

Survey of business owner/managers'  
perceptions of outdoor smokefree areas:  
Hanmer Springs

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# Executive summary

## Introduction

Community support for smokefree outdoor areas is well documented, however, there is little local data on tourism-related business owner/manager's perceptions of smoking, smokefree policy and smokefree outdoor areas. The aim of this survey was to gauge tourism industry views on these issues to guide the Cancer Society's advocacy work with the Hurunui District Council (HDC).

## Methods

A survey of owner/managers of tourism-related businesses in Hanmer Springs was conducted in February and March 2017. Forty-two owner/managers representing 44 businesses completed a face-to-face or telephone interviewer-administered questionnaire.

## Main findings

More than three-quarters of respondents thought that outdoor dining/seating areas should be smokefree. Forty-six percent of respondents thought that smokefree outdoor dining should be introduced using a voluntary policy, while the remaining 54 percent thought that it should be introduced using a regulated local policy. Most respondents stated that they would be more likely to support smokefree outdoor areas if there was evidence of success where smokefree outdoor areas were in place, and customer, community and council support for smokefree outdoor areas.

Forty-one percent of respondents thought that introducing more smokefree outdoor areas in Hanmer Springs would have a positive impact on tourism, and 43% thought that it would make no difference. Most respondents (88.1%) stated that they would support a smokefree main street in Hanmer Springs.

## Discussion

The level of support for smokefree outdoor areas among business owner/managers in Hanmer Springs is high, and they are not perceived to be a threat to business. The survey findings indicate that there is sufficient support for smokefree outdoor areas to justify further dialogue with the tourism sector and the HDC.

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# Introduction

## Smokefree Aotearoa 2025 and smokefree outdoor area policy

The implementation of smokefree legislation reduces smoking behaviour, second hand smoke (SHS) exposure, and adverse health outcomes (1, 2). As such, policies designed to achieve wider adoption and promotion of smokefree outdoor areas play an important role in helping achieve the Smokefree Aotearoa 2025 goal to reduce smoking to very low levels (less than 5% of the population) by 2025 (3). Currently the prevalence of regular smoking among people aged 15 years and over is 15.1 percent in New Zealand, and 15.3 percent in the Hurunui District (4). The Smokefree Aotearoa 2025 goal requires the best possible support for those who want to quit smoking, as well as stronger protection for children against all exposure to tobacco.

The Hurunui District Council (HDC) adopted a smokefree outdoor area policy on 23 February 2012 covering all Council-owned reserves, including playgrounds and sports grounds, within its district (5). This policy is voluntary and not enforceable. All councils in the Canterbury and West Coast regions have adopted similar policies (6-11). The policies offer people who do smoke a choice not to smoke within these areas predominantly used by children and families. Not smoking around children and young people provides positive role modelling, and helps decrease future uptake by reducing the visibility of smoking (12).

With a number of councils due to review their current smokefree community space policies, assessing the acceptability of smokefree community spaces is seen as a valuable way to help continue the engagement with councils. Ninety percent of New Zealand local councils have policies promoting smokefree community spaces (13). Progress is now being made on extending these policies to cover additional areas, for example outdoor dining areas on council-controlled land throughout Westland (14); shopping streets and outdoor dining in Palmerston North (15); social housing stock and bus stops in Whangarei (16); social housing, entrances and exits of council buildings and facilities, and bus shelters in Christchurch (6); and a variety of community spaces in Auckland, including outdoor dining in 2018 (17).

## Second hand smoke and smokefree outdoor dining areas

Whilst progress is being made in some areas, developments for smokefree outdoor dining are piecemeal. The risks to public health from SHS have been well documented. Exposure to SHS is

associated with numerous negative health outcomes such as lung cancer, coronary heart disease, sudden infant death syndrome, and stroke (18). Around 350 New Zealanders die each year from exposure to other people's tobacco smoke - making SHS the leading environmental cause of death in New Zealand (19).

SHS can drift from outdoor into indoor areas of hospitality venues (20, 21), and can impact both patrons and staff, particularly when levels of smoking are high (22). Therefore, introducing smokefree outdoor dining area policies for hospitality venues could both decrease SHS exposure for staff and patrons and denormalise smoking in these environments. Smokefree outdoor dining areas are becoming more commonplace in New Zealand (14, 15, 17) and Australia (23, 24). Case studies of the introduction of smokefree outdoor dining area policies from Christchurch (25) and Australia (26-28) have reported support from businesses.

## Support for smokefree outdoor area policies

In line with international evidence (29), public support for smokefree outdoor areas in New Zealand is high (30-36). Community perceptions of smokefree outdoor area policies have also been assessed locally. A community survey with a convenience sample of 200 adult Christchurch residents in 2012 found that three-quarters of respondents supported smokefree outdoor dining areas, and 89 percent supported smokefree outdoor green spaces (parks, playgrounds and sports grounds) (37). Similarly, a 2014 telephone survey conducted in Canterbury and the West Coast regions with 445 randomly-sampled adults to determine community views on smokefree community spaces indicated community support for smokefree outdoor areas (38). Many respondents (>60%) thought that specific urban public places (such as building entrances, footpaths outside local shops, bus stops, outdoor eating places, and outdoor areas in town centres) should be smokefree. In addition, 40 percent of respondents stated that they would be more likely to patronise outdoor dining areas if they were smokefree, and 55 percent said a smokefree designation would not influence their decision. Less than 3 percent of respondents reported that they would be less likely to visit a business if it had a smokefree outdoor dining area.

The Cancer Society endorses the Smokefree Aotearoa 2025 goal, and works collaboratively on a wide range of tobacco control initiatives. The Cancer Society has developed an advocacy strategy for all councils in the Canterbury-West Coast region to support extensions to current smokefree outdoor area policies. During advocacy opportunities with local councils, the need to better understand commercial views (especially of the hospitality industry) on outdoor smoking and smokefree outdoor spaces (e.g. outdoor dining/seating areas) was identified and is now seen as key to

advocacy. Central to this is the importance of understanding views on perceived risk to businesses of smokefree outdoor policies (e.g. loss of business if seen to support/promote smokefree messages).

The views of business owner/managers on smokefree community spaces, and their willingness to support a smokefree outdoor areas policy on their street, have been investigated in several recent New Zealand studies. A survey of the attitudes of 198 business owners and managers to proposed smokefree shopping streets in central Wellington was conducted in 2011 (39). Approximately 43 percent of respondents supported the potential smokefree policy, and the remainder (57%) were opposed. Most respondents (83%) thought that the smokefree policy would have either a positive or negligible impact on their business, and these views were significantly more common for non-food businesses (90%) compared to food businesses (64%).

A recent small-scale survey of 55 businesses on the main shopping street (Stafford Street) in Timaru in 2014 indicated that most respondents saw people smoking in the outdoor areas surrounding the business premises daily, and noted that a small number of staff and customers had expressed concern about people smoking in these areas (40). More than half of respondents (55%) said that they would consider participating in a trial of voluntary smokefree outdoor areas on Stafford Street. The majority (82%) thought that this would have either no impact on custom, or could result in an improvement in business.

A survey of owner/managers of tourism-related businesses in Kaikoura was conducted in 2015, and almost three-quarters of the 60 respondents thought that outdoor dining/seating areas should be smokefree (41). Most respondents stated that they would be more likely to support smokefree outdoor areas if there was evidence of success where smokefree outdoor areas were in place, public support for smokefree outdoor areas, and if clear smokefree signage was made available to businesses. More than one-third of respondents thought that introducing more smokefree outdoor areas in Kaikoura would have a positive impact on tourism, and one-quarter thought that it would make no difference. More than half of respondents stated that they would be willing to support and/or participate in a trial of smokefree outdoor areas on Esplanade in Kaikoura, and a further 11 percent were interested in the trial, but wanted to receive more information about it.

In addition, to better understand the views of the hospitality industry specifically on smokefree outdoor dining/seating areas, the Cancer Society with support from Community & Public Health (CPH, the public health division of the Canterbury District Health Board) invited 191 Christchurch hospitality businesses to participate in a survey in 2015 (42). The majority of the 137 respondents agreed that SHS is harmful to children and adults, and staff and customers should be protected from SHS. Sixty-one percent of respondents thought that outdoor dining/seating areas should (definitely

or possibly) be smokefree, while 28 percent thought that smoking should (definitely or possibly) be allowed in outdoor dining/seating areas. Almost 11 percent of respondents did not mind either way.

Findings from these surveys suggest a possible synergy of views between consumer support for smokefree outdoor areas and business willingness to discuss the issues further. Through continued conversations with the HDC, the Cancer Society has set out to explore what the relationship between business views and tourism in regards to Smokefree Aotearoa 2025 might be.

## Research aim

The aim of this research project was to obtain current information on the views of Hanmer Springs' tourism-related business owner/managers regarding smoking, smokefree policy, smokefree outdoor areas, and willingness to participate in (or support) a voluntary smokefree main street. This information will assist advocacy with the HDC to consider the process for options to extend the range of current smokefree policies. It is hoped that the findings will open up conversations to consider the place of smokefree outdoor areas within the wider Smokefree Aotearoa 2025 goal.



## Methods

This study used a similar design to a previous survey of tourism-related business owner/managers' views of smokefree outdoor areas in Kaikoura, which is described in detail elsewhere (41).

### Sample selection

The Cancer Society obtained a list of businesses in Hanmer Springs (a small town in the Hurunui District (Figures A1-3, Appendix A)) by requesting lists of premises licensed to sell/supply food and alcohol from the Hurunui District Council (HDC). In addition, several businesses were added using local knowledge. From these lists, tourism-related businesses (e.g. hospitality venues, accommodation providers, tour operators, and retail stores) were identified, and businesses that were not tourism-related were excluded. After this process, the total number of businesses eligible to participate in the survey was 71. The accompanying flowchart provides a description of the sample recruitment process (Figure B1, Appendix B).

Telephone calls were made to all identified eligible businesses from the list (n=71), and if contact could not be made after three calls, the businesses were not pursued any further (in the interests of time). On contact, the volunteer requested to speak to the business owner or manager (if not doing so already), who was then invited to participate in the survey. Those agreeing to participate were asked for an interview on either of two set days (27 and 28 February 2017). Those unable to complete the survey face-to-face, were given the opportunity to complete the survey by telephone.

### Questionnaire development

The questionnaire was based on that used in a previous survey of tourism-related businesses in Kaikoura (41), with some minor adjustments to make the survey appropriate to the location. The face-to-face and telephone surveys used the same questionnaire (Appendix C), which was able to be completed within 10 minutes.

### Survey implementation

Two Cancer Society staff members and one volunteer telephoned businesses, and two staff members conducted the interviews. Interviewers had participated in administering previous Cancer Society surveys and were familiar with background information and surveying guidelines (41).

Face-to-face interviews were conducted in Hanmer Springs on 27 and 28 February 2017, and telephone interviews were conducted between 14 and 30 March 2017. During the interview the interviewer followed the questionnaire format with the respondent and data were entered via SurveyMonkey® using individual identification codes to allow anonymous data entry and analysis.

## Data entry and analysis

Data were downloaded from SurveyMonkey® in Excel format by CPH for analysis. Descriptive quantitative analysis was undertaken using IBM® SPSS® Statistics for Windows (version 22.0, released 2013. IBM Corp. Armonk, NY, USA), and graphs were created using Microsoft Excel (2013). Some respondents did not answer all questions; therefore the number of respondents/responses (n) is displayed in all graphs. All percentages were calculated as a percentage of those who responded to the question (i.e. excluding missing responses). Where respondents could provide multiple responses to a question, the number of responses can exceed the total number of respondents.

Where respondents provided open-ended comments, these qualitative responses were analysed using a content analysis (43). Here, general topic themes/categories/codes were identified from the responses, and their frequency of use among the respondents counted. Respondents often addressed several topics within a single comment, therefore when summed, the number of respondents (n) mentioning each topic sometimes exceeds the total number of respondents.

## Ethical considerations

It was determined that Health and Disability Ethics Committee review was not necessary given that the criteria requiring such review were not met (44). The study is also considered low-risk as the survey is confidential and those invited could decline to participate or to answer any particular question if they wished.

## Survey limitations

The current survey has some limitations. Some businesses could not be contacted at all (n=14), eight owner/managers invited to participate, declined, and a further five who agreed to participate were not able to be contacted further. This may have resulted in non-response bias, where those who completed the questionnaire (respondents) may have different characteristics or views from those who did not complete the questionnaire (non-respondents). These factors may limit the

generalisability of the survey findings (45, 46) to the whole population of tourism-related businesses in Hanmer Springs, and therefore, the survey findings should be interpreted with this in mind.

# Findings

## Survey response

In total, 14 businesses could not be contacted at all, eight owner/managers of eligible businesses invited to participate declined, and a further five who agreed to participate could not be contacted further (i.e. minimum response rate<sup>1</sup> = 60.9%) (Figure A1, Appendix A). Of the 55 owner/managers of eligible businesses contacted and invited to participate in the survey, 42 completed a questionnaire (i.e. minimum co-operation rate<sup>2</sup> = 76.4%) (47). One respondent owned three businesses in Hanmer Springs, but only completed the questionnaire once.

Face-to-face interviews were conducted on 27 and 28 February 2017 (n=34), and telephone interviews between 14 and 30 March 2017 (n=8). All interviews occurred between 8:30 am and 4:40 pm.

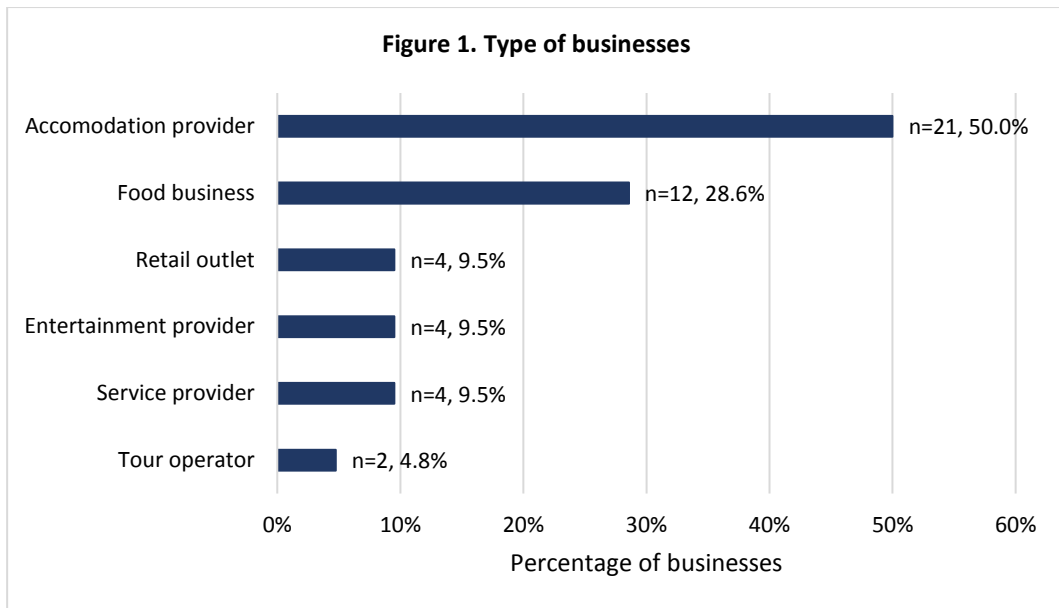
## Characteristics of businesses

Half of the businesses (50.0%, n=21) were accommodation providers, and almost one-third (28.6%, n=12) were food businesses (e.g. cafés, bars, restaurants, takeaway outlets) (Figure 1). A small number of participating businesses were retail outlets, service providers, or entertainment providers (all 9.5%, n=4), or tour operators (4.9%, n=2). Four businesses fitted into two of these categories. Of the 12 food businesses, nine (75.0%) were licensed to sell/serve alcohol.

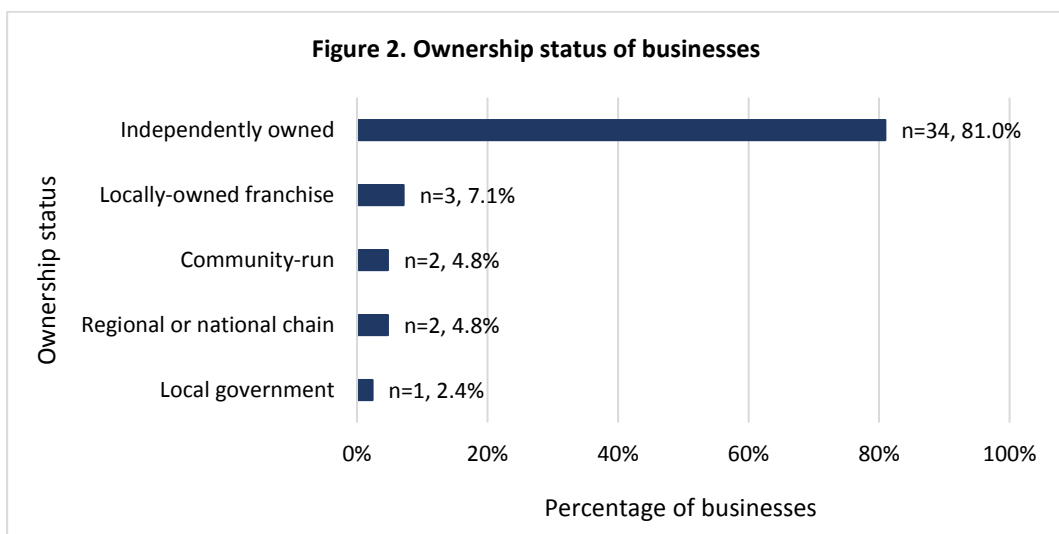
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<sup>1</sup> Minimum **response rate** is defined as the number of completed interviews divided by the number of interviews (complete plus incomplete) plus the number of non-interviews (declined plus non-contacts) plus all cases of unknown eligibility (22). In this survey, minimum response rate =  $42 \div (42 + 14 + 8 + 5)$

<sup>2</sup> Minimum **co-operation rate** is defined as the number of completed interviews divided by the number of all eligible businesses contacted (22). In this survey, co-operation rate =  $42 \div 55$

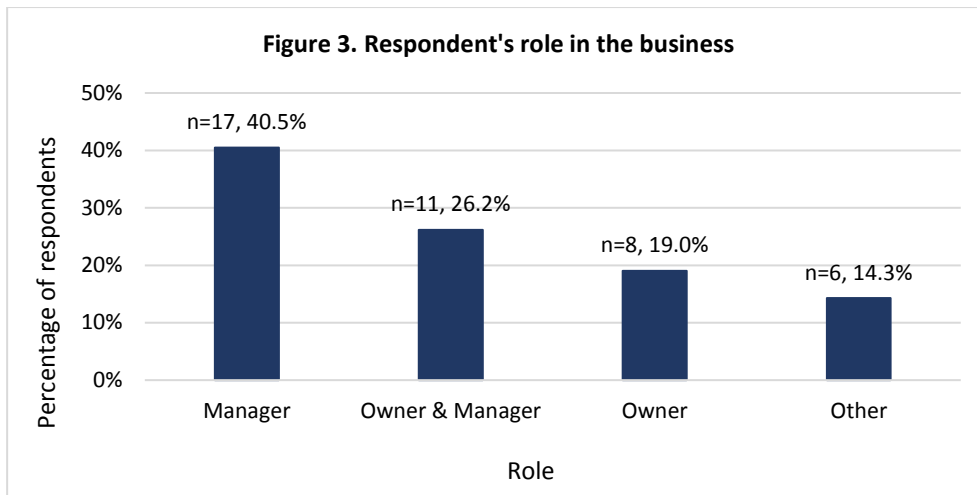


All businesses operated year-round (97.6%, n=41), except for one that operated seasonally. Most businesses (81.0%, n=34) were independently owned (Figure 2).



## Characteristics of respondents

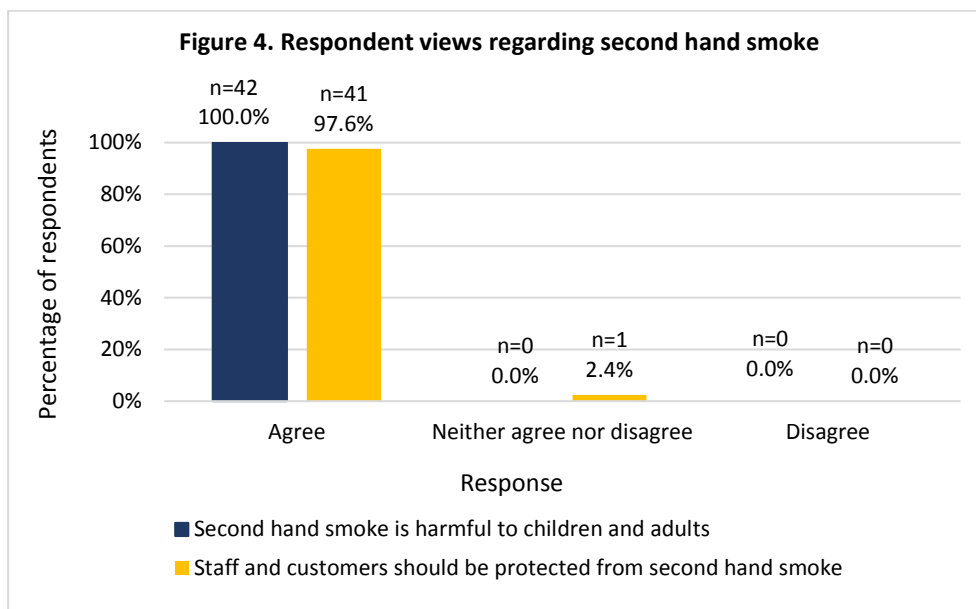
Most survey respondents (85.7%, n=36) were the manager and/or owner of the business (Figure 3). Other employees who completed the survey (14.3%, n=6) were delegated to do so on behalf of the business owner/manager.



## Views on, and prevalence of, smoking in the business environment

### Views regarding second hand smoke

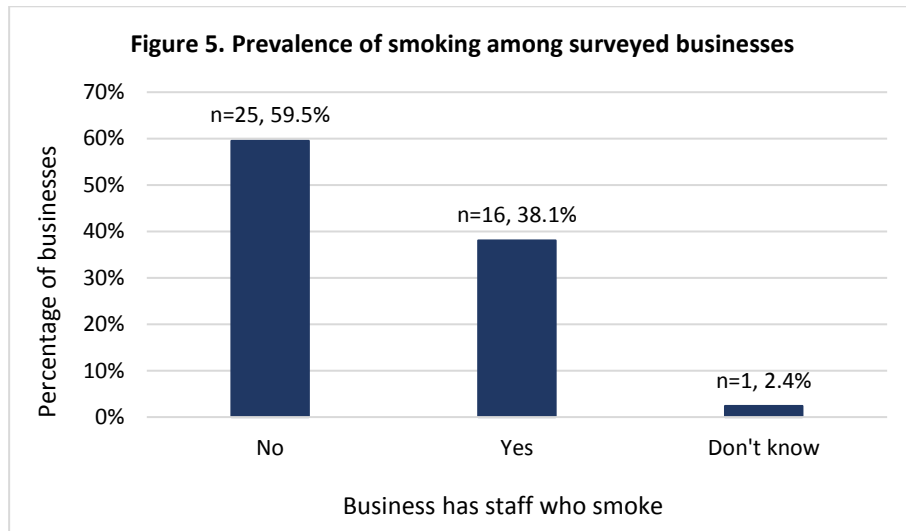
Respondents were asked whether they agreed that SHS is harmful to children and adults, and all respondents agreed with this statement (Figure 4). Respondents were also asked whether they agreed that staff and customers should be protected from SHS, and all respondents agreed with this statement except one, who neither agreed nor disagreed.



### Prevalence of staff smoking among businesses

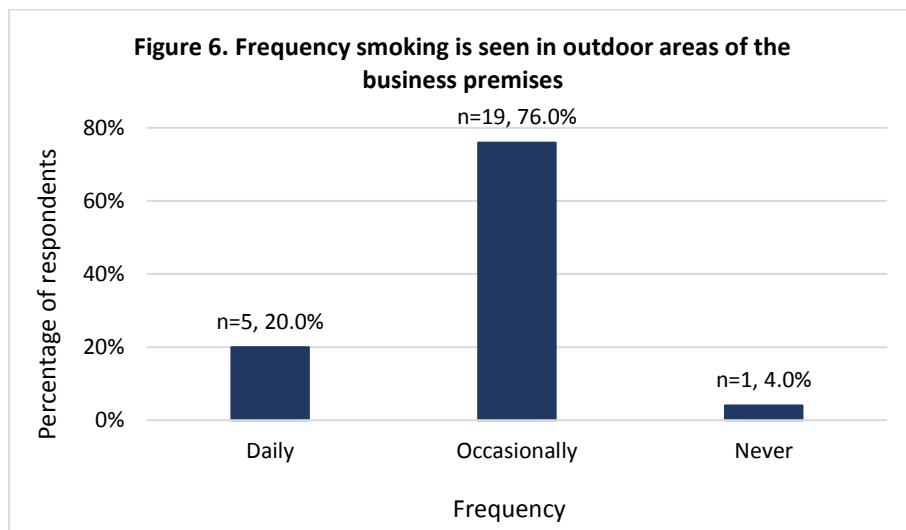
Just over one-third of businesses (38.1%, n=16) had staff (i.e. the respondent and/or other staff members) who were current smokers (Figure 5). Of the 16 businesses with current smokers,

almost half (43.8%, n=7) had staff who had mentioned that they would like to stop smoking, and the remainder (56.3%, n=9) had no staff who had mentioned that they would like to stop smoking.



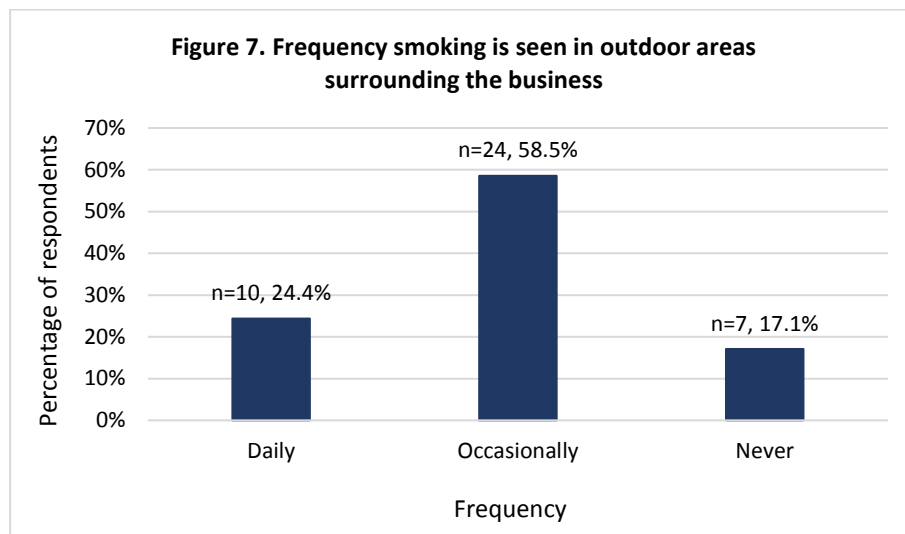
Smoking in business' outdoor areas, and in outdoor areas surrounding the business

Just over half of respondents (59.5%, n=25) stated that their business had an outdoor area (e.g. an outdoor dining area or deck/patio). Of those respondents, almost all (96.0%, n=24) saw people smoking in the outdoor areas - either daily or occasionally (Figure 6).



Many respondents (82.9%, n=34) saw people smoking in outdoor areas surrounding the business (e.g. footpaths and building entrances) - either daily or occasionally (Figure 7). Several

respondents (17.1%, n=7) never saw people smoking in outdoor areas surrounding the business. One respondent stated that there were no outdoor areas surrounding their business.



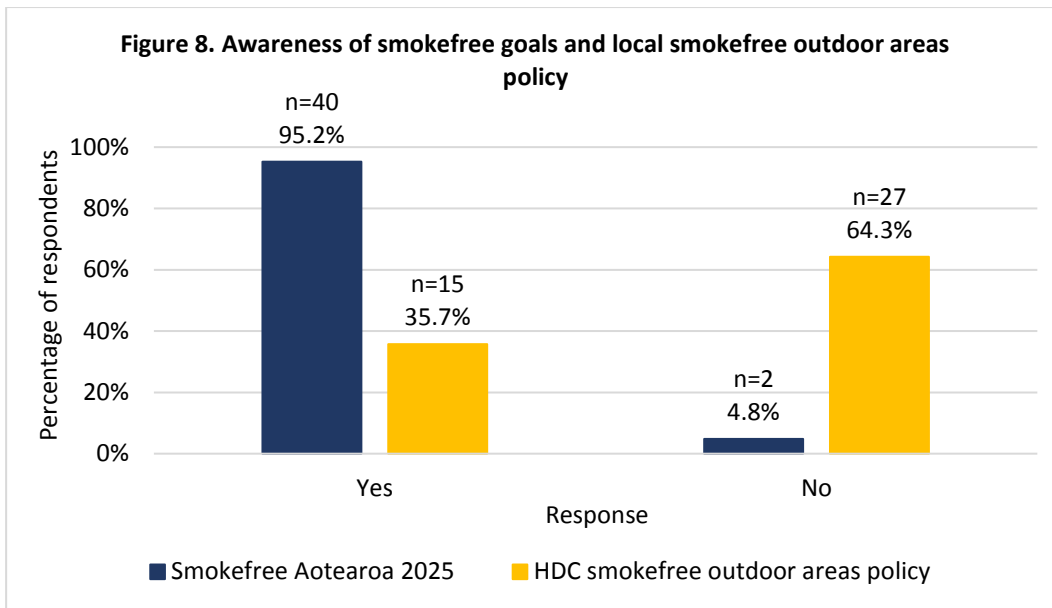
One-quarter of respondents (26.8%, n=11) stated that they, their staff, or customers, had expressed concern about people smoking in outdoor areas of the business, or other outdoor areas around the business premises. On the other hand, almost three-quarters of respondents (73.2%, n=30) were not concerned (or had not heard other staff express concern).

When asked how they had responded to concerns from staff and/or customers about people smoking in the outdoor areas of the business, or other outdoor areas around the business premises, 10 respondents provided a comment. They mentioned that they had asked people who were smoking to move away, go to a designated area, leave, or stop (n=5), closed the doors of the business to keep out the smoke (n=1), issued a cleaning fine (n=1), or done nothing (n=2). One respondent stated that they couldn't "do much about it", and another was considering making their property smokefree.

## Awareness of smokefree goals and local smokefree public places policies

Most respondents (95.2%, n=40) were aware of the Smokefree Aotearoa 2025 goal, however, fewer (35.7%, n=15) were aware that the HDC has a voluntary smokefree outdoor areas policy covering all Council-owned reserves including playgrounds and sports grounds.

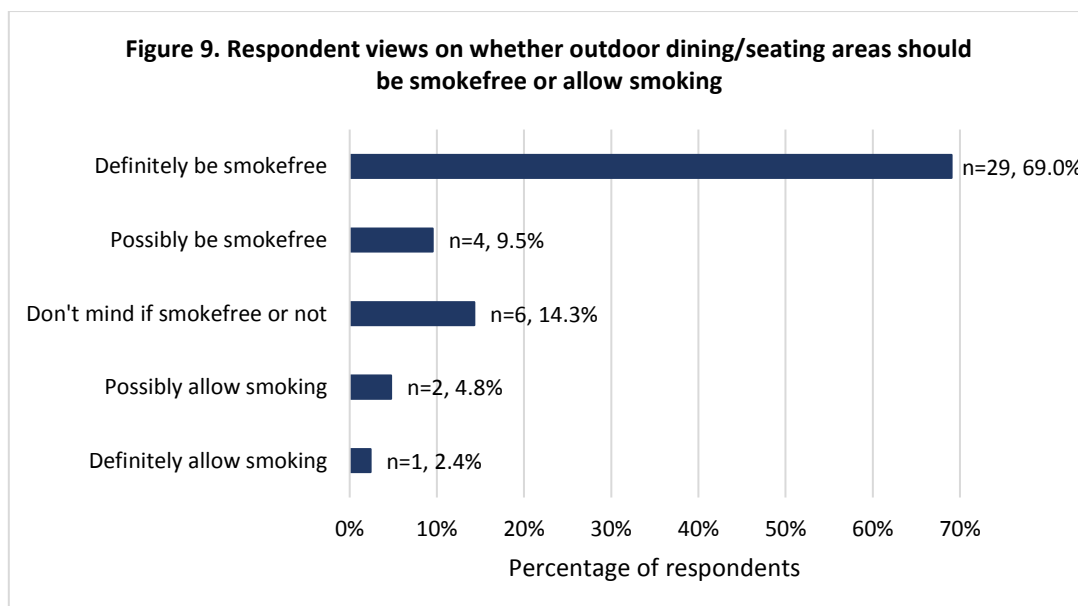




## Views on smokefree outdoor areas

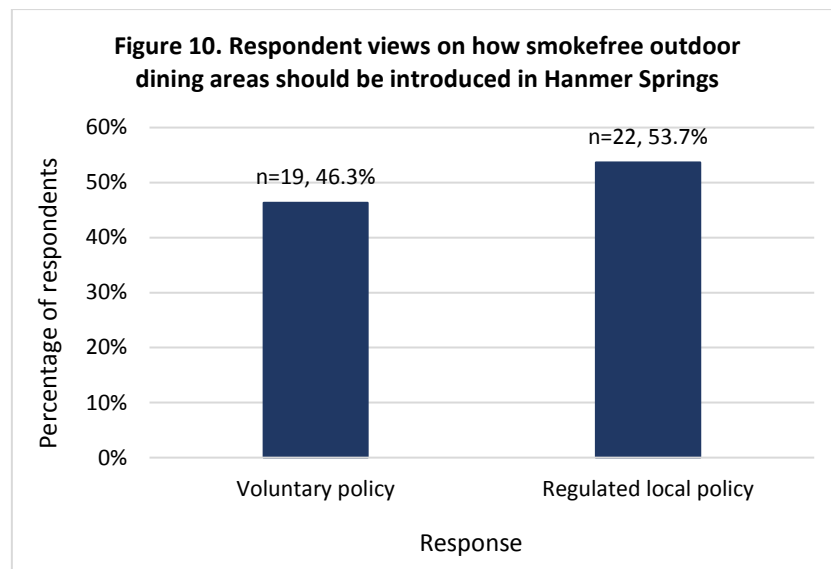
### Support for smokefree outdoor dining/seating areas

More than three-quarters of respondents (78.6%, n=33) thought that outdoor dining/seating areas should (definitely or possibly) be smokefree, while only three respondents (7.1%) thought that smoking should (definitely or possibly) be allowed in outdoor dining/seating areas (Figure 9). Six respondents (14.3%) did not mind either way.



Excluding the one respondent who thought that smoking should definitely be allowed in outdoor dining/seating areas, 46 percent of respondents (n=19) thought that smokefree outdoor dining areas

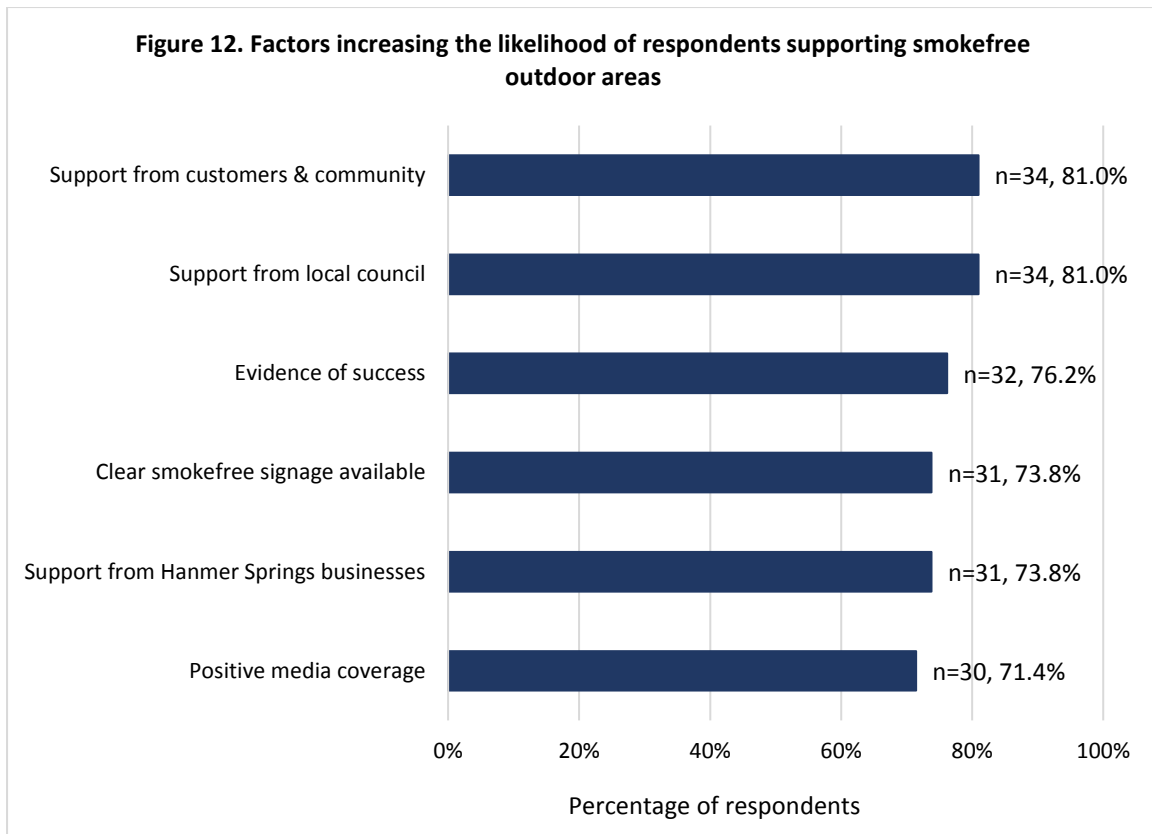
should be introduced using a voluntary policy where individual businesses can encourage their patrons not to smoke in outdoor dining areas (e.g. by displaying smokefree signs) (Figure 10). Just over half of respondents (53.7%, n=22) thought that smokefree outdoor dining areas should be introduced using a regulated local policy, where legislation requires all hospitality businesses to comply with a smokefree outdoor dining policy, which would be enforceable by a law or bylaw.



Of the eight respondents who had a food business with an outdoor area, half (50.0%, n=4) would consider introducing smokefree outdoor dining areas, and a further quarter (25.0%, n=2) might consider it. The remaining two respondents would not consider introducing smokefree outdoor dining areas at their business.

### Factors influencing decisions to support smokefree outdoor areas

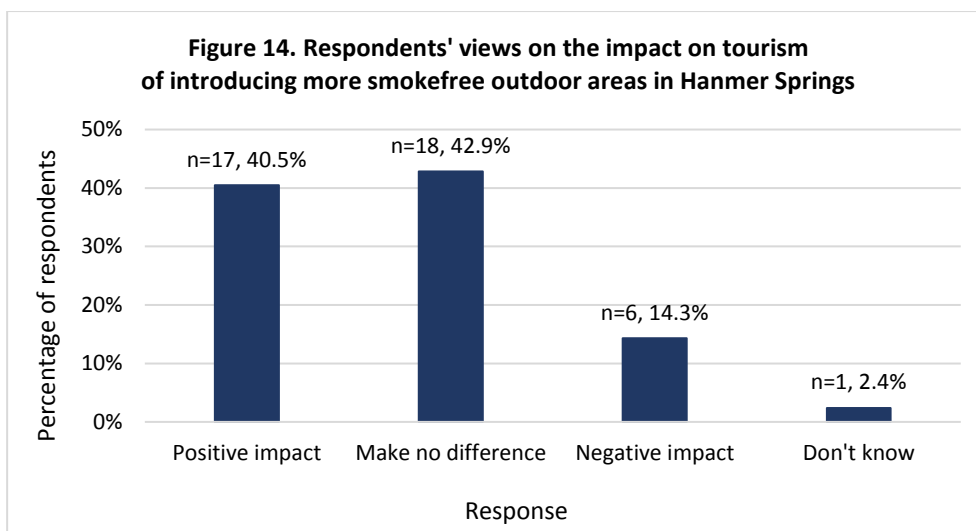
Respondents were asked about how several different factors might influence their decision to support (or not support) smokefree outdoor areas. The level of support among respondents for each factor was similar. Eighty-one percent of respondents stated that they would be more likely to support smokefree outdoor areas if there was support from customers, community, and local council (Figure 12). Approximately three-quarters of respondents stated that they would be more likely to support smokefree outdoor areas if there was evidence of success where smokefree outdoor areas were in place, clear smokefree signage made available to businesses, other businesses in Hanmer Springs supporting it too, and there was positive media coverage about smokefree outdoor areas.



## Views on tourism and smokefree outdoor areas in Hanmer Springs

### Potential impact on tourism in Hanmer Springs of introducing more smokefree outdoor areas

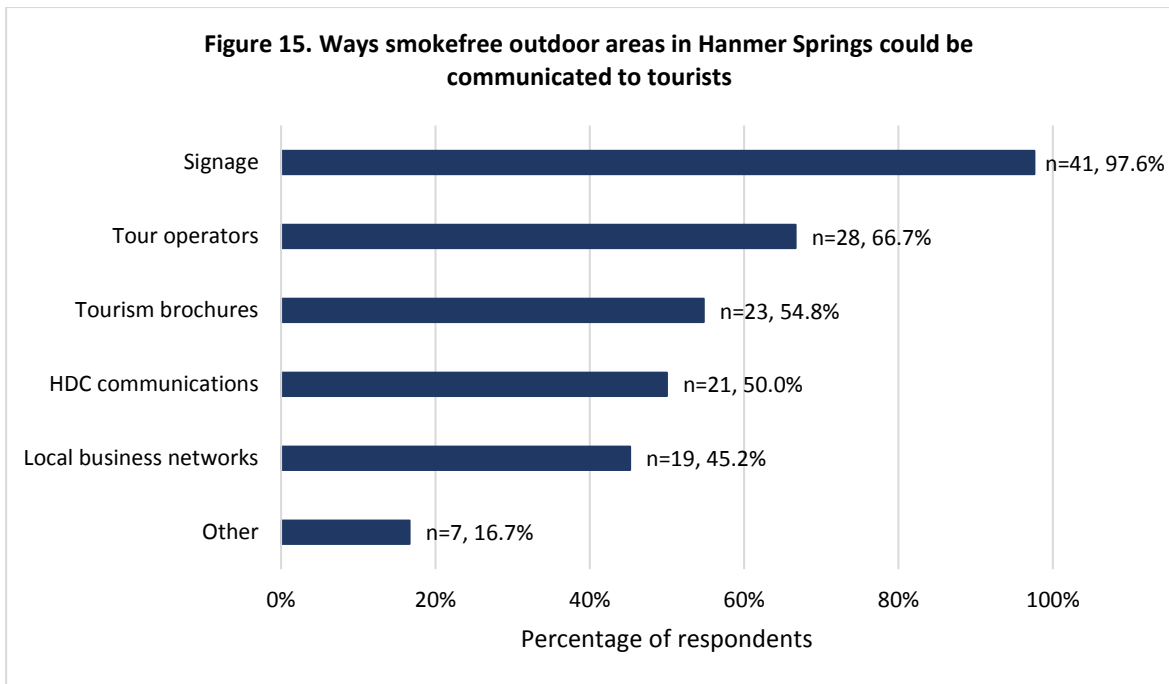
Respondents were asked what they thought the impact on tourism in Hanmer Springs would be if more smokefree outdoor areas were introduced. Approximately 40 percent of respondents (40.5%, n=17) thought that it would have a positive impact on tourism, and a similar number thought that it would have no difference on tourism (42.9%, n=18, Figure 14). A lower percentage of respondents (14.3%, n=6) thought it would have a negative impact, and one respondent (2.4%) did not know what impact making more outdoor areas smokefree would have on tourism in Hanmer Springs.



### Communicating smokefree outdoor areas to tourists

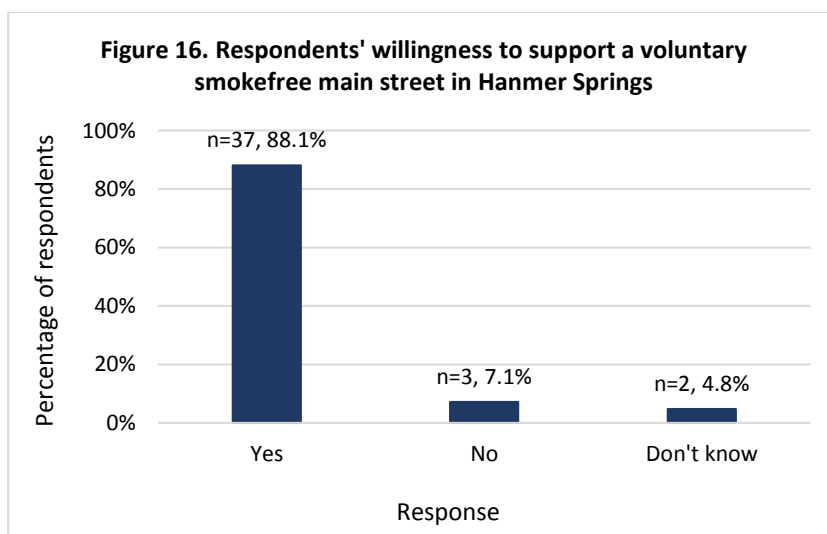
Sixty-two percent of respondents (n=26) felt that tourists understand what smokefree outdoor areas are, while just over one quarter (26.2%, n=11) thought that they did not. Five respondents (11.9%) were not sure if tourists understand what smokefree outdoor areas are.

Almost all respondents (97.6%, n=41) thought that signage could be used to communicate smokefree outdoor areas to tourists (Figure 15). Communicating to tourists via local business networks appears to be the least supported option among respondents. Other suggestions included communication via tourism websites, on entry into New Zealand, in holiday home compendia, and individual businesses (all n=1). Having signs and materials in different languages was also suggested (n=3).



### Support for a smokefree main street in Hanmer Springs

Most respondents (88.1%, n=37) stated that they would support a smokefree main street in Hanmer Springs on a voluntary basis (Figure 16). Three respondents (7.1%) would not support a smokefree main street, and a further two respondents (4.8%) did not know. Five respondents provided further comments, mentioning that it would not impact their business (n=1), and it “would be tricky” (n=1). While one respondent would support the smokefree area on a voluntary basis, two others preferred a regulated option as there is “no point” in having a voluntary policy.



## Discussion

The number of smokefree outdoor environments has grown significantly in New Zealand over the past five years largely through the adoption of smokefree outdoor areas policies by councils throughout the country. Advocacy by public health agencies and aligning the role of local authorities as “place shapers” to the Smokefree Aotearoa 2025 goal has seen large areas of recreational space, perimeters of public buildings, transport hubs, and other civic spaces designated smokefree.

The case for wider adoption of smokefree environments has been framed around strong public support, which consistently shows that policies to discourage smoking in public spaces are very acceptable in New Zealand (25, 29-38, 40, 42). This is especially the case with support for smokefree outdoor dining areas. However, in contrast with Australia where regulation has led to smokefree outdoor dining becoming much the norm, progress in New Zealand rests not so much with councils, but with individual hospitality venues choosing to become totally smokefree. This voluntary approach requires more engagement with local councils and the hospitality sector around the Smokefree Aotearoa 2025 goal and how it might resonate with business goals.

This survey explored business owner and managers’ attitudes to smokefree outdoor area policy in the popular tourist centre of Hammer Springs, North Canterbury. As a community with a well-established hospitality and recreation sector strongly reliant on tourism, the survey offered the opportunity to examine perceptions of how smokefree outdoor areas policies could impact on tourists. Around half of the respondents had outdoor areas as part of their business venue.

Encouragingly, the study demonstrates business owners and managers are aware of the harmful effects of SHS. All respondents agreed that SHS was harmful to adults and children, with only one stating they were undecided on the issue. The study identified that smoking continues to be a comparatively common sight in Hammer Springs, with almost all respondents observing either daily or occasional smoking in their business environments. More than a third of respondents indicated that they had staff who smoked.

Progressing toward Smokefree Aotearoa 2025 calls for tobacco use to be denormalised, with a clear role for those working in hospitality to help reduce the visibility and impact of smoking and SHS in outdoor settings. With more than 90 percent of respondents aware of the Smokefree Aotearoa 2025 goal, there are good grounds on which to start this dialogue, something that might be assisted by the fact that around half of the businesses who had staff who smoked reported that they had expressed a desire to quit.

In contrast with high awareness of the national goal, only around a third of respondents were aware that their local council (HDC) had a policy promoting smokefree recreational areas (Council-owned reserves including playgrounds and sports grounds). This is understandable given very limited promotion and the fact that smokefree signage has yet to be fully rolled out. A common feature of all voluntary smokefree policies is the challenge of raising awareness to the community and visitors. Most outdoor areas policies adopted by local councils to date have predominately focused on recreational settings, in particular playgrounds. Unless a council has chosen to implement smokefree bylaws or add clauses to prohibit smoking in their leased outdoor sites (and few have done this), awareness of a council's position on smoking may well be limited.

Although it can be said that most businesses do not appear engaged in any real smokefree promotion, the level of support for smokefree outdoor areas is high. Almost three-quarters of respondents believe venues offering outdoor dining/seating areas should definitely be smokefree, with a further 10 percent reporting they should possibly be smokefree. Factors that might prompt a venue to make this move were largely around having support from customers, the community, or local council. Similar numbers identified the value of clear signage. Arguably of more significance was the fact that three-quarters of respondents considered that deciding to go totally smokefree would be more likely if there was evidence of success, something that is hard to provide where adoption is patchy around the country. Despite this, the results suggest there is the potential to introduce smokefree outdoor areas, but the challenge will be how best to frame the approach to the business community.

In considering the logistics of introducing smokefree outdoor areas, respondents are evenly split on whether a voluntary or regulated solution should be used. Forty-six percent support voluntary policy, and 54 percent support a regulatory framework. This reflects the piecemeal way in which smokefree outdoor areas policy is evolving in New Zealand where very few councils have sought to develop bylaws individually, and businesses have shown their reluctance to move voluntarily. Although collectively through Local Government New Zealand, the member councils have strongly supported a remit requesting "that the Government develops and implements legislation to prohibit smoking outside cafes, restaurants and bars" (48), there is little sign this will be forthcoming. In the absence of central government regulation the only way in which wider adoption will occur is via voluntary initiatives.

But would such an initiative be good for Hanmer Springs, a town dependent on visitors from both overseas and elsewhere in New Zealand? Evidence from this study is encouraging with 83 percent of respondents believing that the introduction of smokefree outdoor areas would either make a

positive impact or no difference to business. Respondents considered that signage would best communicate the town's smokefree status to tourists alongside communication to business operators.

All 12 councils in the Canterbury West Coast region have some sort of smokefree policy for greenspace areas, and seven have formally supported the Smokefree Aotearoa 2025 goal. This progress is consistent with promoting healthy communities, a commonly identified vision for councils, and it is logical to consider how the concept of smokefree towns or streets are perceived. In this study where the main street represents the hub of the community, 88 percent of respondents were in favour of a smokefree main street. For advocates the challenge is how best this could be achieved. For a small community such as Hanmer Springs, if smokefree outdoor areas were to be embraced by most venues, signage discouraging smoking displayed and tourist promotions to include smokefree messages as part of the town's attractions, the desired outcome is quite achievable. This poses a challenge to advocates and agencies to take the findings of this study to progress discussions with local councils and more specifically secure the support of HDC and the Hanmer Springs community to make a smokefree main street a reality.



# Appendices

## Appendix A: Maps of the Hurunui District and Hanmer Springs

**Figure A1: Hurunui District**



Figure A2: Towns in the Hurunui District

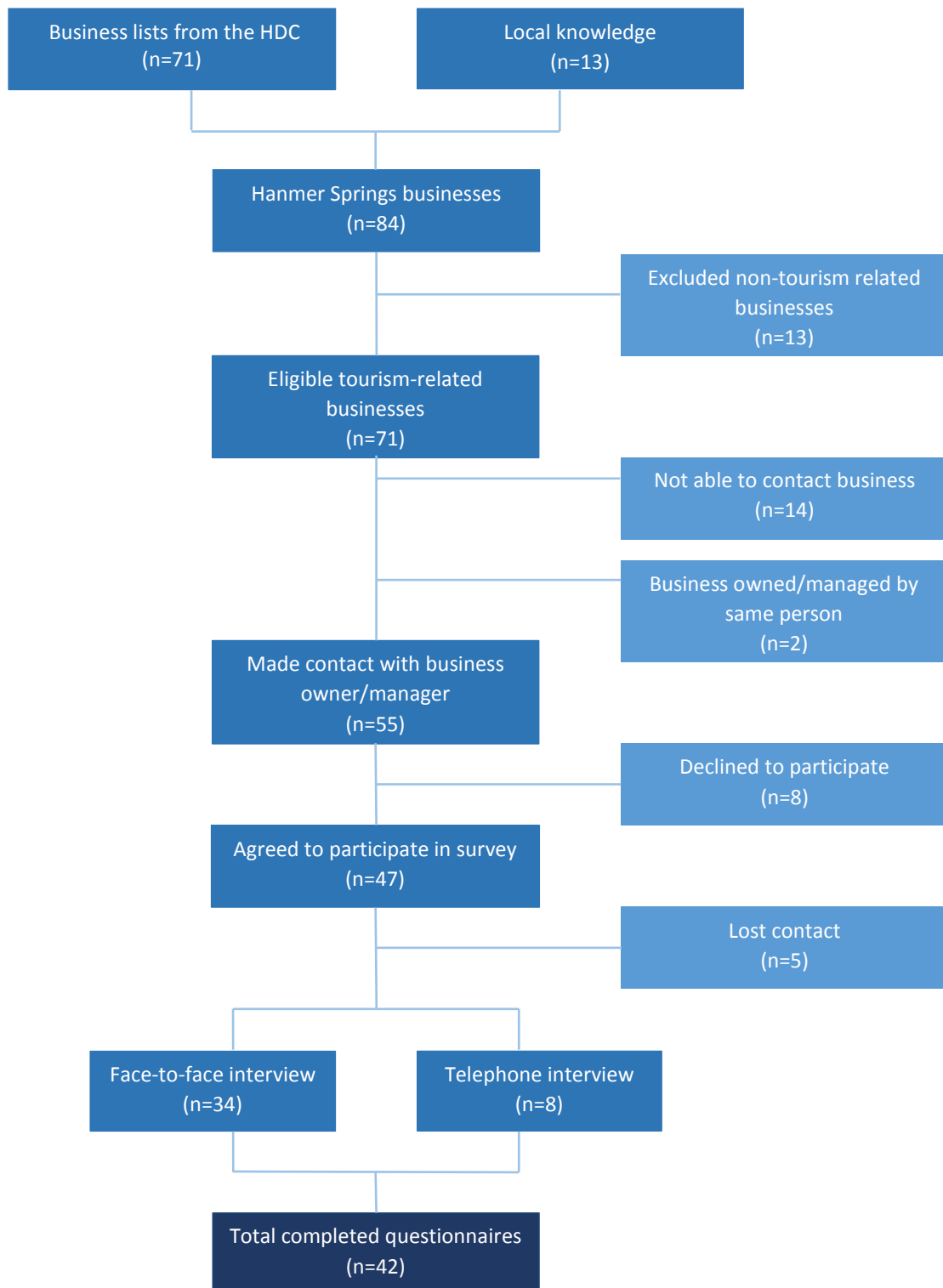


Figure A3: Hanmer Springs



## Appendix B: Sample recruitment process

**Figure B1: Flow chart summarising the sample recruitment process**



## Appendix C: Face-to-face and telephone survey questionnaire



### Hanmer Springs' business owner/managers' views on smokefree outdoor areas (2017)

\* 1. Business ID number

\* 2. Interviewer

- RS
- EB
- Other (please specify)

\* 3. Interview details

Date & time

DD	MM	YYYY	hh	mm	AM/PM
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>

\* 4. Interview completed

- In person
- By telephone

The Cancer Society is keen to hear the views of Hanmer Springs business owners and managers on smokefree environments.

Thank you for making time to have a chat with me - the survey should only take about 10 minutes. Your responses will be confidential.

Let me know if you need me to repeat any questions.

**\* 5. Type of business**

*Select as many as apply*

- Cafe
- Restaurant/Bistro
- Bar/Tavern/Club
- Accommodation provider (Hotel/Motel/Campground)
- Tour operator
- Entertainment provider
- Other (please specify)

**\* 6. What is your role within the business?**

*Select 1 response*

- Owner
- Manager
- Owner & Manager
- Other (please specify)

**\* 7. Is this business...?**

*Select 1 response*

- Independently owned
- A locally-owned franchise
- A regional or national chain
- A government-run business
- A community-run business
- Other (please specify)

\* 8. Does your business have a licence to sell, supply, or serve alcohol?

Select 1 response

- Yes
- No
- I don't know

\* 9. Does your business operate...?

Select 1 response

- Seasonally
- All year round

\* 10. For the next two questions, please tell me whether you agree, disagree, or neither agree nor disagree with the statements that I read.

	Agree	Neither agree nor disagree	Disagree
Second hand smoke is harmful to children and adults	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Staff and customers should be protected from second hand smoke	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

\* 11. Are you, or any of the staff here, currently smokers (as far as you know)?

Select 1 response

- Yes
- No
- I don't know
- I do not wish to answer

\* 12. Have any of the staff mentioned that they would like to stop smoking (including yourself, if you are a smoker)?

Select 1 response

- Yes
- No
- I do not wish to answer

\* **13.** How often do you see people smoking in...?

Select 1 response per row

	Daily	Occasionally	Never	Not applicable (i.e. no outdoor area)
the outdoor area of your business (for example, an outdoor dining area or deck/patio)?	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
any outdoor areas surrounding your business (for example, the footpath or building entrance)?	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

\* **14.** Have YOU, or any of the STAFF or CUSTOMERS, expressed concern about people smoking in any of these outdoor areas?

Select 1 response

- Yes
- No
- Not applicable (i.e. respondent answered "Not applicable" to BOTH questions above)

\* **15.** How did you respond to the concerns?

\* **16.** Are you aware that the New Zealand government has a goal of achieving a smokefree New Zealand by 2025?

Select 1 response

- Yes
- No

\* **17.** Are you aware that Hurunui District Council has a smokefree policy that covers playgrounds, parks, sports grounds, and outside entrances and exits of Council buildings?

Select 1 response

- Yes
- No



Increasing numbers of hospitality venues in New Zealand and overseas have introduced smokefree outdoor dining areas. We would like to hear your views on this.

\* **18.** In your opinion, do you feel that outdoor dining/seating areas should...?

Select 1 response

Definitely be smokefree	Possibly be smokefree	Don't really mind if smokefree or not	Possibly allow smoking	Definitely allow smoking
<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

\* **19.** If smokefree outdoor dining areas were to be introduced in Hanmer Springs, do you think they should be introduced via...?

Select 1 response

- Voluntary policy (where individual businesses encourage their patrons not to smoke in outdoor dining areas, for example, by displaying smokefree signs)
- Regulated local policy (where legislation requires all hospitality businesses to comply with a smokefree outdoor dining policy, which would be enforced by a bylaw)
- I don't know

Any other comments

\* **20.** What factors might influence your decision to support or not support more smokefree outdoor areas, including outdoor dining, in Hanmer Springs?

Any other comments

Select 1 response per factor

	Yes	No
Support from other businesses in Hanmer Springs	<input type="radio"/>	<input type="radio"/>
Support from customers and the community	<input type="radio"/>	<input type="radio"/>
Positive media coverage	<input type="radio"/>	<input type="radio"/>
Support from the local council	<input type="radio"/>	<input type="radio"/>
Evidence that smokefree outdoor areas have been successful elsewhere	<input type="radio"/>	<input type="radio"/>
Clear signage made available to businesses	<input type="radio"/>	<input type="radio"/>

Now I'll ask you about your views on how smokefree outdoor areas in Hanmer Springs might affect tourism.

\* **21.** What impact do you think having more smokefree outdoor areas in Hanmer Springs would have on tourism?

Select 1 response

Positive impact	It will not make a difference	Negative impact	I don't know
<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

\* **22.** In your experience, do tourists and visitors understand what smokefree outdoor areas are?

Select 1 response

- Yes
- No
- I don't know

\* **23.** How do you think smokefree outdoor areas in Hanmer Springs could be communicated to tourists and visitors?

Select as many as apply

- Signage
- Tourism brochure
- Through tour operators
- Local business networks
- Hurunui District Council communications
- Other (please specify)

Some towns and cities in New Zealand and overseas have introduced smokefree business areas and shopping streets.

\* **24.** If the main street of Hanmer Springs were to be promoted as smokefree on a voluntary basis, would you support this?

(This would mean that all outside areas like pedestrian footpaths and outdoor dining/patio areas would be smokefree and visitors/customers to choose not to smoke. This would be supported by smokefree signage. A voluntary smokefree trial would not be enforceable by law.)

Select 1 response

- Yes
- No
- I don't know

Further comments

\* **25.** Would you consider smokefree outdoor dining for your venue?

Select 1 response

- Yes
- Maybe
- No
- Not applicable (i.e. not a food-related business and/or does not have an outdoor dining/seating area)

\* **26.** Would you be interested in more information on how to introduce smokefree outdoor dining to your business?

Select 1 response

- Yes
- No

\* **27.** Would you like...?

	Yes	No
to receive the results of this survey once completed?	<input type="radio"/>	<input type="radio"/>
any further information about Smokefree Aotearoa 2025?	<input type="radio"/>	<input type="radio"/>

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