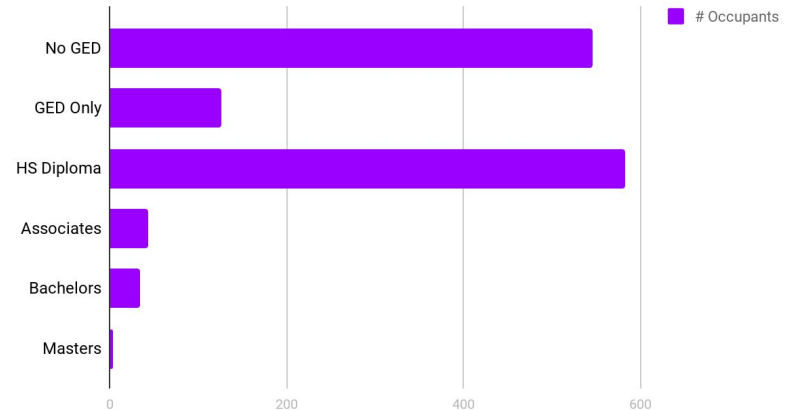
- Yes - 590
- No - 745

Adults Employed - 474

- Part-Time - 244
- Full-Time - 230
- Not Employed - 861 (64.5%)

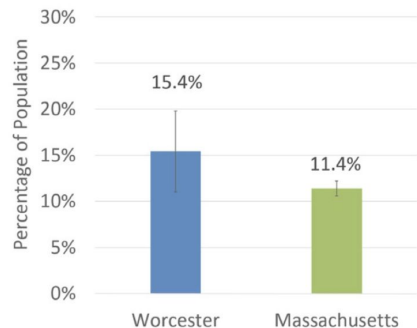
Education - Adults

Highest Education Level Attained by Adult Residents



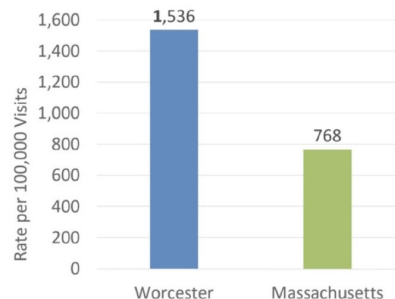
2015 Greater Worcester Community Health Assessment

Figure 38. Adult Asthma Prevalence, 2013



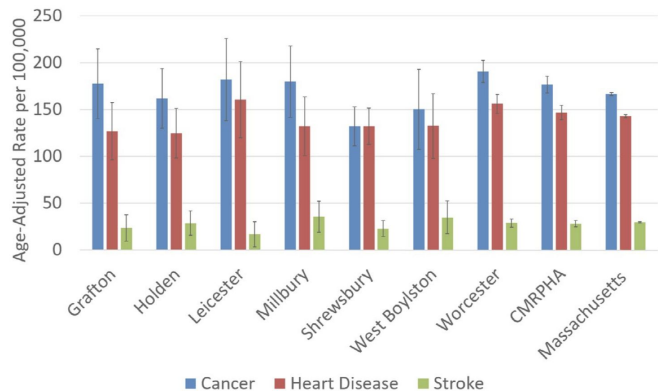
Source: Behavioral Risk Factor Surveillance Survey, 2013

Figure 37. Pediatric Asthma-Related Emergency Department Visits, 2009-2011



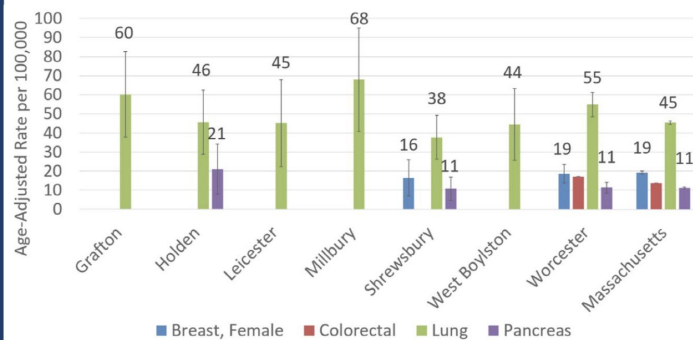
Source: MDPH Center for Health Information & Analysis

Figure 22. Top Three Causes of Death, 2010-2012



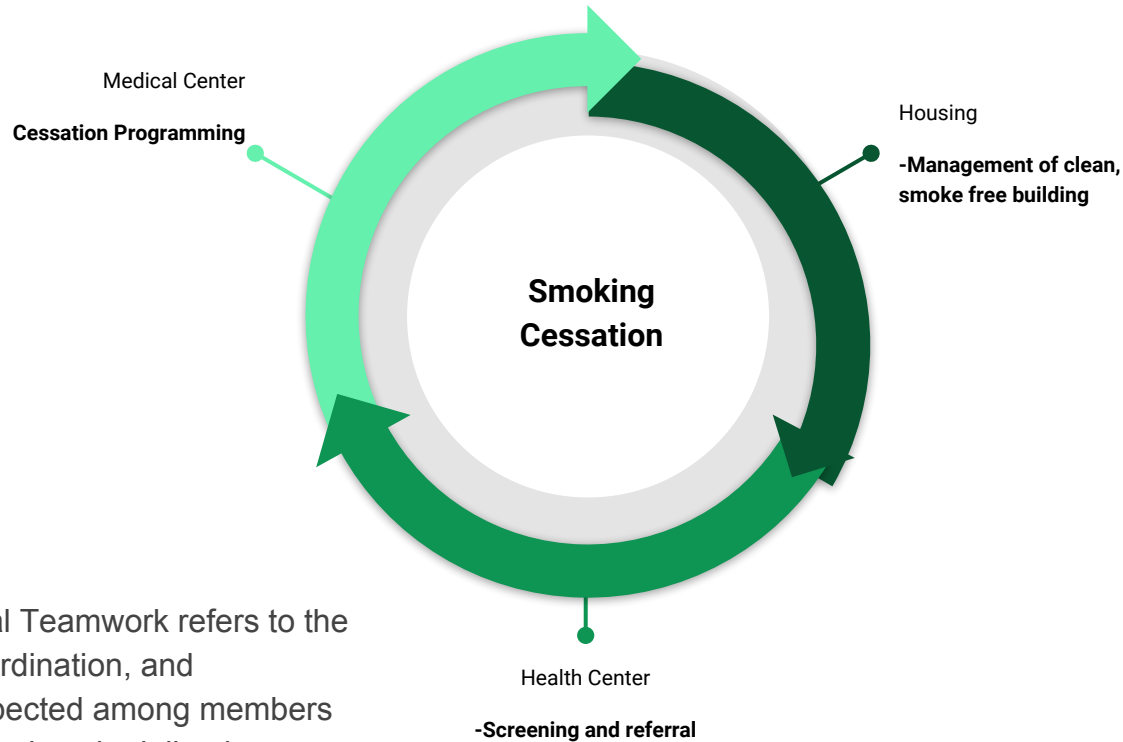
Source: Massachusetts Community Health Information Profile

Figure 26. Top Four Cancer Death Rates, 2010-2012



Source: Massachusetts Community Health Information Profile

Interprofessional Teams of Care

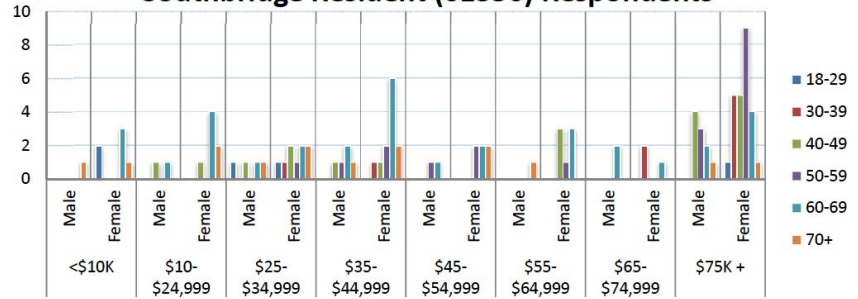


- “Interprofessional Teamwork refers to the cooperation, coordination, and collaboration expected among members of different professions in delivering patient centered care collectively”

Harrington Hospital

- Based in Southbridge, MA
- 2016 **Community Health Needs Assessment** included a survey as well as hospital data
- **18%** of responses were from the **Southbridge** zip code, however only **1%** of all responses were in spanish
- Noted that Southbridge population is **26.6%** Hispanic and this population was probably largely underrepresented
- Majority of survey respondents (**39%**) had an annual income of over **\$75,000**, the median income in Southbridge is **\$43,870**

Southbridge Resident (01550) Respondents



Community Health Needs Assessment - Hospital Data

Lung Cancer was the **2nd** most highly diagnosed cancer at Harrington Hospital in 2015.

Top 5 Cancers Diagnosed:

- Breast (60 cases)
- Lung (48 cases)
- Prostate (22 cases)
- Blood and BM (17 cases)
- Colon (15 cases)

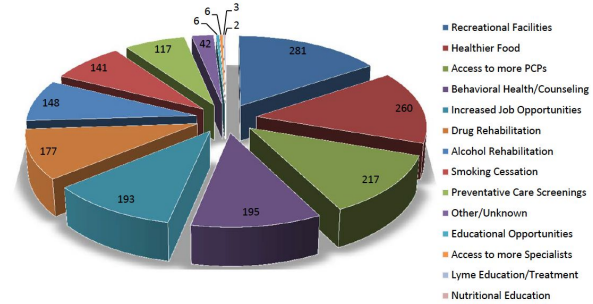
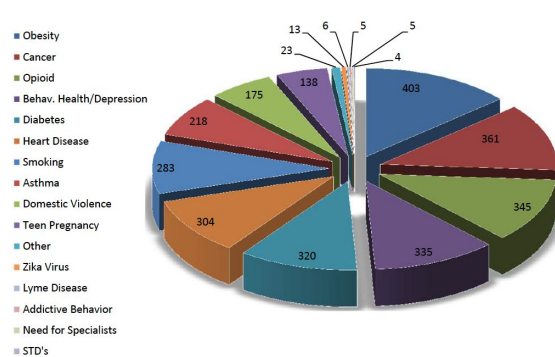
Respiratory distress/illness **was not** among the top 10 ER diagnoses at Harrington Hospital in 2015.

Top 10 ER Diagnoses 2015

| Principle ED Diagnosis | Visit Count |
|--|-------------|
| ABDOMINAL AND PELVIC PAIN | 1906 |
| DORSALGIA | 1371 |
| PAIN IN THROAT AND CHEST | 1146 |
| DISLOCATION AND SPRAIN OF JOINT | 1062 |
| NAUSEA AND VOMITING | 1044 |
| OPEN WOUND OF WRIST, HAND AND FINGER | 928 |
| OTHER AND UNSPECIFIED INJURIES | 847 |
| DISLOCATION & SPRAIN OF JOINTS & LIGAMENTS | 828 |
| ACUTE UPPER RESPIRATORY INFECTION | 780 |
| OPEN WOUND OF HEAD | 643 |

Community Health Needs Assessment - Survey

APPENDIX C: Survey Responses: Overall Community Health Concerns



Top 5 Community Health Concerns

| Community Health Concerns |
|----------------------------------|
| - Obesity |
| - Cancer |
| - Opioids |
| - Depression / Behavioral Health |
| - Diabetes |

Smoking **was not** among the top 5 Overall Community Health Concerns

Top 5 Suggestions Were:

- Creating more recreational facilities
- Availability of healthier food
- Better access to primary care physicians
- More job opportunities
- Better access to mental health services

Smoking Cessation **was not** among the top 5 ways to improve community health.

Community Benefits Initiative

- Main takeaway from the Community Health Assessment was that there was a disconnect between resources available to the community and knowledge about how to obtain them
- Decided this issue needed to be resolved before other programs were put into place
- Specifically **nothing regarding tobacco cessation** was addressed

Resources Available to the Southbridge Community

Quitworks and the Massachusetts Smokers' Helpline

- Quitworks was developed by the Massachusetts Department of Public Health in collaboration with all major health plans
- Quitworks is a program for **clinicians** to refer their patients to the Massachusetts Smokers' Helpline
- Massachusetts Smokers' Helpline offers **FREE** information on quitting tobacco
- Also offers treatment counseling and services available in English and Spanish, with translation for other languages

MassHealth and Commonwealth Care Quit Smoking Benefits

- All FDA-approved quit-smoking medications are covered
- This includes: Nicotine patches and Nicotine gum, Bupropion and Varenicline

Health Advocacy - Tobacco Cessation

- Massachusetts Tobacco Cessation and Prevention Program
- Tobacco Free Mass
- Worcester Regional Tobacco Control Collaborative

Massachusetts Tobacco Cessation and Prevention Program

MTCP is a Statewide Public Health Program

Their Mission is to reduce the health and economic burden of tobacco use by preventing young people from starting to smoke, helping current smokers to quit, and protecting children and adults from secondhand smoke.

5 Core Strategies

Strategy #1: Ensure access to effective cessation resources for all Massachusetts residents

Strategy #2: Protect young people from tobacco industry tactics

Strategy #3: Implement Evidence-Based pricing strategies

Strategy #4: Ensure that all health care visits include tobacco intervention

Strategy #5: Promote and protect a smoke-free environment for all Massachusetts residents

Tobacco Free Mass

Tobacco Free Mass' Policy Achievements:

2018- Passed youth tobacco prevention legislation that bans the sale of tobacco in pharmacies, regulates e-cigarettes, and raises the age of sale for tobacco from 18 to 21

2018- Increased funding for the Massachusetts Tobacco Cessation and Prevention Program by half a million dollars

2013- Increased excise tax on cigarettes to \$3.51, raised the tax on cigars from 30% to 40%, and raised the tax on OTP from 90% to 210% of wholesale

Tobacco Free Mass is a privately-funded coalition that advocates for funding and policies that support tobacco prevention and cessation and the reduction of exposure to secondhand smoke. The Coalition continues to advocate for funding and policies to reduce death and disease caused by tobacco use.

Smoking Cessation Efforts at Great Brook Valley

- **Federal Smoking Ban** covers low-income housing that is federally subsidized, but owned and operated by local public housing authorities. This applies to living units, as well as, outdoor areas up to 25 feet from the building.
- **Extension of Federal Smoking Ban to State Public Housing**
- **Building Manager monitors hallways**
- **50 unit pilot of cigarette smoke detectors**



- Trips to the senior center for elderly residents from 6 developments
- Builds community
- Reduces isolation and depression

Edward M. Kennedy Community Health Center

- Operating since 1972
- Serves over 26,000 patients each year
- Diagnostic Screening by Primary Care Providers to assess readiness to quit
- “Warm-Handoff” referrals to cessation programs

Example PCP Note:

We discussed techniques to help with cessation including: switching brand of cigarettes, switching store where she buys cigarettes, switching hand with which she smokes. She should tell her friends and family she is quitting. I also offered 1800QUITNOW as a cessation aid and medications including Vareniciline, Bupropion, and NRT (patches or gum), which she declined today. We will discuss at all future visits.



Process of Cessation at Great Brook Valley

Rules on the banning of smoking are mandated by the Federal Government.

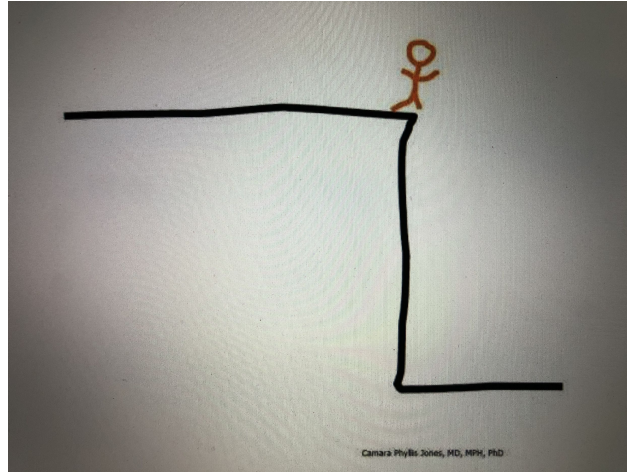
- As of July 31, 2018, U.S. Housing and Urban Development prohibits the use of cigarettes, cigars and pipes in all public housing units and common areas
- Includes outdoor area within 25 feet of public housing grounds.
- The ban does not apply to e-cigarettes, snuff and chewing tobacco, although there may be restrictions on those in some areas.
- Tenants can be evicted after three smoking violations.
- The ban was passed under the Obama administration in November 2016. HUD said the new policy would reduce health hazards from secondhand smoke and encourage residents to quit smoking.

Process takes a multidisciplinary approach

- Resident is identified by either complaint or during rounds through the housing unit.
- The process is not punitive, but having a Federal mandate absolves some of the backlash
- Motivation to quit is not just for the health of the individual and neighbors, you cannot smoke in the unit or you will lose housing.
- Often there is a referral to smoking cessation services and group support sessions directed by a counselor.
- Efforts made to get those isolated out of the unit and into a more social setting. This is important for the elderly demographic and daily trips made to senior center.

Process of disconnect...

Residents are often patients at the Edward M. Kennedy Community Health Center and there they are told that smoking cessation programs are provided at UMass Memorial....?



Acknowledgements

- Tina Grosowsky, MA
 - Project Coordinator, Central MA Tobacco Free Community Partnership
- Carleton Watson
 - Director of Family & Resident Services, Worcester Housing Authority
- Jose Ramirez, MD, MHA
 - VP of Operations, Worcester, Edward M. Kennedy Community Health Center
- Deborah Ellis
 - Meredith Management Corporation
Property Manager, Brookside Terrace

Sources

- http://harringtonhospital.org/wp-content/uploads/2016HNA_CompleteReport.pdf
- <https://affordablehousingonline.com/housing-search/Massachusetts/Southbridge>
- <https://factfinder.census.gov/faces/tableservices/jsf/pages/productview.xhtml?src=CF>
- https://www.huduser.gov/portal/datasets/asst_hsg.html
- https://www.publichousing.com/details/southbridge_housing_authority
- <https://www.umassmed.edu/psychiatry/resources/tobacco/tobacco-free-community-partnership/>
- <http://quitworks.makesmokinghistory.org/>