



Short Communication

Assertive communication about others' smoking and vaping in public venues: Results from a National Survey of US adults

Cabral A. Bigman^{a,*}, Susan Mello^b, Ashley Sanders-Jackson^c, Andy S.L. Tan^{d,e}^a University of Illinois Urbana-Champaign, College of Liberal Arts and Sciences, Department of Communication, 3001 Lincoln Hall, 702 S. Wright Street, Urbana, IL 61801, United States^b Northeastern University, Department of Communication Studies, College of Arts, Media and Design, 360 Huntington Ave., Boston, MA 02115, United States^c Michigan State University, Department of Advertising and Public Relations, College of Communication Arts and Science, 404 Wilson Road, Lansing, MI 48824, United States^d Harvard University, TH Chan School of Public Health, Department of Social and Behavioral Sciences, Kresge Building, 677 Huntington Avenue, Boston, MA 02115, United States^e Dana-Farber Cancer Institute, Division of Population Sciences, Center for Community-Based Research, 450 Brookline Ave LW662, Boston, MA 02215, United States

HIGHLIGHTS

- Surveys US adults' assertive communication about smoking and vaping in public venues.
- Finds variation in US adults' intentions to voice objections to smoking and vaping.
- Assertive communication intentions were higher for smoking (52%) than vaping (19%).
- Willingness to speak up varied by demographics, venue, and respondents' product use.

ARTICLE INFO

Keywords:

Assertiveness
Health communication
Secondhand smoking
Smoking
Vaping

ABSTRACT

Introduction: This study describes prevalence and correlates of US adults' intentions to engage in assertive communication (i.e., speak up) about others' smoking and vaping in public venues. **Methods:** Participants from a nationally representative online survey of 1551 US adults conducted October–December 2013 reported intentions to ask others not to smoke/vape in three types of public venues (restaurants, bars/casinos/nightclubs, and parks). We examined weighted prevalence of intentions and conducted weighted logistic regression. **Results:** Fifty-two percent of participants reported being likely to ask someone not to smoke in at least one venue compared with 19% for vaping. Assertive communication intentions for smoking in restaurants (48%), bars/casinos/nightclubs (35%), and parks (32%) were higher than for vaping (16%, 14%, and 12%, respectively). Significant correlates of assertive communication intentions in one or more venues were current smoking status, ever trying e-cigarettes, gender, age, health status, political ideology, and party identification. **Conclusions:** US adults were more willing to ask others not to smoke than vape. Intentions to speak up about smoking and vaping differed by venue, demographics, and cigarette/e-cigarette use. These findings help establish an evidence base to inform policymakers in developing strategies to promote compliance with smoke-free and vape-free laws.

1. Introduction

Surveys in the 1980s–1990s examined the public's willingness to speak up about exposure to secondhand smoke. (Brownson, Davis, Wilkerson, & Jackson-Thompson 1994; Davis, Boyd, & Schoenborn 1990; Elder, Rosbrook, Choi, et al. 1992) Key changes to the tobacco landscape since then include widespread adoption of and support for

smoke-free policies (Thomson, Wilson, Collins, & Edwards 2016; American Nonsmokers' Rights Foundation (ANRF) 2018) and rising popularity of e-cigarettes in the US. (King, Patel, Nguyen, & Dube 2015) These changes have catalyzed discussion about smoking normalization and de-normalization. Changing norms surrounding tobacco use may have affected how willing people are to speak up and communicate assertively about other people smoking in public venues.

* Corresponding author at: University of Illinois at Urbana-Champaign, Department of Communication, 3001 Lincoln Hall 702 South Wright Street, Urbana, IL 61801, United States.

E-mail address: cbigman@illinois.edu (C.A. Bigman).

<https://doi.org/10.1016/j.addbeh.2018.07.015>

Received 28 February 2018; Received in revised form 24 June 2018; Accepted 18 July 2018

Available online 19 July 2018

0306-4603/© 2018 Elsevier Ltd. All rights reserved.

Despite inclusion of e-cigarettes in some smoke-free policies, (American Nonsmokers' Rights Foundation (ANRF) 2018) published data about the US public's willingness to ask others not to vape is scarce. One recent national survey of e-cigarette users found that many current users did not view e-cigarettes as part of smoke-free policies, and that restaurants, bars, and clubs were among the most popular smoke-free places where people reported vaping (Shi, Cummins, & Zhu 2017). Yet, little is known about how those who do not use e-cigarettes respond to other people vaping in different kinds of public venues. Prior studies found smokers were less likely to report having asked someone else not to smoke (Brownson et al. 1994; Elder et al. 1992) Support for tobacco restrictions also varies by demographics and venue (Thomson et al. 2016). For example, indoor environments have tended to garner more support for smoke-free restrictions than outdoor environments, such as parks and beaches (Thomson et al. 2016).

Are there differences in intentions to speak up about exposure to secondhand vapor and smoke depending on venue, product use, and demographics? To answer this research question, we examined the prevalence of US adults' intentions to engage in assertive communication about others' smoking (ACS) and others' vaping (ACV) at restaurants, in entertainment venues (i.e., bars, casinos, clubs), and in parks. The analysis examines differences in assertive communication intentions based on type of public venue and smoking and e-cigarette use status, along with demographic correlates. The findings speak to the extent to which the public is likely to serve as a normative influence that reinforces smoke-free and vape-free public environments, and provides a snapshot of public sentiment surrounding assertive communication as e-cigarettes gained market share and became increasingly prevalent (Giovenco, Hammond, Corey, Ambrose, & Delnevo 2015)

2. Methods

2.1. Study sample and data collection

Data are from the Annenberg National Health Communication Survey (ANHCS), an online national survey of US adults. ANHCS is a rolling cross-sectional survey among adults aged 18 years and older that was fielded from 2005 to 2013. ANHCS participants were US adults who were members of GfK's KnowledgePanel. The panel is designed to be a nationally representative online research panel. GfK uses probability-based random-digit dial (RDD) and address-based sampling of US households to recruit its KnowledgePanel (see www.knowledgenetworks.com/fact-sheets/KnowledgePanel.pdf). GfK provides hardware and Internet service necessary for participating in online surveys to recruited households that lack them. The data for this study are from a module on e-cigarette perceptions and behavioral intentions fielded from October to December 2013 ($N = 1551$).

2.2. Measures

2.2.1. Assertive communication intentions for smoking (ACS) and vaping (ACV) in public venues

Measures were adapted from the CDC's 2009–2010 National Adult Tobacco Survey. Participants reported how likely they would be to ask other people not to smoke or to vape around them if they couldn't move away from the smoke or vapor, respectively. Respondents were asked about three public venues: indoor at restaurants; in bars, casinos, or clubs (hereafter referred to as “bars” for brevity); and at parks. These six items were on a 5-point scale (1 = ‘very unlikely’ to 5 = ‘very likely’) that was dichotomized to either ‘not likely’ (3 or below) or ‘likely’ (greater than 3) to ask someone not to smoke/vape. These measures were combined to create two outcomes reflecting whether a respondent would likely ask other people not to smoke or not to vape in any of the three public venues (i.e., in one or more public venue).

Participants also provided demographic data, including age, gender,

race/ethnicity, education level, income level, political ideology and party identification, subjective health status, smoking status based on number of cigarettes smoked in their lifetime and current daily or someday smoking (nonsmokers, former smokers, or current smokers) and e-cigarette use (never heard of e-cigarettes; had heard of them, but never tried them; tried them, but not in the past 30 days; or had used them at least once in the past 30 days).

2.3. Data analysis

All analyses were weighted to match the sample population to the US Census 2010 adult population. We used Stata version 13 to examine the prevalence of ACS and ACV intentions for each of the three venues. (Stata for Mac 2013) We also analyzed the prevalence of ACS and ACV intentions in at least one of the three venues. In addition, we examined the prevalence of ACS and ACV intentions by smoking and vaping status (i.e., product use) and conducted logistic regression to examine demographics and product use as correlates of ACS and ACV. Participants who indicated they were not aware of e-cigarettes (8%) were excluded from analyses that examined willingness to speak up about secondhand vaping (ACV) (analyzed $n = 1449$); the full sample ($N = 1551$) was used for secondhand smoking (ACS) outcomes.

3. Results

3.1. Sample characteristics

The weighted full sample was 52% female, with an average age of 47 (SE = 0.55). The majority of participants were Non-Hispanic White (68%); 11% were African American, 15% were Hispanic, and 6% were some other race or ethnicity. Thirty percent had a high school degree. The majority of participants (59%) reported incomes of \$50,000 or more. The average participant was moderate ($M = 4.19$, $SE = 0.05$) on a 7-point scale where 1 = very liberal and 7 = very conservative, and 54% self-identified as Democrats. The average reported health status was 4.25 (SE = 0.03) on a scale that ranged from 1 = very poor health to 7 = excellent health. Current smokers accounted for 16% of the full sample; 26% were former smokers, and 57% were nonsmokers. More participants had never heard of (8%) or never tried e-cigarettes (80%) than had ever tried e-cigarettes (8%) or had used them in the past month (4%).

3.2. Prevalence of assertive communication intentions in public venues

3.2.1. Overall prevalence of ACS and ACV

Just over half of participants (52%) reported they would be likely to object to secondhand smoking in at least one of the public venues, while fewer than one in five (19%) said they would speak up about secondhand vapor for those same venues (see Fig. 1). Weighted prevalence of ACS in restaurants (48%), bars/casinos/nightclubs (35%), and parks (32%) were higher than ACV in each of the venues (16%, 14%, and 12%, respectively). For ACS, more respondents were likely say they would speak up in restaurants than in bars. For both secondhand smoke and vapor assertive communication intentions, more people intended to voice objections in restaurants than parks (see Fig. 1).

3.2.2. Prevalence of ACS and ACV by smoking and vaping status

Fewer current smokers (34%) intended to ask others not to smoke than nonsmokers (58%) and former smokers (49%). A similar pattern was apparent for individual venues (see Fig. 1). Fewer than 3 in 10 smokers (29%) were likely to speak up in restaurants. Only a small proportion of smokers said they were likely to ask others not to smoke in bars (16%) and parks (15%). A larger proportion of nonsmokers reported being likely to speak up in restaurants (53%), bars (40%), and parks (38%). Similarly, compared with those who had never used e-cigarettes (21%), a smaller share of e-cigarette users said they were

Download English Version:

<https://daneshyari.com/en/article/7258825>

Download Persian Version:

<https://daneshyari.com/article/7258825>

[Daneshyari.com](https://daneshyari.com)