

## Community perceptions of smoking bans in NSW licensed venues

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Environmental tobacco smoke increases the risk of lung cancer and coronary heart disease,<sup>1</sup> as well as causing irritation to the eyes, nose and throat. In recent years it has become clear that the only way to protect non-smokers from exposure to environmental tobacco smoke in indoor areas is by eliminating smoking in those areas.<sup>1</sup>

In 2004 the New South Wales (NSW) Government announced that smoking in the indoor areas of licensed premises would be phased out by July 2007.<sup>2</sup> The reason for this decision was to protect workers and patrons in these venues from the detrimental health effects of prolonged exposure to environmental tobacco smoke. At the same time, NSW Health conducted a study to monitor community attitudes to the phased introduction of smoking bans in these venues between 2003 and 2007 to gauge public understanding and acceptance of the government action and inform policy roll out. In combination with other data these surveys provide a powerful tool for health policy development.<sup>3</sup>

Between 2003 and 2007 omnibus telephone surveys of independent random samples of NSW residents aged 18 years and over were used to collect data on public attitudes before, during and after the implementation of smoking bans in enclosed public places of licensed venues, with sample sizes ranging from n=664 to n=996 respondents each year. To add to the robustness of the study, omnibus results were compared with the same questions in the NSW Population Health Survey,<sup>4</sup> a larger ongoing survey of individual health behaviours and outcomes of NSW residents with sample sizes of between n=7,794 and n=12,930 respondents.

It was found that community support for smoking bans increased consistently from 2003 through to the introduction of the total ban on smoking in enclosed public places of licensed venues in 2007, for all four designated areas: from 71.5% in 2003 to 81.6% in 2007 in gaming areas; 60.8% to 73.4% for registered clubs; 56.7% to 70.6% in hotels/pubs, and 56.7% to 74.5% in bars/nightclubs.

When asked whether the smoking bans in licensed venues would make any difference to the number of times they would visit those venues, almost 90% (89.5% in 2004 to 91.4% in 2007) of respondents said they would visit those venues more often or as usual. Encouragingly, this pattern of public support for the bans was mirrored in the NSW Population Health Survey.

It is important that government monitor public attitudes to smoking bans, as it is a way of following social norms over time and providing the data required by political and senior policy decision makers to introduce new legislative changes. Surveys of this type can also be an effective advocacy tool,<sup>5,6</sup> and a way of keeping in step with public opinion. That said, good public policy often involves challenging established community norms, as was the case with introduction of mandatory random breath testing in NSW in the early 1980s<sup>7,8</sup> with spectacular results.<sup>9</sup> In cases where established views may be resistant to change, measuring public attitudes can be even more important. Surveys can then be used to develop a greater consumer orientation by determining issue salience and identifying potential barriers and enablers, data that informs efforts to inform, educate and ultimately build public support for change.

Consistent with previous research,<sup>10</sup> these findings indicate that there is overwhelming public support for smoking bans in NSW. It appears unlikely that this legislation is having a negative impact on visits to these venues. Finally, monitoring community awareness and attitudes to legislative changes are important components in developing health policy and can be used as key drivers for change.

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