

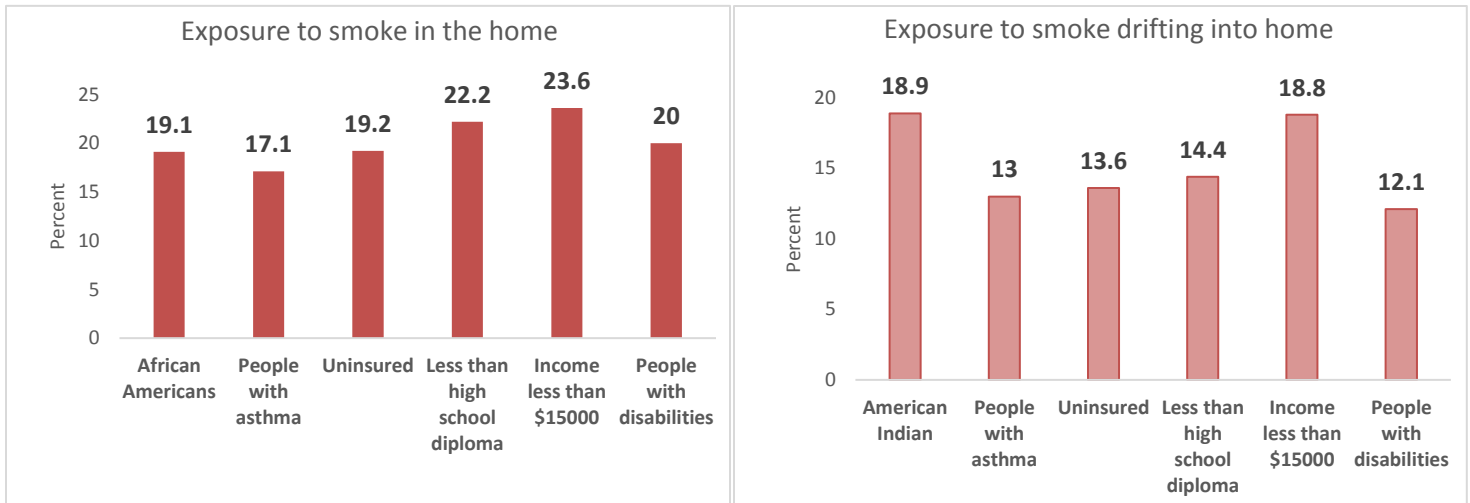
# Secondhand Smoke Exposure in North Carolina

Smoke from tobacco products contains over 7000 chemicals, including 70 that are known to cause cancer, and can cause heart disease, lung cancer, stroke, respiratory infections, and asthma attacks.

There is no safe level of secondhand smoke.

NC Adults	
<b>13%</b> Exposed to smoke in their home	<b>10%</b> Exposed to smoke drifting into their home from nearby apartments or outside

## Certain populations are more likely to be exposed



## NC Youth

Was in home or vehicle with someone smoking		Smoking is sometimes or always allowed in home	
<b>32.5%</b> Of high school students	<b>28.2%</b> Of middle school students	<b>20.8%</b> Of high school students	<b>20%</b> Of middle school students

## THIRDHAND SMOKE

There is increasing awareness that the chemicals in tobacco smoke remain on surfaces long after smoking stops. This **thirdhand** smoke can linger for weeks or months, and can combine with particles in the air to create new toxic chemicals.



State of North Carolina • Pat McCrory, Governor  
 Department of Health and Human Services • Rick Brajer, Secretary  
 Division of Public Health  
[www.ncdhhs.gov](http://www.ncdhhs.gov) • [www.tobaccopreventionandcontrol.ncdhhs.gov](http://www.tobaccopreventionandcontrol.ncdhhs.gov)  
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## **Principles and Tips: On talking to families about asthma and secondhand smoke exposure in the home**

### ***Principles:***

1. Be hard on the problem (the secondhand smoke/the addictive product), but soft on the people. Show your understanding that smoking is a very challenging addiction and it's hard to quit. People who smoke aren't bad parents – they are addicted.
2. Never give up. Secondhand smoke exposure is dangerous and there is no safe level of exposure. There may not be an immediate solution available, but keep trying.
3. Listen. Learn all you can about the situation. Try to understand the family's values. Be friendly and respectful. Just giving respect and having a positive attitude can go a long way.
4. Empower those who need your help most. Provide the information and encouragement they need to make changes for the better. You can give them the tools to create a healthy environment for their families.
5. Use your judgement. We never want to put anyone in immediate danger of violence. Watch for signs that there might be a threat and don't push.
6. Be creative. There may be a negotiated solution that might reduce a child's exposure to tobacco smoke, including things like a wheelchair ramp, changes in sleeping arrangements, or having the person who smokes use nicotine gum at certain times.

### ***Tips:***

1. Always ask about smoking in the home, and advise in clear personalized terms about the reasons for quitting. Many people want to quit, but don't know how. They may not know about QuitlineNC (1-800-QuitNow) and might be motivated knowing there is a good health reason for them to quit (to protect the child in the home) and a free service that can help.
2. Never avoid talking to a household member who smokes and assume they won't quit or change their behavior. Many people who smoke are waiting to hear a direct message about quitting, because they suspect their smoking may be harming the child. Don't miss the opportunity to give them a chance to be heroes to their kids. Most people really want to do the right thing. If they are not ready to quit, talk with them about only smoking outside.
3. Keep the focus of the conversation on the child's health and the possible poor outcomes of having smoking around him/her. Include the expense of increased medication and the fact that the medicine may eventually not work as well. Also the expense of extra hospital and doctor visits.
4. Sometimes it helps to show the effects of secondhand smoke on the child. Using a carbon monoxide monitor or a blood gas monitor (set to measure carbon monoxide) can help convince a parent that something happens to the child around smoke.
5. The aerosol from electronic nicotine delivery systems, often called vaping devices, is not as safe as clean air. It is not "water vapor" and it typically contains nicotine, which can impair brain development, and additional toxins.
6. Help a person who smokes understand his/her addiction. How long after waking up does he/she smoke? If it is a half-hour or less, the addiction to nicotine is very high. Cigarettes are designed to addict. Ask a person who smokes to measure his/her desire to quit and his/her confidence in quitting. High desire but low confidence is a great person to refer to QuitlineNC.
7. Some cultures are really focused on male leadership. In these families a female may feel uncomfortable asking a man not to smoke in the house. Suggest having a person who is influential with this man make the approach. A pastor, favorite uncle or doctor may be able to make the point best. Use the culture to support your efforts: "You are the head of the family – it is up to you to make the rule to protect the child."
8. Empower a parent or caregiver with information. If he/she needs to talk with a household member who smokes, share information that explain the hazards of secondhand smoke, especially as it relates to asthma – and also QuitlineNC information.
9. Last, there are no easy answers that apply to every situation. Every family is different, and solutions can be complicated and nuanced. Solutions may not happen right away, but may take some time, creativity and other resources.