

Acceptability of smoking in outdoor public places

Following successful efforts to reduce people's exposure to second-hand smoke indoors, attention is turning to reducing smoking in outdoor public places. There are a number of reasons for banning smoking in outdoor public places. These include fewer role-models of smoking behaviour for children, increasing the number of people who stop smoking, and decreasing the number of smokers overall, as well as reducing the environmental impact from smoking such as the litter created by cigarette butts (Wilson *et al*, 2007).

Before implementing smoking restrictions in outdoor public places, it is important to gauge the level of public support for these measures. To gauge current support, people's attitudes towards smoking outdoors at sports fields and courts were surveyed from 2003 to 2007. In 2007, to better understand views about the acceptability of smoking outdoors, people's attitudes towards smoking in four other outdoor public places were surveyed. These places were children's playgrounds, local parks and reserves, town and city squares, and beaches.

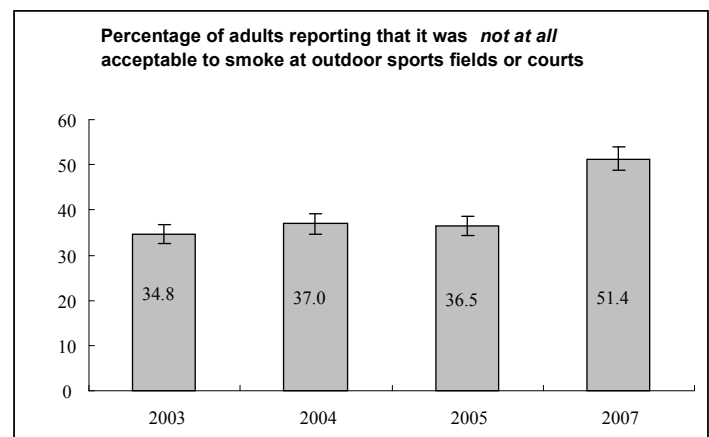
This report presents the survey results showing changes in attitudes over time towards smoking at outdoor sports fields and courts. It then goes on to describe how acceptable people feel smoking is at the four other outdoor places.

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From 2003 to 2007, data were collected on whether adults thought that people should be able to smoke *anywhere they want, only in set areas, or not at all*, when at outdoor sports fields or courts.

The graph shows the percentage of adults that felt that it was *not at all* acceptable to smoke when at an outdoor sports field or court in each of the four years.

- In 2003, just over one-third (34.8%) of adults said that it was *not at all* acceptable to smoke while at an outdoor sports field or court.
- The percentage of adults saying that it was *not at all* acceptable to smoke at these places remained consistent until 2005 (no data were collected in 2006).
- In 2007, there was an increase in the percentage of adults (51.4%) saying that it was *not at all* acceptable to smoke when at an outdoor sports field or court.
- Between 2005 and 2007, there was a significant increase in the percentage of adults who said it was unacceptable to smoke at an outdoor sports field or court.



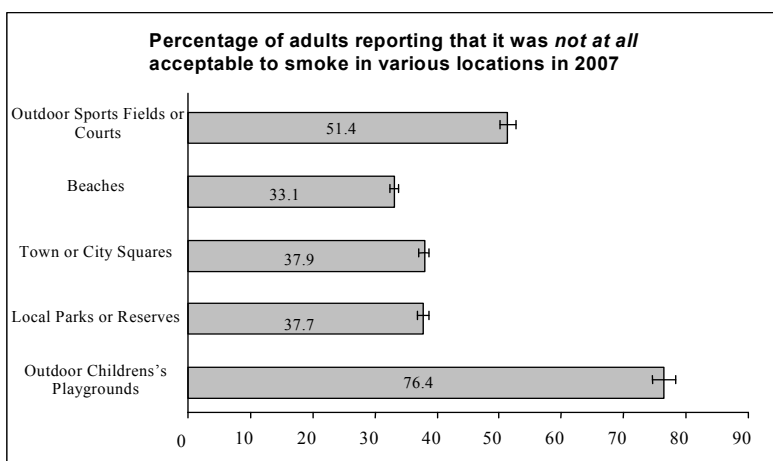
A number of factors could explain the increased public view that it is *not at all* acceptable to smoke at these outdoor public places.

It may be that people's acceptance of smoking in public places is reducing as more locations, including ones outdoors, become smokefree due to legislative and policy changes. For example in 2005 and 2006 four New Zealand councils (South Taranaki District Council, Upper Hutt City Council, South Wairarapa District Council, and Queenstown Lakes District Council) introduced a range of smoking restrictions in council-controlled outdoor areas. Additionally, a number of major sports stadiums also have smokefree policies, such as the Westpac Stadium in Wellington and the AMI Stadium in Christchurch. Further work is needed to assess the effectiveness of these restrictions and how they influence public support for smokefree environments (HSC, 2007).

Are people's views consistent for different outdoor public places?

The graph shows the percentage of adults who felt that it was *not at all* acceptable to smoke when at the four other outdoor places included in the 2007 survey.

- Around three-quarters of adults (76.4%) said that it was *not at all* acceptable to smoke when at an outdoor children's playground.
- One-third (33.1%) of adults said it was *not at all* acceptable to smoke while at the beach.
- Similar views were expressed about smoking at town or city squares, and at local parks or reserves, with around four out of ten adults saying it was *not at all* acceptable to smoke in these outdoor places.



The acceptability of smoking in outdoor public places varies depending on the setting. This may be because of who uses these locations and for what purposes. For example, when places are used by children or for sports it appears that it is less acceptable for people to smoke there.

What Have We Learned?

- The launch of the *Smokefree* homes and cars campaigns (in 2004 and 2006), and the provisions in the Smoke-free Environments Amendment Act (2003) appear to have had an impact on the percentage of adults who find smoking *unacceptable* in outdoor public places.
- The acceptability of smoking in outdoor public places varies depending on the setting, with lower levels of tolerance for smoking at places designated for children's use and for sports.

About the Surveys

- The HSC Monitor is a telephone survey that has been conducted each year from 2003 – 2007.
- From 2003 to 2006 more than 2,000 people aged 15 and over were interviewed each year, while in 2007 over 1,500 were surveyed.
- Survey data were adjusted to be representative of the New Zealand population for age, ethnicity (Maori/non-Maori), and smoking status (smokes/does not smoke) using the 2006 Census.
- For ease of interpretation, only data representing those who felt that smoking at outdoor places was *not at all* acceptable are shown here. The other percentages do not necessarily indicate that smoking should be allowed *anywhere*, as there also was an option for people to say that smoking should be allowed in *set areas*.
- At the end of each bar is a “whisker”, a line that shows the likely range of variation within which the true percentage may fall - this range is the confidence interval.

References

HSC (2005). *Reducing smoking initiation literature review: A background discussion document to support the national framework for reducing smoking initiation in Aotearoa-New Zealand*. A review prepared for the Ministry of Health. Wellington: HSC.

HSC (2007). *Smoking policies and bans in outdoor settings: Review of rationale, implementation, and impact*. Wellington, New Zealand: HSC.

Wilson N, Thomson G, & Edwards R (2007). Lessons from Hong Kong and other countries for outdoor smokefree areas in New Zealand. *New Zealand Medical Journal*, 120, 1-4.