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Support for a smoke-free bylaw in parks and on beaches

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ABSTRACT

Background: In September 2010, Vancouver, Canada enacted a smoke-free bylaw in parks and on beaches.

Objective: To examine demographic and attitudinal factors associated with the public opinion on Vancouver's outdoor smoke-free bylaw.

Methods: From 496 randomly selected Vancouver residents, information on demographics, smoking status, and opinions and support for or opposition to the smoke-free bylaw were obtained by telephone surveys.

Results: Approximately 84.2% of the sample endorsed the legislation; a greater proportion of non-smokers supported the bylaw than smokers (88.6% vs. 52.0%). In multivariate analysis, demographic variables significantly associated with supporting the smoke-free bylaw were being female, having completed community college/university or Post Graduate work (as compared to high school education or less), and being a nonsmoker. Furthermore, adjusting for demographic variables, all opinions regarding the smoke-free bylaw were significantly associated with its support, with the exception of the belief that the bylaw would increase stigma towards smokers.

Conclusion: These findings suggest strong public support in Vancouver for the smoke-free bylaw in parks and on beaches. Jurisdictions considering such legislation should address attitudes which can promote or hinder its adoption. Examination of such policy support on diverse groups within the population may enhance the development of equitable public health policy.

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1. Introduction

Secondhand tobacco smoke (SHS) exposure is a significant cause of respiratory and cardiovascular diseases, and cancer [1,2], contributing to an estimated 603,000 deaths globally in 2004 [3]. Smoke-free policies are one of the most important and effective strategies used in tobacco control to combat the disease burden associated with tobacco use and SHS exposure. Taken together with other strategies used in a comprehensive approach to SHS reduction (e.g., cigarette tax increases, increasing access

to cessation resources, de-normalization), smoke-free policies are related to direct improvements in air quality, health, and reductions in smoking-related behaviour [4].

To date, the majority of smoke-free policies target public indoor settings such as workplaces, bars and restaurants or outdoor spaces adjacent to indoor settings such as entryways and outdoor patios of restaurants [5,6]. With the successful tobacco control efforts to prohibit smoking in public spaces (beginning primarily with efforts in California in the 1990s), in the mid 2000s tobacco control began targeting outdoor spaces [4]. California extended its comprehensive smoke-free policies in public buildings to areas within 20 feet of main entranceways, operable windows, and exits in 2004 [4]. Calabasas, California instituted a local ordinance prohibiting smoking in all public spaces

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including bars, restaurants, stadiums, parks, and streets and sidewalks [7]. In 2006, Queensland, Australia became one of the first jurisdictions to institute a comprehensive ban on smoking in parks and on beaches, thereby broadening the social and physical reach of smoke-free policy [8]. Since then, jurisdictions throughout the world have begun to enact smoke-free bylaws and regulations restricting smoking in outdoor public spaces [5] such as children's playgrounds, parks, beaches and related facilities. Such smoke-free policies have now been introduced in Canada, Australia, the U.S., Hong Kong, New Zealand, Thailand, India, and Singapore [6,9]. However, there is little prospective research examining public opinion with respect to smoke-free bylaws in parks and on beaches, the effectiveness of such bylaws, and how these policies may differentially affect various members of the community.

Like many developed countries, the overall prevalence of smoking in Canada is low (18%) and is decreasing [10], but continues to remain elevated among those with low income and/or low education [11], young adults [10], and individuals who identify as aboriginal [12]. With a historically strong anti-tobacco movement, Canada is an important leader in tobacco control efforts and policy globally [13]. Although smoke-free legislation varies in strength and scope across Canadian jurisdictions, such legislation primarily restricts smoking in indoor public spaces and adjacent areas [14]. The reasons commonly asserted in support of advocating smoke-free policies for outdoor spaces such as parks and beaches include reducing litter, the risk of fires, the perception that smoking is a normative behaviour (particularly on youth), and the potential harms associated with SHS exposure in public places [15]. In the International Agency of Research on Cancer (IARC) Handbook on Cancer Prevention and Tobacco Control review, support for smoking restrictions in parks globally ($n=7$ studies addressing support for smoking restrictions) ranges from 25% in the USA (2001) to up to 83% in a New Zealand city (2007) [4]. However, few studies in Canada have examined public opinions regarding smoke-free policies in outdoor recreational areas [5,16]. This limited understanding in Canada of the public opinion on factors contributing to support for such bylaws or their effects presents a challenge to determining whether there are limits to the potential expansion of smoke-free policies or what could enhance the effectiveness of such bylaws.

Vancouver is Canada's third largest city, with a population of approximately 600,000 people, although the Metro Vancouver region numbers over two million. On September 1, 2010 a smoke-free bylaw banning smoking of any substance in the city's parks, beaches and recreational facilities was implemented. There was local government and park board support for the introduction of the bylaw. This paper reports on the results of a telephone survey of public opinion regarding the adoption and implementation of the smoke-free bylaw in Vancouver. The survey was conducted as part of a larger study on the equity effects of the smoke-free bylaw, and examined demographic and attitudinal factors associated with supporting or opposing the new smoke-free bylaw in parks and on beaches in Vancouver. Understanding why different demographic factors affect support may help policy makers and advo-

cates tailor advocacy campaigns to address the specific concerns of different subpopulations.

2. Methods

2.1. Design and sample

This study employed a cross-sectional analysis of survey data from residents of Vancouver, BC. Telephone surveys of residents were conducted through a survey research company (NRG Research Group) using a random digitalized calling sampling procedure. The surveys were conducted between September 15th and 25th, 2011, approximately one year after the smoke-free bylaw in parks and beaches came into effect in Vancouver. Calls were conducted according to the following schedule: Monday to Thursday (between 3 pm and 8 pm), Friday (3 pm–6 pm), and Saturday and Sunday (11 am and 6 pm). A total of 13,394 people were randomly called with the goal to select 500 eligible and willing study participants. Eligibility criteria included residence in Vancouver, being 19 years or older and having visited a park or beach at least once in the past 12 months.

2.2. Measures

Support for the smoke-free bylaw: Using a 4-point Likert scale participants rated their support for the bylaw by responding to the question, "Would you say that you strongly support, somewhat support, somewhat oppose, or strongly oppose smoke-free bylaws in parks and beaches in your city?" For analysis, responses were dichotomized into 'supporting' (strongly/somewhat support) and 'opposing' (somewhat/strongly oppose) the smoke-free bylaw.

Opinions regarding the smoke-free bylaw: Participants were asked a series of questions to assess their opinions about the effects of the smoke-free bylaw. These questions were:

Do you believe that smoke free bylaws in parks and beaches will:

- a) Decrease the amount of cigarette litter in parks and beaches in your city?
- b) Increase more negative attitudes (stigma) towards smokers?
- c) Protect the health of non-smokers (including children) who visit parks and beaches?
- d) Encourage people to quit smoking?
- e) Discourage youth from starting smoking?
- f) Infringe on the rights of smokers?
- g) Protect people from exposure to secondhand smoke?

Participants reported their opinions using a 4-point Likert scale consisting of 'strongly believe'; 'somewhat believe'; 'somewhat disbelieve'; and 'strongly disbelieve'. For analysis, we dichotomized responses to each question to obtain opinions about the smoke-free bylaw into 'believing' (strongly/somewhat believe) and 'disbelieving' (somewhat/strongly disbelieve).

Demographic: Information was obtained on sex (male or female), ethnicity (white or European Ancestry, black or African Ancestry, First Nations, South East Asian, East

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