

Survey of business owner/managers' perceptions
of outdoor smokefree dining/seating areas:

Christchurch

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Survey and report prepared by:

Cancer Society, Canterbury-West Coast division

Information Team, Community & Public Health, Canterbury District Health Board

Executive summary

Background

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

Methods

A survey of managers/owners/representatives of café/restaurant/bar businesses in Christchurch was conducted. Of the 191 known eligible businesses contacted and invited to participate, 137 (71.7%) agreed and completed the questionnaire. Face-to-face or telephone interviews were conducted in February and March 2015 using a standardised questionnaire.

Main findings

Sixty one percent of respondents thought that outdoor dining/seating areas should (definitely or possibly) be smokefree. A similar percentage agreed that smokefree outdoor dining/seating should be introduced using a voluntary policy, and just over half agreed that it should be introduced using a law or bylaw. Just over half of respondents thought that having smokefree outdoor dining/seating areas would make no difference to the likelihood of people visiting their business, and a small number thought that it would make people more likely to visit.

More than 60% of respondents stated that they would be more likely to support smokefree outdoor dining if all other hospitality services throughout Christchurch supported it too, if there was public support for smokefree outdoor dining, and if there was evidence that businesses are not negatively affected where smokefree outdoor dining is in place.

Discussion

The survey findings indicate that there is sufficient support for smokefree outdoor dining/seating areas to justify further dialogue with the hospitality sector and the CCC.

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Introduction

Background

In March 2011 the New Zealand government endorsed the goal of Smokefree Aotearoa 2025 (1). Smokefree Aotearoa 2025 is not a ban; it is a commitment to reducing smoking to very low levels (less than 5% of the population) by 2025. Currently the prevalence of regular smoking in people aged 15 years and over is 15.1% in New Zealand, and 14.7% in the Christchurch City Territorial Authority (2).

The Smokefree Aotearoa 2025 goal requires the best possible support for those who want to quit smoking, and stronger protection for children against all exposure to tobacco and tobacco promotions. Increasing the number of public outdoor spaces in which smoking is discouraged will underpin the goal by reducing the visibility of smoking.

The Christchurch City Council (CCC) adopted a policy in 2009 to make all Council-owned parks, playgrounds and sports grounds, and Council-run events voluntarily smokefree (3). This policy is voluntary and not enforceable. The policy offers 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 (4).

All councils in the Canterbury-West Coast region have adopted similar policies designed to denormalise smoking in the community and reduce its appeal to children. 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.

Seventy percent of New Zealand local councils have policies promoting smokefree community spaces (5). Progress is now being made on extending policies to cover additional areas, for example smokefree shopping streets and outdoor dining in Palmerston North (6), smokefree housing stock and bus stops in Whangarei (7), and a plan over four years to introduce a variety of smokefree community spaces, in Auckland, including introducing outdoor dining in 2018 (8). Whilst great progress is being made in some areas, developments for smokefree outdoor dining are piecemeal.

The risks to public health from second hand smoke (SHS) have been well documented. Exposure to SHS has been linked to a number of health consequences such as lung cancer, coronary heart

disease, sudden infant death syndrome and stroke (9). In addition, children who are exposed to SHS experience more hospital admissions than children who are not exposed to SHS (10). 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 (11).

Drifting SHS can be a public health concern for both patrons and workers in settings where outdoor smoking is permitted, particularly when levels of smoking are high. A study from the United States indicated significant increases in tobacco smoke absorption by non-smokers following SHS exposure in the outdoor areas of bar and restaurant settings (12). Therefore, introducing smokefree outdoor dining/seating area policies for cafés, bars and restaurants could both decrease SHS exposure for staff and customers and denormalise smoking in these environments.

Whilst implementation of smokefree outdoor dining is fragmentary across New Zealand, public support for it remains high. Community perceptions of smokefree outdoor area policies are increasingly well documented within published literature, and have been analysed locally. A community survey with a convenience sample of 200 adult Christchurch residents in 2012 found that 74% of respondents supported smokefree outdoor dining areas, and 89% supported smokefree outdoor green spaces (parks, playgrounds and sports grounds) (13). Similarly, a recent telephone survey conducted in the Canterbury-West Coast region with 445 randomly-sampled participants to determine community views on smokefree community spaces indicated community support for smokefree outdoor areas (14). 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% of respondents stated that they would be more likely to patronise outdoor dining areas if they were smokefree, and 55% said a smokefree designation meant that their decision would be "just the same". Less than 3% 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 goal of a smokefree Aotearoa by 2025, and works collaboratively on a wide range of tobacco control initiatives. The Cancer Society has developed an advocacy strategy for all councils throughout the Canterbury-West Coast region to support extensions to current smokefree outdoor area policies, including a submission to the CCC 2014-2015 Annual Plan.

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) 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 two 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 (15). Approximately 43% 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 (mainly non-food) businesses on the main shopping street in Timaru indicated that most respondents saw people smoking in the outdoor areas surrounding the business premises daily, and reported that a small number of staff and customers had expressed concern about people smoking in these areas (16). More than half of respondents (55%) said that they would consider participating in a trial for 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.

As the Timaru survey included mostly retail businesses, there is a need to better understand the views of the hospitality industry specifically on smokefree outdoor dining/seating areas. This is particularly relevant in Christchurch, given the post-earthquake context of the rebuild including the development of more hospitality service businesses.

Research aim

The aim of this research project was to obtain current information on the views of Christchurch café/restaurant/bar business owner/manager's regarding smoking, smokefree policy and smokefree outdoor areas (community spaces). This information will assist advocacy with the CCC 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 dining within the wider Smokefree Aotearoa 2025 goal.

Methods

A survey of managers/owners/representatives of café/restaurant/bar businesses in Christchurch was conducted to gauge their views on smoking, smokefree policies, and smokefree outdoor areas (community spaces and dining/seating areas).

Sample selection

A list of all licensed food outlets (as of 19 December 2014, n=1,901), and alcohol outlets (as of 23 December 2014, n=867) was requested by the Cancer Society from the CCC. These two lists were merged, and this single list (n=2,768) was scrutinised to remove:

- duplicate records (i.e. food outlets that were also alcohol outlets)
- businesses that were not cafés, restaurants or bars (for example, supermarkets, dairies, cinemas, off-licence liquor stores, petrol stations, and bakeries), and
- businesses on Banks Peninsula (due to limited time and resources to visit these locations).

Businesses were excluded on the basis of the business name, address, local knowledge, and alcohol outlet type codes (e.g. bistro, supermarket, hotel, entertainment) included in the lists obtained from the CCC. After excluding these non-relevant businesses (n=2,030), the total number of businesses was 738. This number may have included some non-relevant businesses that could not be established as such using the identifiers listed above, but eligibility was ascertained during subsequent contact with businesses by telephone.

Lists provided by the CCC did not include any contact names or telephone numbers, and all contact details were established by Cancer Society volunteers for the purposes of sourcing further information on each business and contacting businesses to assess their eligibility and willingness to participate in the survey. Telephone calls were made to businesses from the list (n=738) in a random order, using a random number generator in Microsoft Excel (2013). Businesses were telephoned, and if contact could not be made after three calls, the businesses were not pursued any further (in the interests of time). On contact it was determined from discussion with a staff member whether the business was a café, restaurant or bar with an outdoor dining/seating area for patrons (i.e. eligible to participate). If this was the case, the volunteer requested to speak to the business owner or manager (if not doing so already), who was invited to participate in the survey. Sometimes it took several telephone calls to be able to speak to the business owner or manager once eligibility was confirmed, and some of these return telephone calls were conducted during the survey

implementation period, to try to recruit as many businesses as possible. A specific time for an interview at a later date was made with those agreeing to participate. Businesses known not to have an outdoor dining/seating area (using local knowledge) were not telephoned. See the accompanying flowchart for a description of the sample recruitment process (Figure A1, Appendix A).

Guidelines were supplied to volunteers and staff conducting telephone calls to businesses to aid efficiency, and to ensure that a consistent message was promoted on behalf of Cancer Society Canterbury–West Coast Division (Guidelines B1 and B2, Appendix B).

Questionnaire development

The questionnaire was drafted by the Cancer Society's Health Promotion team and reviewed by Community & Public Health (CPH). Most questions were based on a questionnaire used in a previous survey of businesses in Timaru (16). The questionnaire was pilot tested with a café business in Christchurch (not involved in the survey) by the Cancer Society prior to conducting the survey. This provided a means to test the feasibility of the questionnaire, and the practical aspects of the survey process for interviewers. The questionnaire was found to be easy to follow and able to be completed within ten minutes. This timeframe was agreed to be reasonable given that the nature of hospitality services mean that managers/owners may have little time to spare. A copy of the final questionnaire used in the survey is provided in Appendix C.

Volunteer recruitment and training

Cancer Society staff members (n=2) and volunteers (n=10) were recruited to telephone businesses, and conduct the interviews. An appeal letter (Appendix D) was developed by the Healthy Policy Advocate at the Cancer Society and utilised by the Volunteer Co-ordinator to recruit volunteers. This letter was also used to recruit volunteers via an online volunteer recruitment website (Seek Volunteer, <https://seekvolunteer.co.nz/>), and shared with Christchurch Polytechnic Institute of Technology (CPIT). The volunteer pool consisted of five existing Cancer Society volunteers, two volunteers via CPIT, one internship student from the University of Canterbury, one volunteer via Seek Volunteer, and one volunteer who made direct contact with the Cancer Society.

Interviewers were provided with background information on Smokefree Aotearoa 2025 (Appendix E), briefed on interview techniques (Appendix F), and attended a training session conducted by Cancer Society Health Promotion staff prior to the start of surveying. Volunteers were allocated

businesses to survey on a day-to-day basis throughout the week beginning 16 February, whilst also conducting telephone calls to businesses where an interview time had not yet been secured.

Survey implementation

Interviews were scheduled between 16 February and 6 March 2015. Interviews that could not be conducted in person were completed on the telephone. During the interview the interviewer followed the questionnaire format (Appendix B) with the respondent and recorded their responses on paper forms. Questionnaires were labelled with individual identification codes to allow anonymous data entry and analysis. Identification codes also enabled the return of surveys from different volunteers to be monitored.

Data entry and analysis

Questionnaires were returned to the Cancer Society Christchurch office, and checked to ensure that all were accounted for. Data entry volunteers were briefed by the Health Promotion Manager on how to code the questionnaire responses in accordance with an agreed format supplied by CPH. Data were entered into a template (Microsoft Excel 2013) developed by CPH.

Once data entry was completed, the Cancer Society Healthy Policy Advocate and Database Support Analyst checked the data for inconsistencies. The data were then submitted to 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 and/or tables. 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.

To investigate whether the views of business owner/managers were associated with the nature of the business, some questions (where it was considered relevant) were analysed by:

- business type – i.e. bar (n=34) versus cafés and restaurants combined (n=97)
- alcohol licence status – i.e. businesses that had an alcohol licence (n=98) versus businesses that did not have an alcohol licence (n=32)

- business ownership status – i.e. independent (n=120) versus franchise and chain businesses combined (n=16)
- smoking status of staff – i.e. businesses where the respondent and/or other staff were current smokers (n=101) versus businesses where the respondent and/or other staff were not current smokers (n=30), or
- business owner/manager awareness of the voluntary CCC smokefree outdoor areas policy covering all parks, playgrounds, sports grounds and council events – i.e. business owner/manager aware of policy (n=120) versus not aware of policy (n=17).

Due to the relatively small sample size, and the low number of responses in some categories, data were dichotomised and Fisher's Exact Test (2-sided) was used to compare categories statistically. Due to these small numbers, it is recognised that the findings should be viewed with caution.

Where respondents were asked to provide comments, these qualitative responses were analysed by identifying and grouping the main themes. Respondents often addressed several themes within a single comment, therefore when summed, the number of respondents (n) mentioning each theme sometimes exceeds the total number of respondents.

The locations of all participating businesses were plotted on a map to visualise the geographical distribution of the survey sample. An address validation geocoding programme (eSAM Wrapper, Community & Public Health, CDHB) was used to establish the geographical co-ordinates of each business using the street addresses provided by the CCC. These data were then imported into an online Geographic Information System (Map Machine, Community & Public Health, CDHB) to produce maps.

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 (17). The study is also considered low-risk as the survey is confidential, anonymous, and those invited could decline to participate or answer any particular question if they wished.

Survey limitations

The current survey has some limitations. Some businesses (n=84) could not be contacted at all, meaning that it was not possible to determine whether these businesses had an outdoor

dining/seating area, and whether they were therefore eligible to take part in the survey (Figure A1). In some cases, businesses were contacted and determined to be eligible to participate, however it was not possible to speak to the business owner/managers to invite them to participate (n=118). Further, approximately 28% of those invited to participate, declined (n=53). 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 (18, 19) to the whole population of café/restaurant/bar businesses with outdoor dining/seating areas in Christchurch, and therefore, the survey findings should be interpreted with this in mind.

Findings

Survey response

In total, 84 businesses could not be contacted at all, 118 owner/managers of eligible businesses could not be contacted further, 53 of those invited to participate declined, and one business owner/manager who agreed to participate could not complete the questionnaire due to language difficulties (i.e. minimum response rate¹ = 34.9%) (Figure A1, Appendix A). Of the 191 owner/managers of eligible businesses with outdoor dining/seating areas contacted and invited to participate in the survey, 137 completed a questionnaire (i.e. minimum co-operation rate² = 71.7%) (20).

Interviews were conducted between 16 February and 5 March 2015 (however the interview date was not recorded for 2 interviews). The majority of interviews (n=128) were conducted within a single fortnight (16-27 February 2015). Interviews took place predominantly on weekdays (n=132), although three interviews were conducted on the weekend. Interviews occurred mostly during business hours (between 9:00am and 4:30pm, n=104), with four conducted after 5:00pm. Just over half of interviews (57.8%, n=78) were conducted face-to-face, and 42.2% (n=52) were conducted over the telephone.

Participating businesses were located across Christchurch (Figure G1, Appendix G). The suburbs with the greatest number of participating businesses were Christchurch Central, Addington, Riccarton, Sydenham, and Sumner (Table G1, Appendix G), which are areas that tend to have the greatest density of hospitality venues in the city.

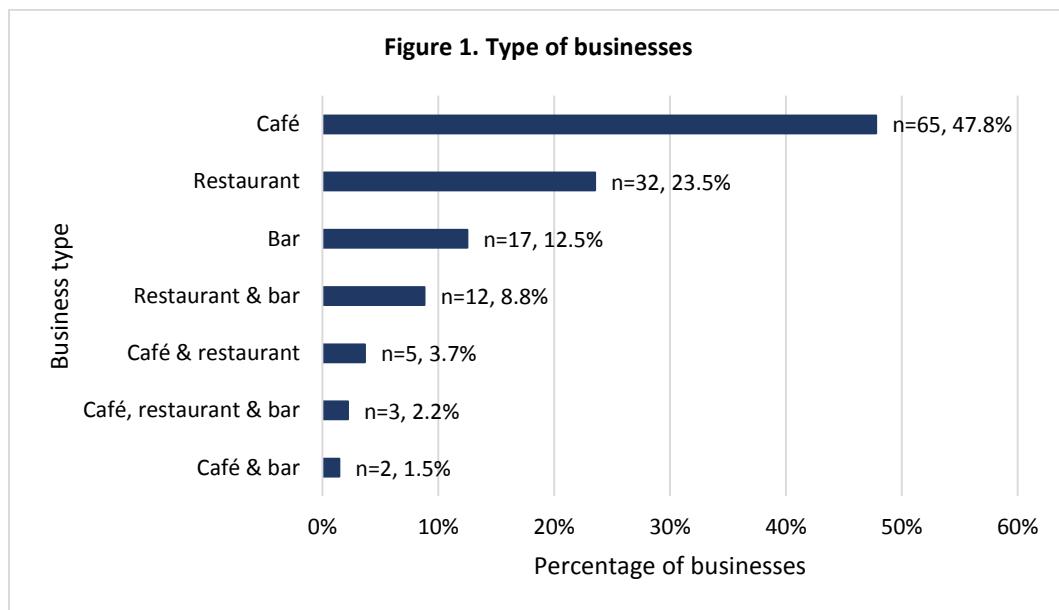
Characteristics of businesses

Most businesses responding were cafés or restaurants (47.8% and 23.5%, respectively), while the remaining businesses were bars (12.5%), or a combination of café, restaurant and/or bar (Figure 1). Three quarters of responding businesses (75.4%, n=98) were licensed to sell/serve alcohol, while the

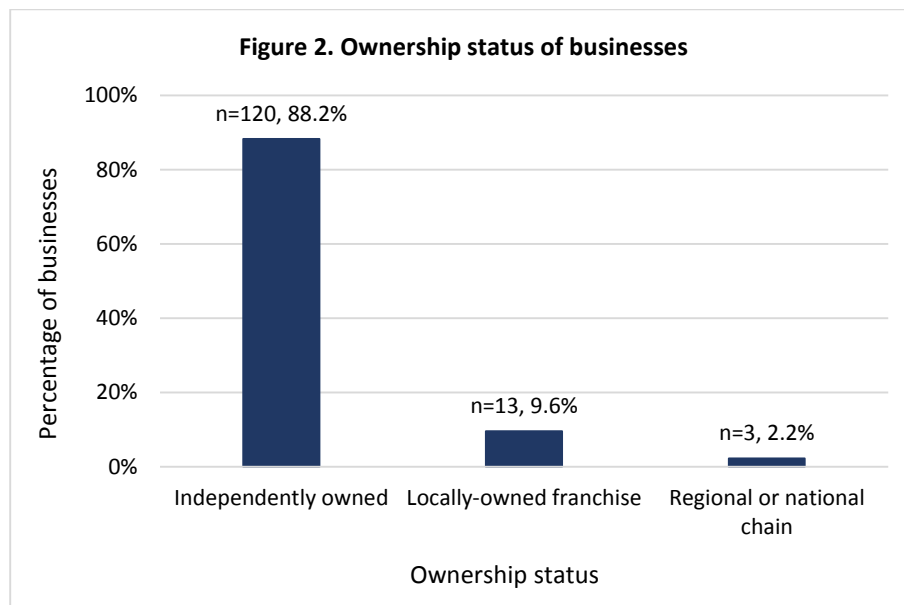
¹ Minimum **response rate** is defined as the number of completed interviews divided by the number of interviews (complete plus incomplete) plus the number of non-interviews (declined plus non-contacts) plus all cases of unknown eligibility (20). In this survey, response rate = $137 \div (137 + 1 + 53 + 118 + 84)$

² Minimum **co-operation rate** is defined as the number of completed interviews divided by the number of all eligible businesses contacted (20). In this survey, co-operation rate = $137 \div 191$

remaining quarter (24.6%, n=32) were not.

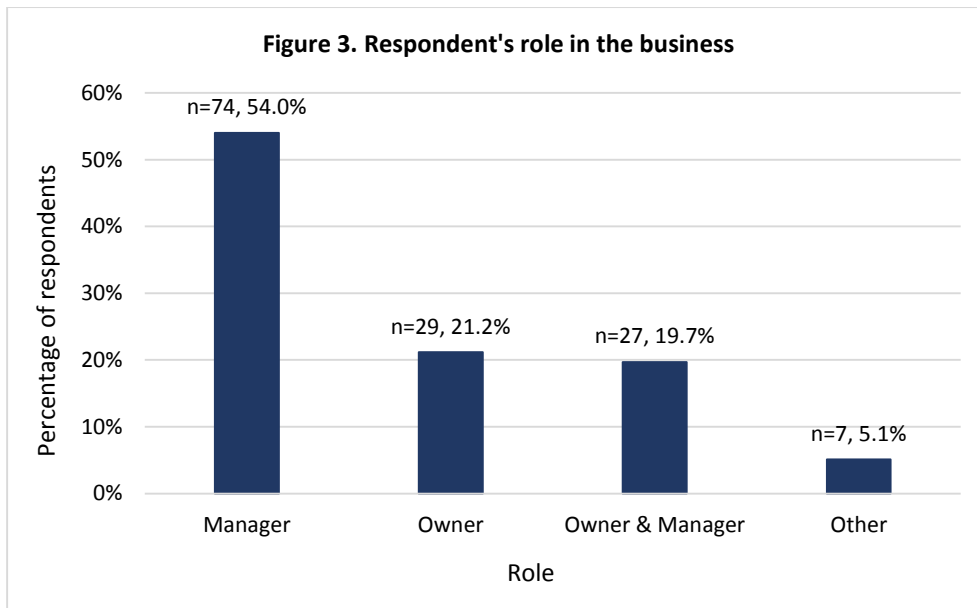


Most businesses (88.2%) responding were independently owned, and approximately 12% were a locally-owned franchise or part of a regional or national chain (Figure 2).



Characteristics of respondents

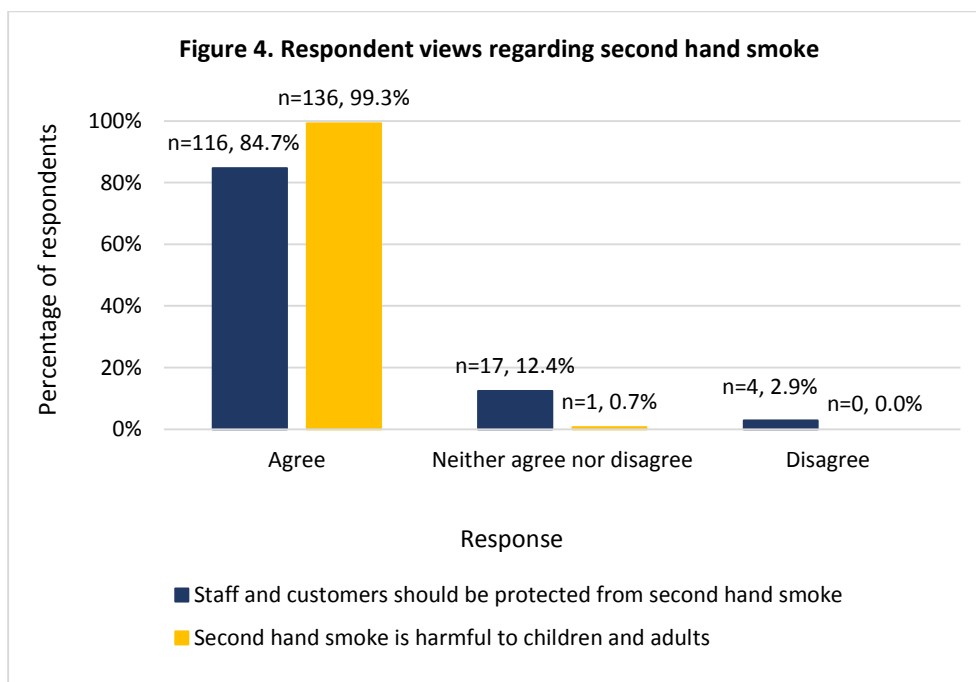
Most survey respondents (94.9%, n=130) were the manager and/or owner of the business (Figure 3). Other employees who were delegated by the business owner/manager to participate in the survey (n=7) fulfilled a variety of roles (e.g. duty manager, shift manager, director, general manager, operations manager).



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

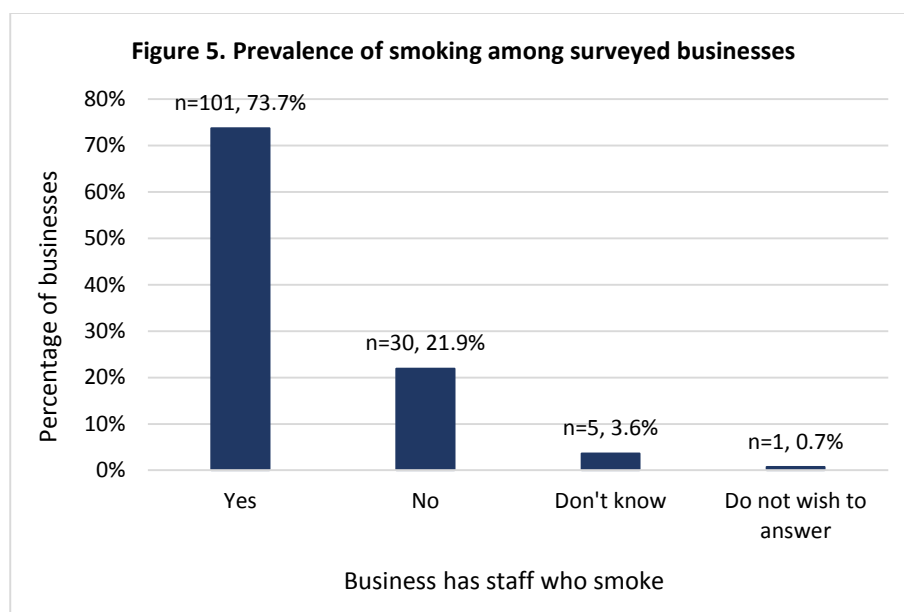
Views regarding second hand smoke

Respondents were asked whether they agreed that staff and customers should be protected from second hand smoke, and most respondents (84.7%) agreed with this statement (Figure 4). Few people disagreed with this statement (2.9%). Respondents were also asked whether they agreed that second hand smoke is harmful to children and adults. All respondents agreed with this statement except one, who neither agreed nor disagreed (Figure 4).



Prevalence of staff smoking among businesses

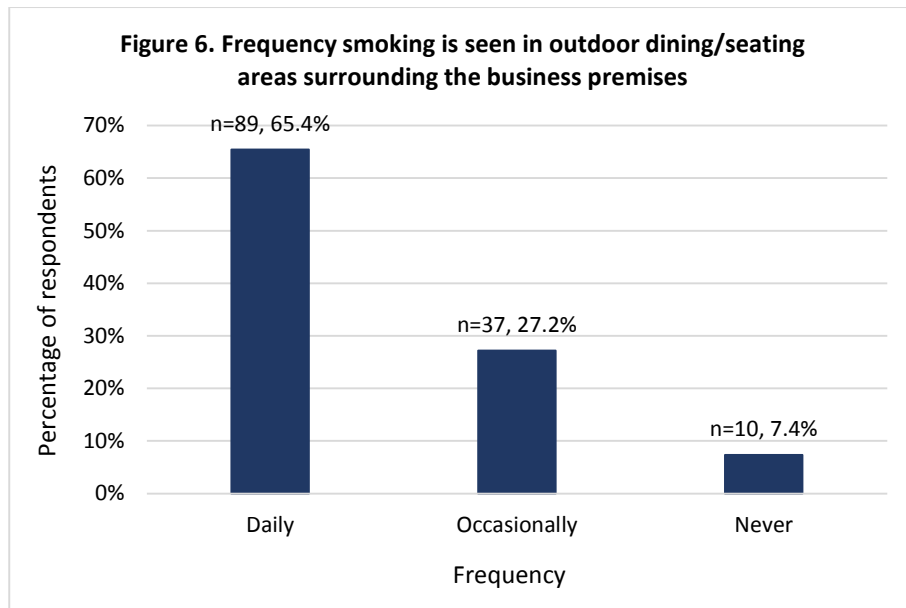
Almost three quarters of businesses (73.7%) had staff (i.e. the respondent and/or other staff members) who were current smokers (Figure 5). There was a statistically significant association between whether or not a business had staff who were current smokers and business type ($p=0.005$), and alcohol licence status ($p=0.001$). A higher percentage of bars had staff who were current smokers, and a lower percentage of bars had non-smokers, compared to cafés/restaurants (Table H1, Appendix H). Similarly, a higher percentage of licensed premises had staff who were current smokers, and a lower percentage had non-smokers, compared to premises that were not licensed to sell/serve alcohol (Table H2).



Of those businesses with current smokers, just over half (58.4%, $n=59$) had staff who had mentioned that they would like to stop smoking, and more than a third (37.6%, $n=38$) had staff who had not mentioned that they would like to stop smoking. For the remaining businesses (4.0%, $n=4$), the respondent did not know whether any staff had mentioned that they would like to stop smoking.

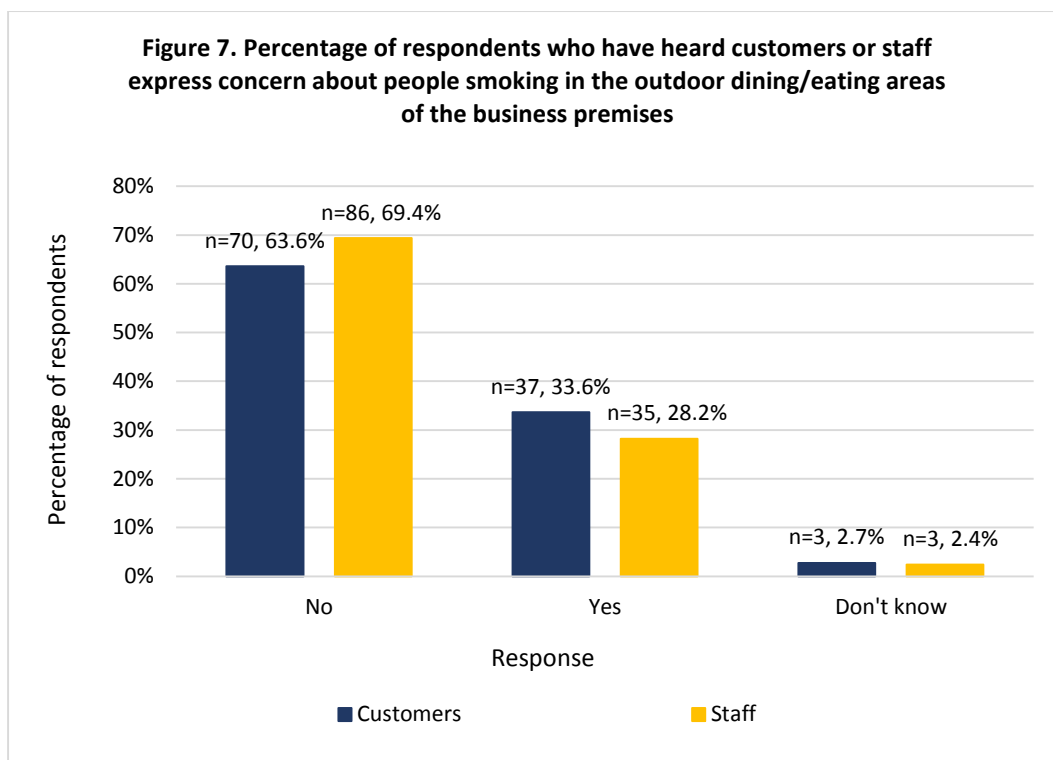
Smoking in outdoor dining/seating areas surrounding the business

Almost two thirds of respondents (65.4%) saw people smoking in the outdoor dining/seating areas of their business daily, and a further 27.2% saw people smoking in these areas occasionally (Figure 6). Of the ten businesses where the respondent never saw people smoking in the outdoor dining/seating areas, nine were cafés and one was a restaurant.



Of those respondents who saw people smoking in outdoor areas around the business premises (daily or occasionally, n=126), more than one quarter (28.2%) expressed concern (or had heard other staff express concern) about people smoking in those areas (Figure 7). On the other hand, 69.4% of respondents were not concerned (or had not heard other staff express concern). There was a statistically significant association between business type and whether or not respondents expressed concern (or had heard other staff express concern) about people smoking in those areas ($p=0.013$, Table H1). A lower percentage of respondents (or staff) from bars had expressed concern about people smoking in outdoor areas, and a higher percentage had not expressed concern, compared to cafés/restaurants. There was no significant association between alcohol licence status and whether or not respondents/staff expressed concern about people smoking in outdoor areas around the business premises ($p=1.000$, Table H2).

One third of respondents (33.6%) reported that customers had expressed concern about people smoking in outdoor areas surrounding their business; however the majority (63.6%) had not (Figure 7). There was no statistically significant association between whether or not respondents reported that customers had expressed concern about people smoking in these outdoor areas and business type ($p=0.493$, Table H1), or alcohol licence status ($p=0.127$, Table H2).



When asked how they had responded to concerns from staff and/or customers about people smoking in the outdoor areas surrounding the business premises, respondents (n=36) mentioned that they had previously asked people who were smoking to move away (n=10), closed the doors/windows of the business to keep out the smoke (n=7), agreed/empathised with the concerned individual (n=4), moved concerned customers inside (n=4), and asked smokers to stop smoking (n=3). One respondent stated that they had replied to concerns by pointing out that smokers have a right to be smoking in the outdoor area.

Knowledge and views regarding smokefree goals and local smokefree public places policies

Smokefree Aotearoa 2025

Many respondents (87.6%, n=120) were aware of the Smokefree Aotearoa 2025 goal, while 12.4% had not heard of it (n=17). There was no statistically significant association between whether or not respondents were aware of the Smokefree Aotearoa 2025 goal and business type (i.e. bar versus café/restaurant, $p=0.1000$, Table H1). However, there was a statistically significant association between Smokefree Aotearoa 2025 goal awareness and alcohol licence status ($p=0.033$). A higher percentage of respondents from licensed premises reported being aware of the goal, and a lower percentage were not aware of the goal, compared to premises

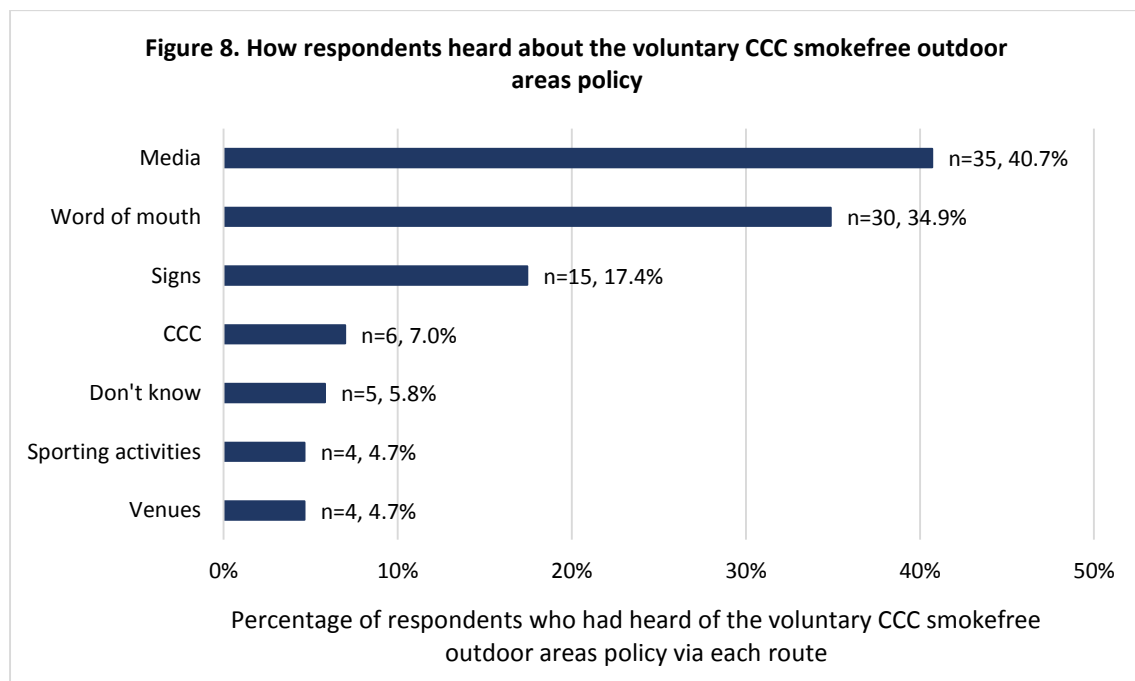
that were not licensed to sell/serve alcohol (Table H2).

CCC voluntary smokefree outdoor areas policy

Almost two thirds of respondents (64.2%, n=88) were aware that the CCC has a voluntary smokefree outdoor areas policy covering all parks, playgrounds, sports grounds, and council events.

Conversely, 35.8% (n=49) of respondents were not aware of the policy. There was no statistically significant association between whether or not respondents were aware of the CCC smokefree outdoor areas policy and business type (bar versus café/restaurant, $p=0.221$, Table H1). However, there was a statistically significant association between awareness of the policy and alcohol licence status ($p=0.033$). A higher percentage of respondents from licensed premises reported being aware of the policy, and a lower percentage were not aware of the policy, compared to premises that were not licensed to sell/serve alcohol (Table H2).

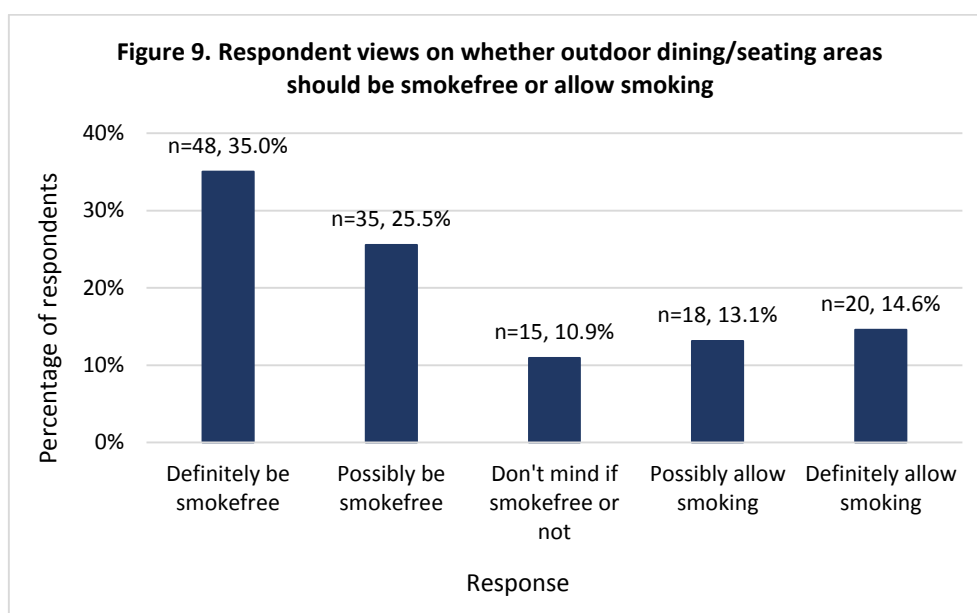
Of those who were aware of the policy (n=88), most respondents had heard about it via local media (e.g. newspaper, radio), word of mouth, and smokefree signage (Figure 8). A smaller number of respondents had heard about the policy via the CCC (e.g. letters, announcements, events), sporting activities, or specific venues (e.g. hospital, doctor's surgery). Some respondents reported that they had heard about the policy via multiple routes.



Views on smokefree outdoor dining/seating areas

Support for smokefree outdoor dining/seating areas

Sixty one percent of respondents (n=83) thought that outdoor dining/seating areas should (definitely or possibly) be smokefree, while 28% (n=38) thought that smoking should (definitely or possibly) be allowed in outdoor dining/seating areas (Figure 9). Almost 11% of respondents did not mind either way.



There was no statistically significant association between whether respondents thought that outdoor dining/seating areas should (definitely or possibly) be smokefree or (definitely or possibly) allow smoking and:

- Business type (p=0.165, Table H1).
- Alcohol licence status (p=0.345, Table H2).
- Business ownership status (p=0.763). Overall, 69.2% of respondents from independently owned businesses (n=74) thought that outdoor dining/seating areas should definitely or possibly be smokefree, as did 64.3% of respondents from franchise/chain businesses (n=9). On the other hand, 30.8% of respondents from independently owned businesses (n=33) thought that outdoor dining/seating areas should definitely or possibly allow smoking, as did 35.7% of respondents from franchise/chain businesses (n=5).
- Smoking status of respondent/staff (p=0.168). Overall, 63.2% of respondents from businesses with current smokers (n=55) thought that outdoor dining/seating areas should definitely or possibly be smokefree, as did 78.6% of respondents from businesses with no current smokers

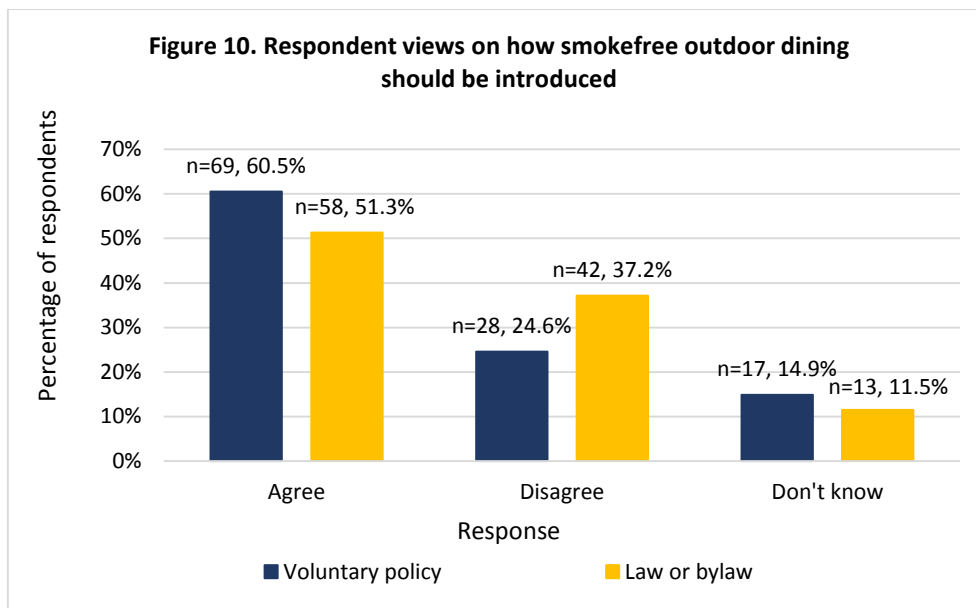
(n=22). On the other hand, 36.8% of respondents from businesses with current smokers (n=32) thought that outdoor dining/seating areas should definitely or possibly allow smoking, as did 21.4% of respondents from businesses with no current smokers (n=6).

- Awareness of CCC smokefree outdoor areas policies (p=0.837). In detail, 69.6% of respondents who were aware of the policies (n=55) thought that outdoor dining/seating areas should definitely or possibly be smokefree, as did 66.7% of respondents who were not aware of the policies (n=28). Meanwhile, 30.4% of respondents who were aware of the policies (n=24) thought that outdoor dining/seating areas should definitely or possibly allow smoking, as did 33.3% of respondents who were not aware of the policies (n=14).

Views on how a smokefree outdoor dining/seating area policy could be introduced

Excluding those who thought that smoking should definitely be allowed in outdoor dining/seating areas (n=20), almost 60% of respondents agreed that smokefree outdoor dining should be introduced using a voluntary policy where individual businesses can encourage their patrons not to smoke in outdoor dining areas (for example, by displaying smokefree signs) (Figure 10). There was no statistically significant association between respondents' views on whether smokefree outdoor dining should be introduced using a voluntary policy and business type (p=0.786, Table H1), or alcohol licence status (p=0.614, Table H2).

Just over half of respondents (excluding 20 respondents who thought that smoking should definitely be allowed in outdoor dining/seating areas) agreed that smokefree outdoor dining should be introduced using a law or bylaw, where all hospitality businesses must comply with a smokefree outdoor dining policy (Figure 10). There was a statistically significant association between business type and whether respondents agreed or disagreed that smokefree outdoor dining should be introduced using a law or bylaw (p=0.048, Table H1). Respondents from 38.1% of bars (n=8) agreed that smokefree outdoor dining should be introduced using a law or bylaw, compared to 63.3% of cafés/restaurants (n=50). Conversely, respondents from 61.9% of bars (n=13) disagreed that smokefree outdoor dining should be introduced using a law or bylaw, compared to 36.7% of cafés/restaurants (n=29). There was no significant association for alcohol licence status (p=1.000, Table H2).

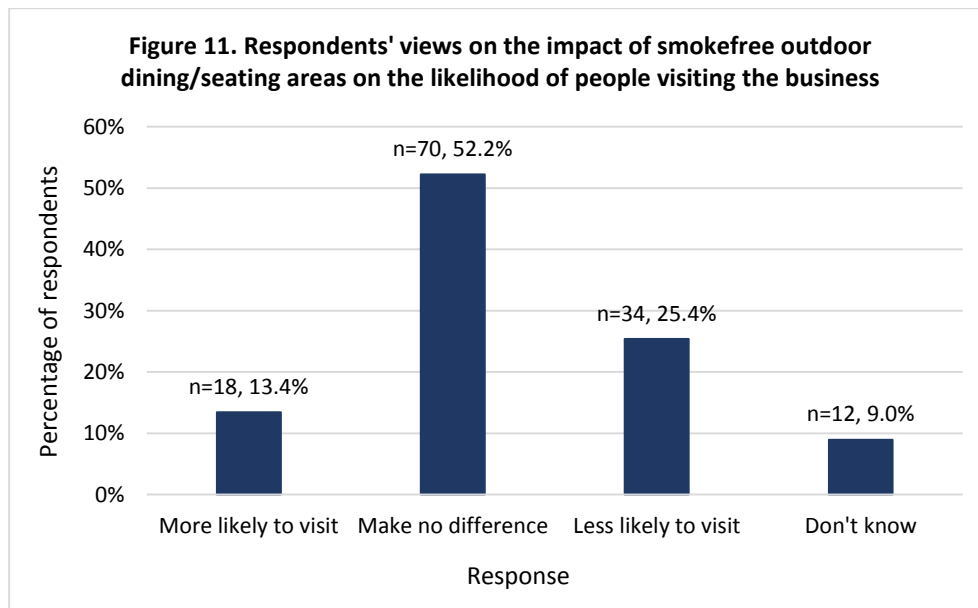


Fifty respondents provided additional comments on how smokefree outdoor dining could be introduced. Eighteen respondents brought up the role of a law or bylaw regarding smokefree outdoor dining/seating areas, and many mentioned that for a policy to work it would need to be enforceable as voluntary policies are “hard to police”, and the same rules need to apply to all hospitality businesses. Using a “slow” approach was suggested – transitioning from a voluntary smokefree outdoor area policy to a law/bylaw over a period of time (n=5). Almost half of respondents (n=25) mentioned “designating” smokefree outdoor dining areas, and where this was further explained suggestions included having separate outdoor areas for smoking and non-smoking (where possible), partitions between smoking and non-smoking areas, and implementing smokefree outdoor areas during the day. Three respondents felt that any change would need to be accompanied by advertisements (e.g. on television), and similarly a further three respondents felt that signage to alert patrons would be necessary. One respondent suggested removing ashtrays from outdoor areas to make smoking more difficult for customers.

Potential impact on business of introducing smokefree outdoor dining/seating areas

Respondents were asked whether making any outdoor dining/seating areas of their business smokefree would make people more or less likely to visit their business. Just over half of respondents (52.2%) thought that it would make no difference to the likelihood of people visiting their business (Figure 11). One quarter of respondents thought that having smokefree outdoor areas would make people less likely to visit, and 13.4% thought that it would make people more likely to visit their business. Twelve respondents (9.0%) did not know what impact making any outdoor dining/seating areas of their business smokefree would have on the likelihood of people visiting their

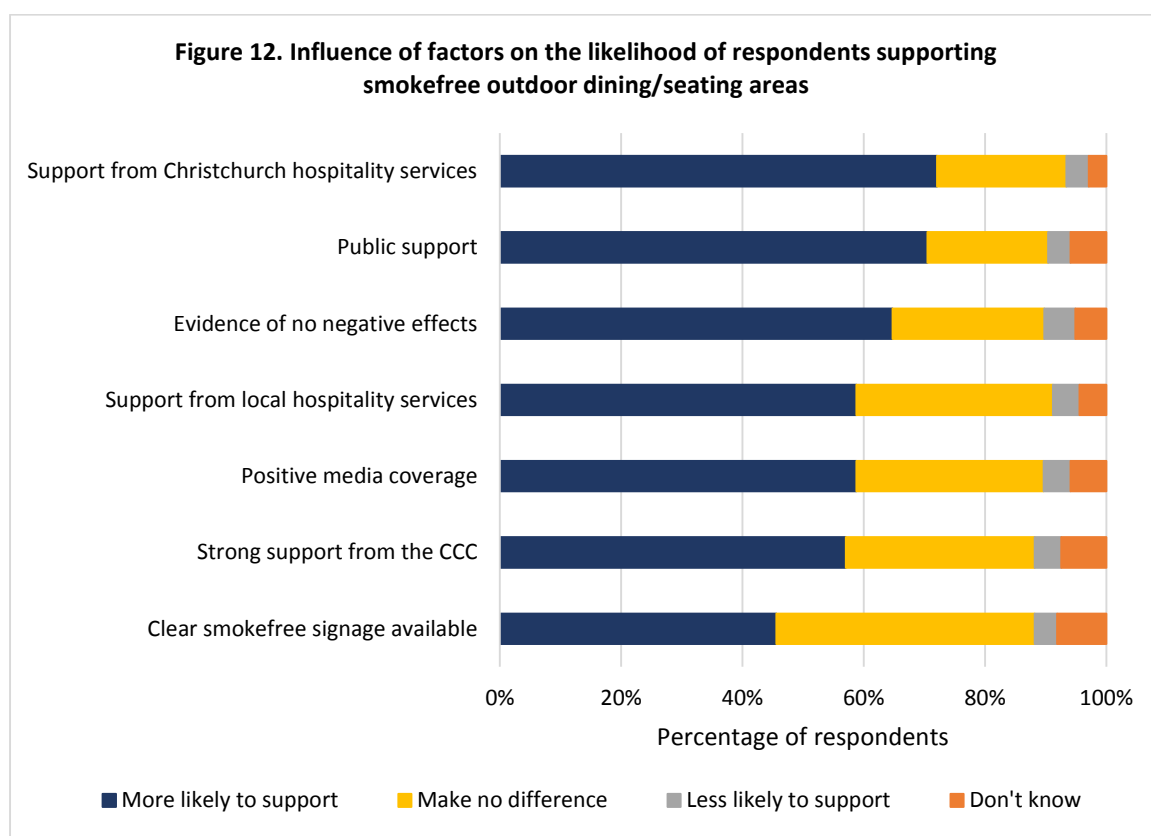
business. There was no statistically significant association between business type (bar versus café/restaurant) and whether respondents thought that making any outdoor areas smokefree would make people more or less likely to visit their business ($p=0.104$, Table H1). However, there was a statistically significant association for licence status ($p=0.046$), where a lower percentage of respondents from licensed premises thought that smokefree outdoor dining would make people more likely to visit (or make no difference), and a higher percentage thought that people would be less likely to visit, compared to premises that were not licensed to sell/serve alcohol (Table H2).



Forty three respondents provided additional comments on the potential impact of smokefree outdoor dining/seating areas on their business. Some respondents ($n=23$) expanded further on their belief that a smokefree outdoor areas policy would have a negative impact on their business. In particular, respondents reported, that patronage may decrease (especially bar patrons), revenue may decrease, staffing “cuts” may result, and that patrons could develop negative perceptions of the business. On the other hand, fourteen respondents highlighted the positive impacts that smokefree outdoor dining policies could have on their business, including more people using the outdoor dining areas as diners prefer smokefree environments whilst eating, encouraging more families to visit, and providing a “healthy environment” for patrons. A similar number of respondents ($n=13$) reiterated that they thought that a smokefree policy would have little impact on their current business, and two of these respondents stated that this was because their businesses were already “mainly” smokefree. Five respondents mentioned that only a small proportion of their customers smoke, so few people would be affected. One respondent stated that they preferred the current smokefree indoor policy.

Factors influencing decisions to support smokefree outdoor dining/seating areas

Respondents were asked about how several different factors might influence their decision to support (or not support) smokefree outdoor dining/seating areas. More than 60% of respondents stated that they would be more likely to support smokefree outdoor dining if: all other hospitality services throughout Christchurch supported it too, there was public support for smokefree outdoor dining, and there was evidence that businesses are not negatively affected where smokefree outdoor dining is in place (Figure 12, Table H3). A slightly lower percentage of respondents (57-59%) stated that they would be more likely to support smokefree outdoor dining if: all other hospitality services in their locality supported it too, there was positive media coverage about smokefree outdoor dining, and there was strong support from the CCC. Fewer respondents (45.6%) felt that having clear smokefree signage made available to businesses would make them more likely to support smokefree outdoor dining.



Finally, participants were asked whether they had any further comments about factors that would influence their decision to support smokefree outdoor dining/seating areas. Sixteen respondents expanded further on the factors mentioned above, including support from patrons and the awareness among the general public (n=5), signage (n=2) and international evidence of benefits to

business (n=1). Eight respondents stated that they would be more likely to support smokefree outdoor dining/seating areas via a law or bylaw as it meant that all other businesses would also be implementing smokefree outdoor dining.

General comments related to smokefree outdoor dining/seating areas

In response to the previous questions asking for comments, some respondents did not specifically answer the question posed, but instead provided more general comments about smokefree outdoor dining/seating areas. These responses have been collated below to provide a wider understanding of respondents' views.

Ten respondents mentioned that within the outdoor dining/seating area of their business, some parts are currently designated smoking areas (e.g. tables that are furthest away from the door), while other parts are designated smokefree. One respondent stated that they had already implemented a smokefree outdoor areas policy for their business.

Some respondents mentioned issues related to the enforcement of smokefree outdoor dining areas, such as the difficulty in implementing a voluntary policy (n=13), and that to have a "level playing field" all businesses would need to implement a smokefree policy at the same time otherwise patrons will go to a neighbouring venue where smoking outdoors is allowed (n=15).

Fourteen respondents also touched on the ideas of smoking being an individual choice, the "nanny state" discriminating against smokers, and that "smokers have nowhere else to go". The right of businesses to decide on their own smoking policies was also mentioned by two respondents.

Five respondents felt that the introduction of smokefree outdoor dining area policies was inevitable, and smokefree outdoor dining will happen "sooner or later" as more people will want smokefree areas as time goes on. The same number of respondents (n=5) felt that the sooner smokefree outdoor dining areas were introduced, "the better".

Discussion

Smokefree community spaces are now an established part of many local authority policies with the majority of local New Zealand councils having adopted policies covering recreational green space over the past five years. Surveys suggest there is significant public support for creating more smokefree community spaces, which resonates with national and international published literature. With all twelve councils in the Canterbury-West Coast region having adopted policies and a number of these policies due for review, local smokefree coalitions have opportunities to engage council staff and elected members in considering future direction.

Of particular interest is the prospect of smokefree outdoor dining, which has been consistently identified by the public as desirable. There remains the challenge of engaging both councils and the hospitality industry around the business case - in short, what is the likely impact of smokefree outdoor dining on profit? Whilst this business case can be presented using overseas literature (see Appendix I for a brief description of several case studies from Australia), to date advocacy in Canterbury lacks local research to support the framing of any discussion. A survey carried out in Timaru in 2014 by the Cancer Society with Community and Public Health offered the first insight into the views of businesses around tobacco use (16). This work suggested a possible synergy of views between consumer support for smokefree outdoor dining and business willingness to discuss the issues further.

This study was designed to build on the work done in Timaru, specifically focusing only on businesses offering outdoor dining/seating areas, and offers some valuable indications as to how tobacco is perceived in a specific setting. Overall, the findings of the present survey suggested that within the hospitality sector, tobacco is seen as a public health issue with most respondents believing SHS to be harmful to health and that staff and customers alike should be protected. Particularly notable is the prevalence of smoking amongst hospitality workers, where almost three quarters of businesses had staff who were current smokers. Almost as many businesses (65%) reported seeing customers smoking in the outdoor areas of their businesses daily. Although levels of concern expressed by both staff and customers regarding smoking are acknowledged as low, these findings still offer an excellent basis on which to frame further extensions to current smokefree community spaces ten years after bars and restaurants became smokefree by law (21).

Over the past decade, there have been further significant steps toward reducing the impact of tobacco, culminating in the Government's endorsement for Smokefree Aotearoa by 2025 (1). Increasing public awareness of this goal is important and it is encouraging that most business

owner/managers (88%) confirmed they had heard of Smokefree Aotearoa 2025, as this awareness will assist with the ongoing dialogue that will be required with the commercial sector. Allied to this, almost two thirds of businesses were aware that the CCC had a policy promoting smokefree outdoor areas - the majority as a result of media or word of mouth. This contrasts with only 17% of respondents citing awareness from council signage - often seen in the literature as the most important way of communicating this type of policy.

Building on this, the study findings indicate that the majority of businesses would be prepared at the least to consider the issue of smokefree outdoor dining further. With 35% of respondents affirming that outdoor dining should definitely be smokefree (the most frequent response) and a further 25% suggesting they should possibly be smokefree, it is suggested that there is sufficient scope to explore options with the business sector further. Less than 15% of businesses thought smoking should definitely be permitted outside hospitality venues, with a similar number feeling smoking should possibly be allowed. Taken overall, the signs are positive.

Combining these views with the perceived impacts on footfall to venues, reinforces the grounds for optimism. With slightly more than 50% of respondents feeling that smokefree status would make no difference at all to the likelihood of people visiting their business and a further 13% envisaging them more likely to patronise, the synergy between the views of customers and businesses, as noted above, is strengthened. One quarter of respondents considered that being totally smokefree would be negative for business. When asked what factors would influence a decision to support any policy, respondents cited having a uniform policy across the city, evidence of impact on businesses, and public support. Combined with support from the CCC and from within the hospitality industry, together with good media coverage, these factors all suggest the potential to engage more businesses positively.

In framing the case for smokefree outdoor dining, the means of achieving any policy requires very careful consideration. In contrast to Australia where smokefree community spaces including outdoor dining have been achieved through bylaws (Appendix I), to date councils in New Zealand have shown preference for voluntary adoption. Whilst this has facilitated the promotion of much recreational space as smokefree, extensions to outdoor dining – often close to pedestrian walkways - does require consideration of regulatory options. Although any bylaw runs the risk of being seen as overly hard on smokers or a manifestation of a “nanny state”, it can be suggested that regulation will be required to create “a level playing field”. Against this concern, it is interesting to observe that slightly more than half of those interviewed supported some form of law. Although it is noted that support was greater amongst non-licensed premises than amongst licensed bars and restaurants. Whether

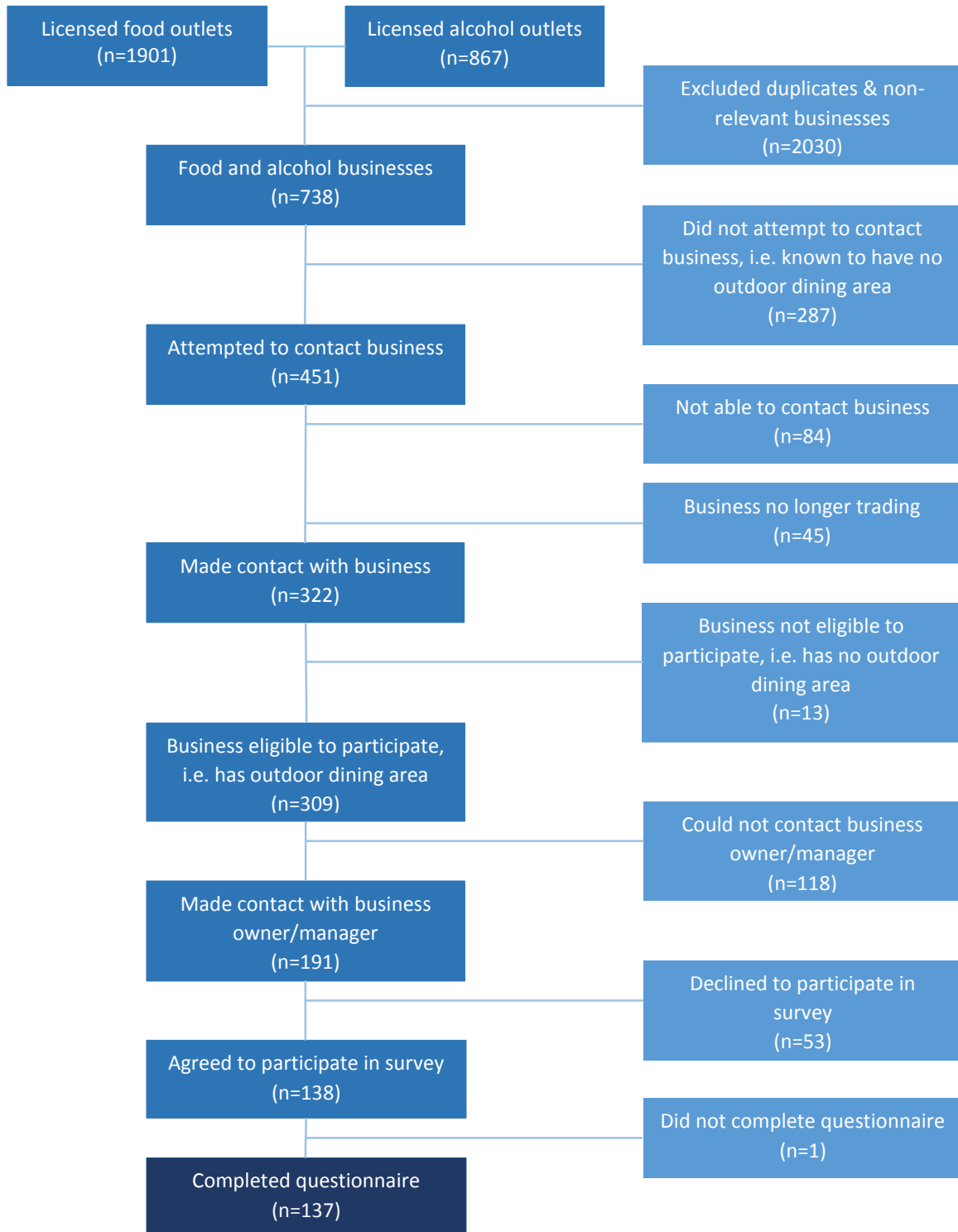
this can be attributed to the amount of regulation licensed premises already have to comply with can only be speculated on.

In conclusion, it is entirely reasonable that businesses might be cautious around any notion of a smokefree outdoor dining policy. In Christchurch, more than any other town or city in New Zealand, the need to nurture business confidence in the newly developing central business district is wholly understood. However evidence suggests businesses should be reassured rather than concerned (22). Indeed, businesses promoted as smokefree venues or trading in a smokefree area may well benefit by extra footfall. Bringing the views of both the community and business together on this issue underpins any consideration by a council on extending smokefree policy. Over the next few years Christchurch aims to be a very “liveable city” (23), one it can be suggested will be enhanced by a smokefree status. The challenge for agencies such as the Cancer Society remains how to unite this aim with the views of both community and business around the goal of a smokefree Aotearoa by 2025.

Appendices

Appendix A: Sample recruitment process

Figure A1: Flow chart summarising the sample recruitment process



Appendix B: Telephone guidelines for volunteers

Guideline B1: Volunteer script for telephoning business

To ensure that no bias is given within our contact process volunteers and staff calling businesses must start with the lowest number on their contact list and work through to the highest number. If you reach a business that has no outdoor dining simply skip this and go on to the next number in the list. Once you have got through all businesses on your list go back to the start and try calling any businesses that did not pick up on the first time around. If you call back three times (varying the time you call) with no pick up please make a note that you could not contact that particular business.

Please note that busy times for hospitality services are likely to be 12-1.30 so please avoid calling at these times.

Please read through the script as it is written as it will naturally lead you to gain the information we need.

If you are working off a printed list, please use a new script form for each business you call.

Christchurch smokefree outdoor dining survey VOLUNTEER SCRIPT for TELEPHONING BUSINESSES

YOU SAY: Good morning / afternoon,

I am a volunteer with the Cancer Society here in Christchurch. We will soon be talking to businesses about their views on smokefree outdoor dining.

Q1. Does your business have an outdoor dining or seating area?

Yes → Q2.

No →

That's all we are interested in at present, thank you for your time. END OF CALL

Q2. Can I ask, are you the manager or owner (*whoever makes the day-to-day decisions about running your business*)?

Yes → Q4 over page.

No → Q3.

Q3. Are you able to tell me the name of the manager or owner please? I would really like to speak to them as well to discuss smokefree dining further.

Yes → **Add details over page.**

No →

Thank you for your time today. END CALL

Name of owner/manager: _____

Name of business (don't ask, just write in here): _____

Can you tell me when might be a good time to catch them?

Day: _____ Time: _____

Can I call them on this number or is another one better?

Contact number: _____

Thank you so much for your help, I will call them back. Have a good day/afternoon.
END CALL

Q4. WHEN SPEAKING TO THE MANAGER / OWNER.

As part of our work to support smokefree environments we are really keen to hear business views on outdoor dining areas. To do this well, we would love to come and speak to you in person. Would you be willing to talk to us about your views on smokefree outdoor dining? It should only take about 10 minutes.

Would that be okay with you?

Yes → Q5.

No → well thank you very much for your time. Have a good day.
END CALL

Q5. We are planning to visit businesses during the week starting Feb 16th. Can I book a time to come in to see you then?

Yes → Date _____ Time _____

No → Q8.

Q6. Would it be useful to send you an email reminder nearer to the time?

Yes → Q7.

Q7. Can I have your email contact details please (ask them to spell it out)

Write email here: _____

That's great, thank you. We will see you on..... * Have a good day.
END CALL

Q8. Can we arrange another time to visit with you?

Yes Date _____ Time _____ → Q9.

No → well thank you very much for your time. Have a good day.
END CALL

Q9. Can I have an email address for you so that we can you send you a reminder nearer to the time?
Ask them to spell it out.

Email address: _____

That's great, thank you. We will see you on..... * Have a good day. END CALL

*If you have any questions about this survey or want to change your time booking, please contact
XXX at the Cancer Society in Christchurch.

Phone: XXXXXXX.

Guideline B2: Volunteer script for telephoning business managers and owners

PLEASE USE THIS SCRIPT IF YOU HAVE TO CALL BACK TO SPEAK TO THE MANAGER.

**Christchurch smokefree outdoor dining survey
VOLUNTEER SCRIPT for CALLBACK TO BUSINESS MGR/OWNER**

YOU SAY: Good morning / afternoon,

Am I speaking with _____ (name of owner/manager)?

I am a volunteer with the Cancer Society here in Christchurch. We will soon be surveying businesses to hear their views on smokefree outdoor dining, and I was given your name as the owner/manager of _____ (name of business).

I understand that your business has an outdoor dining or seating area.

As part of our work to support smokefree environments we are really keen to hear business views on outdoor dining areas. To do this well, we would love to come and speak to you in person. Would you be willing to talk to us about your views on smokefree outdoor dining? It should only take about 10 minutes.

Would that be okay with you?

Yes →Q1.

No → well thank you very much for your time. Have a good day.
END CALL

Q1. We are planning to visit businesses during the week starting Feb 16th. Can I book a time to come in to see you then?

Yes →Date_____Time_____→Q2.

No →Q4.

That's great, thank you. We will see you on..... * Have a good day.
END CALL

Q2. Would it be useful to send you an email reminder nearer the time?

Yes →Q3.

Q3. Can I have your email contact details please? (Ask them to spell it out)

Write email here: _____

Q4. Can we arrange another time to visit with you?

Yes Date _____ Time _____ →Q5.

No

→

Well thank you very much for your time. Have a good day. END CALL

Q5. Would it be useful to send you an email reminder nearer the time? (Ask them to spell it out)

Email address: _____

→

That's great, thank you. We will see you on..... *
Have a good day. END CALL

*If you have any questions about this survey or want to change your time booking, please contact XXX at the Cancer Society in Christchurch.

Phone: XXXXXXX.

Appendix C: Survey questionnaire



**Business perceptions survey: Smokefree outdoor dining
Cancer Society Canterbury-West Coast Division Inc. February 2015**

ID # _____

Section 1: Interview details (section to be completed by interviewer)

1. Alcohol license status (*please circle*):
Business has an alcohol licence **Business does not have an alcohol licence**
2. Type of business (*please circle as many as apply*):
Café **Restaurant/Bistro** **Bar/Tavern/Club** **Hotel**
3. Interview completed by (*initials*): _____
4. Date (*dd/mm*): _____
5. Time (*hh:mm*): _____ am / pm (*please circle*)
6. Interview completed (*please circle*):
In person **On the telephone**

Please complete the following sections with the interviewee:

Section 2: About your business

7. What is your role within the business? (*Please circle*)
Owner **Manager** **Owner and Manager** **Other (please specify)** _____
8. Is this business...? (*Please circle*)
Independently owned **A locally owned franchise** **A regional or national chain**

Section 3: Smoking and your business

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

9. Staff and customers should be protected from second hand smoke. *(Please circle)*
Agree **Neither agree nor disagree** **Disagree**
10. Second hand smoke is harmful to children and adults. *(Please circle)*
Agree **Neither agree nor disagree** **Disagree**
- 11a. Are you or any of the staff here currently smokers (as far as you know)? *(Please circle)*
Yes *(go to question 11b)* **No** *(go to question 12a)*
Don't know *(go to question 12a)* **Do not wish to answer** *(go to question 12a)*
- 11b. *(If yes)* Have any of the staff mentioned that they would like to stop smoking (including yourself, if you are a smoker)? *(Please circle)*
Yes **No** **Don't know** **Do not wish to answer**
- 12a. How often do you see people smoking in the outdoor dining/seating area of your business? *(Please circle)*
Daily *(go to question 12b)* **Occasionally** *(go to question 12b)*
Never *(go to question 13)*
- 12b. Have you or any of the staff here expressed concern about people smoking in the outdoor dining/seating areas of your business premises? *(Please circle)*
Yes **No** **Don't know**
- 12c. Have any of your customers expressed concern about people smoking in the outdoor dining/seating area of your business premises? *(Please circle)*
Yes **No** **Don't know**
- 12d. *(If yes to question 12b or 12c)* How did you respond to the concerns of staff and/or customers?

Section 4: Awareness of smokefree policies

13. Are you aware that the New Zealand government has a goal of achieving a smokefree New Zealand by 2025? *(Please circle)*
Yes **No**

14a. Are you aware that the Christchurch City Council has a voluntary smokefree outdoor areas policy covering all parks, playgrounds, sports grounds and council events? *(Please circle)*

Yes *(go to question 14b)* **No** *(go to question 15)*

14b. *(If yes)* How did you become aware of this policy? *(Do not read this list to the interviewee. Circle as many as they mention.)*

Signs **Newspaper** **Word of mouth** **Sporting activities**
Don't know **Other** *(please specify)* _____

Section 5: Views on smokefree outdoor dining

The next few questions are to hear what businesses think about smokefree outdoor dining/seating areas.

15. In your professional opinion outdoor dining/seating areas should *(please circle)*:

- a. Definitely be smokefree** *(go to questions 16a, b and c)*
- b. Possibly be smokefree** *(go to questions 16a, b and c)*
- c. Don't really mind if smokefree or not** *(go to questions 16a, b and c)*
- d. Possibly allow smoking** *(go to question 16a, b and c)*
- e. Definitely allow smoking** *(go to question 17)*
- f. Don't know** *(go to questions 16a, b and c)*

Unless interviewee responds with 'definitely allow smoking' then please read the following:

For the next two questions, please tell me whether you agree or disagree with the statements that I read.

16a. Smokefree outdoor dining should be introduced using a voluntary policy where individual businesses can encourage their patrons not to smoke in outdoor dining areas (for example, by displaying smokefree signs). *(Please circle)*

Agree **Disagree** **Don't know**

16b. Smokefree outdoor dining should be introduced using a law or bylaw, where all hospitality businesses must comply with a smokefree outdoor dining policy. *(Please circle)*

Agree **Disagree** **Don't know**

16c. Do you have any other ideas about how smokefree outdoor dining could be introduced?

17a. If your business was to make any outdoor dining/seating area smokefree, do you think this would make people more or less likely to visit your business, or make no difference? *(Please circle)*

More likely

Make no difference

Less likely

Don't know

17b. Do you have any other comments about the possible impact of smokefree outdoor dining on your business?

18. Next I will ask you about what factors might influence your decision to support or not support smokefree outdoor dining. For each factor, let me know whether it would make you more or less likely to support outdoor dining, or whether it would make no difference. *(Please tick)*

Factors	More likely to support	Less likely to support	Make no difference	Don't know
18a. If all other hospitality services in my locality supported it too				
18b. If all other hospitality services throughout Christchurch supported it too				
18c. If there was public support for smokefree outdoor dining				
18d. If there was positive media coverage about smokefree outdoor dining				
18e. If there was strong support from the Council for smokefree outdoor dining				
18f. If there was evidence that businesses are not affected where smokefree outdoor dining is in place				
18g. If clear smokefree signage was made available to businesses				

19. Do you have any other comments about factors that would influence your decision to support smokefree outdoor dining?

Section 6: Further information

20. Would you like to receive the results of this survey once completed? (*Please circle*)

Yes

No

(*If yes*) What are your preferred contact details?

Name	Business name and postal address	Email address

21. Would you like any further information about Smokefree 2025? (*Please circle*)

Yes

No

Those are all of the questions in the survey. Thank you for taking the time to participate!

Appendix D: Volunteer appeal letter

Smokefree outdoor dining – business perceptions survey February 2015: Volunteers needed!

December 2014 saw the tenth anniversary of bars and restaurants becoming smokefree. Although the hospitality industry was cautious about the impact on business, “café culture” has thrived. For outside eating venues the case is different with diners and staff still exposed to the hazards of second hand smoke (SHS).

In 2011, the Government endorsed a goal for a Smokefree New Zealand by 2025. Not a ban, this goal sees adults smoking rates down to below 5% and coordinated efforts to help smokers quit and protect youth from starting. Smokefree community spaces help by reducing the visibility of smoking.

Over 75% of councils promote smokefree parks/playgrounds. Popular with the public, some councils are now promoting smokefree outdoor eating areas. Voluntary and non-enforceable, such moves are supported by customers. A recent regional telephone survey in Canterbury found over 80% of respondents supported smokefree outdoor dining, with 41% more likely to patronise smokefree outdoor venues.

International and NZ evidence tells us that smokefree outdoor dining makes “good business sense”, with many positive and negligible negative effects on business from introducing smokefree outdoor dining.

Cancer Society-Canterbury West Coast Division Inc. needs your support to help conduct a large survey to gain the views of the business sector on smokefree outdoor dining.

Help us move closer to the smokefree 2025 goal by volunteering for this FUN, team based activity.

Surveying will take place throughout the week beginning **16th February** in a number of areas across Christchurch with 2 briefing sessions scheduled for **February 11th 10-11.30am and 12.30-2pm.**

If you are interested in volunteering for this project PLEASE call XXX on Tel: XX XXXXXXXX or email XXX.

Smokefree 2025 rests in all of our hands – be part of the smokefree change!

Appendix E: Briefing paper for volunteers



In March 2011 the NZ government committed to a goal of New Zealand becoming smokefree by 2025.

What does Smokefree Aotearoa 2025 actually mean?

- Our children and grandchildren will be free from exposure to tobacco and tobacco use.
- The smoking prevalence across all populations will be less than 5%. The goal is not a ban on smoking but a motivational target to encourage and support people to stop smoking.
- Tobacco sales will be more regulated to encourage a downturn in sale and supply.

It will be achieved by:

- Providing the best possible support for people trying to stop smoking.
- Protecting children from exposure to tobacco marketing and promotion, e.g. plain packaging.
- Reducing the supply of, and demand for, tobacco, i.e. increasing tax excise.
- Increasing the number of smokefree environments including outdoor areas.
- Encouraging the business sector to work in partnership to increase the number and range of Smokefree areas, particularly those with outdoor areas on their premises.

Why is Smokefree 2025 important?

- Smoking causes nearly a quarter of all cancer deaths.
- Tobacco smoking is the single most preventable cause of death and disease in New Zealand (and the world).
- Second hand smoke (SHS) is the leading environmental cause of death in New Zealand. Non-smokers experience significant increases in tobacco smoke absorption through SHS exposure in the outdoor areas of bar and restaurant settings.
- Children copy what they see and are more likely to become smokers if they are constantly exposed to adults who are smokers.

Why is it important for Canterbury West Coast Division to be involved in Smokefree 2025?

- Contributes towards our mission to reduce the incidence and impact of cancer.
- Cancer Society works in partnership to further the Smokefree New Zealand 2025 goal.
- Working together increases opportunities to expand smokefree work.

What can you do to support a smokefree future?

- Support Smokefree 2025 in your business.
- Wherever you work or whatever you are doing, talk about Smokefree 2025 – everyone is responsible for helping to improve our future.
- Provide support to staff who may wish to stop smoking.
- Consider smokefree outdoor spaces including smokefree outdoor dining.

Appendix F: Survey process guidelines for volunteers



Smokefree outdoor environments: Business perceptions survey Cancer Society and Heart Foundation (South Canterbury branches) September 2014

Survey process guidelines for volunteers

Dear Volunteer, thank you for volunteering to help conduct our business perceptions survey on smokefree outdoor dining taking place from 16th February 2015.

Surveys will be conducted on a face to face basis and appointments will be pre-arranged. The survey should take approximately 10-15 mins (max). The following guidelines are to help you through the survey process and hopefully answer any questions you might have.

Each volunteer will have a list of businesses they will be surveying and should work their way through this list taking time to ensure all questions are asked and answered. All answers should be recorded on the survey form provided.

Step 1: Preparing for your face to face survey

To prepare for your face to face survey you will need a:

- relevant number of copies of business survey questionnaires
- number of pens that work
- white smokefree folder (please place each survey here once completed)
- list of businesses you will be surveying
- map of the business/es you are surveying, where possible.

Please also ensure that you have some way to watch the time.

Once you have all you need you should head to your first business.

Step 2: Your introduction

Say: ***“Hello Mr or Mrs....., my name isand I am a volunteer with Cancer Society here in Canterbury. Thank you for agreeing to participate in this smokefree business survey. The survey should take no more than 10-15 minutes.”***

“I will ask you a number of questions about smokefree outdoor environments and you will also have an opportunity to add any further comments. Understanding business views on smokefree areas is important to us.”

“All information shared will be anonymised and no comments will be assigned to you unless you give your consent. Are you happy to proceed with the survey?”

Step 3: Conducting the interview

Please read out each question, record the response, ask if there are any other comments and record these in the box provided.

If at any point you don't hear an answer or are not sure what the response means please clarify by saying something like... ***“I am very sorry I didn't catch what you were saying then, could you repeat your answer”***. Or... ***“I am very sorry I don't quite understand what you meant then, could you explain it to me again please”***.

If the person you are interviewing asks you a question that you are unsure about please respond with something like... ***“I am really sorry I don't have an answer for you right now, I will make a note of your question and ask a staff member to get back to you with an answer, is that okay?”***

Step 4: Ending the interview

Once you have asked the final question, remember to thank the person for participating.

Say something like: ***“thank you so much for making time to answer my questions, we really appreciate you participating in this survey.”***

Step 5: After the interview

Now that the interview has ended please ensure that you:

- sign and date the survey form
- place the completed survey form in your file
- separate page 5 (contact details) from the survey form
- get your new form ready for the next interview.

Well done! Keep up the good work



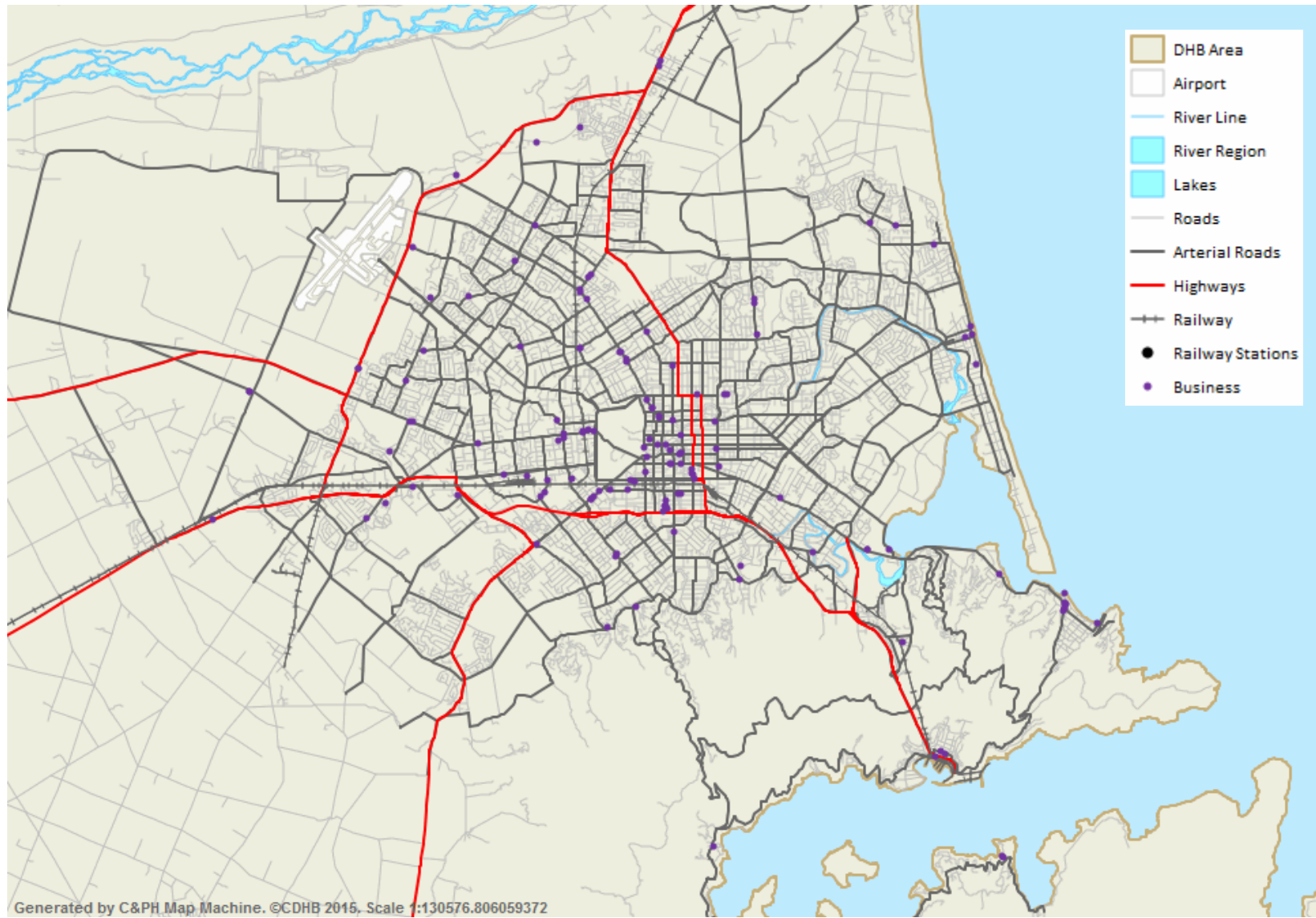
Appendix G: Geographic location of participating businesses

Table G1. Geographic distribution of participating businesses (n=137), by suburb*

Suburb	Number of participating businesses	Suburb	Number of participating businesses
Addington	11	North New Brighton	1
Avonhead	2	Northwood	2
Belfast	2	Opawa	1
Bishopdale	2	Papanui	5
Bryndwr	1	Parklands	2
Burnside	3	Redcliffs	1
Cashmere	1	Riccarton	9
Christchurch Central	26	Richmond	2
Diamond Harbour	2	Russley	2
Fendalton	1	St Martins	1
Ferrymead	3	Shirley	3
Governors Bay	1	Sockburn	3
Harewood	1	Spreydon	2
Heathcote Valley	1	St Albans	2
Hillmorton	1	Strowan	3
Hoon Hay	1	Sumner	8
Hornby	1	Sydenham	10
Islington	1	Upper Riccarton	2
Lyttelton	3	Wigram	3
Merivale	3	Woolston	2
New Brighton	4	Yaldhurst	2

*Suburbs were determined using an address validation geocoding programme (eSAM Wrapper, Community & Public Health, CDHB)

Figure G1: Map of Christchurch indicating the location of participating businesses (n=137)



Appendix H: Additional data tables

Table H1. Survey responses, according to business type

Question/statement <i>Response</i>	Business type, % (n)		p-value*
	Bar	Café/Restaurant	
Business has staff [†] who are current smokers			0.005
<i>Yes</i>	94.1 (32)	71.1 (69)	
<i>No</i>	5.9 (2)	28.9 (28)	
Heard staff [†] express concern about people smoking [‡]			0.013
<i>Yes</i>	12.1 (4)	35.2 (31)	
<i>No</i>	87.9 (29)	64.8 (57)	
Heard customers express concern about people smoking [‡]			0.493
<i>Yes</i>	27.6 (8)	37.2 (29)	
<i>No</i>	72.4 (21)	62.8 (49)	
Aware of Smokefree Aotearoa 2025 goal			1.000
<i>Yes</i>	88.2 (30)	87.4 (90)	
<i>No</i>	11.8 (4)	12.6 (13)	
Aware of CCC smokefree play- and sports grounds policy			0.221
<i>Yes</i>	73.5 (25)	61.2 (63)	
<i>No</i>	26.5 (9)	38.8 (40)	
Thinks that outdoor dining areas should...			0.165
<i>Definitely or possibly be smokefree</i>	57.1 (16)	72.0 (67)	
<i>Definitely or possibly allow smoking</i>	42.9 (12)	28.0 (26)	
Smokefree outdoor dining should be introduced voluntarily			0.786
<i>Agree</i>	76.2 (16)	69.7 (53)	
<i>Disagree</i>	23.8 (5)	30.3 (23)	
Smokefree outdoor dining should be introduced using law/bylaw			0.048
<i>Agree</i>	38.1 (8)	63.3 (50)	
<i>Disagree</i>	61.9 (13)	36.7 (29)	
Impact of smokefree outdoor dining on custom			0.104
<i>People more likely to visit business / No difference</i>	60.0 (18)	76.1 (70)	
<i>People less likely to visit business</i>	40.0 (12)	23.9 (22)	

* Using Fisher's Exact Test (2-sided). The association between business type and response is considered to be statistically significant if the corresponding p-value is less than 0.05 (highlighted in bold).

[†] i.e. the respondent and/or other staff members

[‡] In the outdoor dining/seating areas of the business

Table H2. Survey responses, according to alcohol licence status

Question/statement <i>Response</i>	Alcohol licence status type, % (n)		
	Licensed	Not licensed	p-value*
Business has staff [†] who are current smokers			0.001
Yes	84.0 (79)	53.3 (16)	
No	16.0 (15)	46.7 (14)	
Heard staff [†] express concern about people smoking [‡]			1.000
Yes	29.3 (27)	26.9 (7)	
No	70.7 (65)	73.1 (19)	
Heard customers express concern about people smoking [‡]			0.127
Yes	37.0 (30)	18.2 (4)	
No	63.0 (51)	81.8 (18)	
Aware of Smokefree Aotearoa 2025 goal			0.033
Yes	90.8 (89)	75.0 (24)	
No	9.2 (9)	25.0 (8)	
Aware of CCC smokefree play- and sports grounds policy			0.033
Yes	69.4 (68)	46.9 (15)	
No	30.6 (30)	53.1 (17)	
Thinks that outdoor dining/seating areas should...			0.345
<i>Definitely or possibly be smokefree</i>	67.0 (59)	78.6 (22)	
<i>Definitely or possibly allow smoking</i>	33.0 (29)	21.4 (6)	
Smokefree outdoor dining should be introduced voluntarily			0.614
<i>Agree</i>	73.1 (49)	68.0 (17)	
<i>Disagree</i>	26.9 (18)	32.0 (8)	
Smokefree outdoor dining should be introduced using law/bylaw			1.000
<i>Agree</i>	56.9 (41)	56.5 (13)	
<i>Disagree</i>	43.1 (31)	43.5 (10)	
Impact of smokefree outdoor dining on custom			0.046
<i>People more likely to visit business / No difference</i>	67.4 (60)	88.5 (23)	
<i>People less likely to visit business</i>	32.6 (29)	11.5 (3)	

* Using Fisher's Exact Test (2-sided). The association between business type and response is considered to be statistically significant if the corresponding p-value is less than 0.05 (highlighted in bold).

[†] i.e. the respondent and/or other staff members

[‡] In the outdoor dining/seating areas of the business

Table H3. Factors that would influence respondent’s likelihood of supporting smokefree outdoor dining/seating areas

Factors	Responses, % (n)			
	More likely to support	Make no difference	Less likely to support	Don’t know
If all other hospitality services in my locality supported it too	58.8 (80)	32.4 (44)	4.4 (6)	4.4 (6)
If all other hospitality services throughout Christchurch supported it too	72.1 (98)	21.3 (29)	3.7 (5)	2.9 (4)
If there was public support for smokefree outdoor dining	70.6 (96)	19.9 (27)	3.1 (5)	5.9 (8)
If there was positive media coverage about smokefree outdoor dining	58.8 (80)	30.9 (42)	4.4 (6)	5.9 (8)
If there was strong support from the CCC for smokefree outdoor dining	57.0 (77)	31.1 (42)	4.4 (6)	7.4 (10)
If there was evidence that businesses are not negatively affected where smokefree outdoor dining is in place	64.7 (88)	25.0 (34)	5.1 (7)	5.1 (7)
If clear smokefree signage was made available to businesses	45.6 (62)	42.6 (58)	3.7 (5)	8.1 (11)

Appendix I: Case studies of smokefree outdoor dining areas in Australia



Adelaide City Council (South Australia)

In 2011 Adelaide City Council introduced an *Outdoor Dining No Smoking Incentive Scheme* which rewarded permit holders with a financial advantage when they removed smoking from their outdoor dining areas. A successful trial of the scheme ran from August 2011 to August 2012 and offered outdoor dining permit holders a 50% discount on annual permit fees to eliminate smoking in their outdoor dining areas (24). In 2011 there were 350 permit holders at the time the Council adopted this trial, and 62 agreed to take part in the scheme. It was found that:

- More than 95% of businesses who commenced the trial completed it.
- Three establishments withdrew from the scheme citing that their customers wanted somewhere to smoke.
- Most respondents (50 out of 62) stated they would participate in the future if the scheme were to continue, stating cost saving as a contributing factor.
- No respondents indicated a greater financial incentive was needed to have them participate.



Brisbane City Council (Queensland)

From 1 July 2006, Queensland State Government has had a ban on smoking in outdoor eating and drinking places. The Queens Mall became Smokefree on 1 September 2011. Council enforcement officers initially had a “bedding in time” for the policy but after this time they were able to issue infringement notices. To date, only 22 infringement notices have been served, at \$AUD220 each. The policy is mainly self-regulating. There has been overwhelmingly positive support for the policy from the community. They are looking to extend the ban into other areas of the Central Business District (CBD), but this means a change in law to allow local governments to do this.

Reviews found that one quarter of smokers were prompted to quit as a result of smokefree outdoor eating areas, and 34% of people reported that they visited eating places more often now there was no smoking.



Baw Baw Shire Council (Victoria)

Baw Baw Shire Council was the first council in Victoria to implement a smokefree outdoor dining policy. This was trialed for twelve months from 1 August 2011 until 1 August 2012 with approximately 500 businesses over four satellite cities/towns. Survey results found:

- 73% of community members supported smokefree outdoor eating, and
- 71% of businesses supported smokefree outdoor eating.

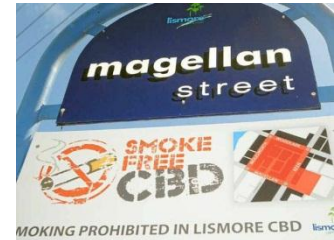
Dialogue with this council has highlighted that initially there was anxiety from some of the business community about the potential negative impact on business. One particular business (a café) was so concerned that they commenced a campaign to stop the trial for financial reasons. However, during the course of the trial they noticed their custom had actually increased and changed their position to supporting smokefree outdoor eating. The business was even prepared to carry on independently as a smokefree café if the council had not carried on the smokefree outdoor eating policy post-trial.



Hobart City Council (Tasmania)

Hobart has had smokefree outdoor dining since August 2011. While business proprietors and their staff are responsible for ensuring their outdoor dining areas remain smokefree, patrons are encouraged to observe the ban and help businesses to support smokefree public places. Hobart City Council's policy was introduced after wide community and business consultation. Hobart City Council is an excellent example of a council that has provided good information and signage to support this policy. An example of their footpath signs can be seen above.

One hundred and seventy six businesses were surveyed, and of the 163 businesses that responded, 63% supported smokefree dining. Similarly, 343 community questionnaires were completed, and 74% of community members supported smokefree dining.



Lismore City Council (New South Wales)

March 2013 saw Lismore City Council designate the whole CBD as smokefree. Although smokefree dining is a voluntary policy currently, it will become state-regulated in 2015. Lismore has led the way with outdoor dining being a prominent feature in their CBD smokefree plans. Lismore Mayor Jenny Dowell, who has been a passionate advocate for a smokefree CBD stated “We're the first who have taken the approach to our whole CBD”, and she commented that the council has received a positive response from the public, citing feedback from families who were looking forward to “walking around town without smoke in their faces” (25). Wide consultation by this Council was carried out prior to the introduction of these smokefree areas.

In New South Wales more generally, as of 31 July 2012 almost two thirds of New South Wales Councils had smokefree policy, and of these, 41% had a smokefree outdoor dining policy. As of February 2013, 74% of metropolitan areas in New South Wales had a smokefree outdoor policy (26).

A study conducted in 2010 found that out of 307 New South Wales businesses that allowed smoking in outdoor areas at that time, 82% thought a smoking ban would create a nicer environment for their customers, and 33% said staff members were concerned about exposure to cigarette smoke in the workplace (27). The same study surveyed 122 businesses that were totally smokefree at that time and 91% found it easy or very easy to enforce the restriction.



Future Melbourne Committee (The Causeway, Melbourne)

On 10 September 2013 the Future Melbourne Committee resolved to prescribe The Causeway as a smokefree area for the period 1 October 2013 to 31 March 2014 under Clause 3A.3 of the local law.

A pilot of a smokefree area the entire length of The Causeway, between the entrances at Bourke Street Mall and Little Collins Street, was conducted. This timeframe took in the busiest time for outdoor dining, being the spring and summer months. There were a total of eleven retail businesses situated at street level in The Causeway, of which nine were food businesses. All of these food businesses had outdoor seating areas. Early in the ban some café businesses believed they'd lost business as a result of the ban. In all but one case this business was recovered across the period of the ban. Most café businesses interviewed wanted a continuation of the ban. One did not.

The smoking ban was received very well by the patrons. The majority of respondents (80%) thought it was "great"/"good" to have The Causeway totally smokefree, whilst only 7% felt it was "not good"/"really bad". In the second round of interviews with business owners in early March 2014, the bulk of cafés felt that business was much the same as it had been before the ban. However many felt it was more pleasant not to have smoking and the associated litter (28).

Melbourne City Council is now moving toward a blanket ban for smoking in outdoor sections of restaurants and cafés, describing the move as inevitable. Towards the end of March 2015 Lord Mayor Robert Doyle said Victoria was the only state that did not have the law. Doyle commented "It will make for a healthier city and that's important, but it will also make for a more liveable and amenable city" (29).

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