

**2000 Hamilton-Wentworth Health Survey
Second-hand Smoke and Municipal Tobacco By-law
Descriptive Report**

Brian C. Kreps

Carol Tinga

Tracey Taylor

Helen Hale Tomasik

Larry Chambers

City of Hamilton
Social and Public Health Services Department

May 31, 2001

For further information please contact:
Brian Kreps, Tobacco Use Prevention Promoter
Healthy Lifestyles & Disease Prevention Branch
Social & Public Health Services Department
City of Hamilton
71 Main Street West (Upper Ottawa Office)
Hamilton, Ontario L8P 4Y5
Tel: 905/546-3161 Fax: 905/546-3658
E-mail: bkreps@city.hamilton.on.ca

Table of Contents

EXECUTIVE SUMMARY	3
SECTION I. INTRODUCTION	4
SECTION II. METHODS	4
QUESTIONNAIRE	4
SURVEY METHODS	5
RESPONDENT SELECTION	5
DATA COLLECTION AND MANAGEMENT	5
STATISTICAL ANALYSIS	5
SECTION III.RESULTS.....	6
DESCRIPTION OF THE SURVEY SAMPLE.....	6
SURVEY FINDINGS.....	6
<i>Second-hand smoke.....</i>	<i>7</i>
<i>Public support for 100% smoke-free public places and workplaces.....</i>	<i>8</i>
<i>Public Support for Designated Smoking Rooms</i>	<i>9</i>
<i>Public Opinion by Smoking Status.....</i>	<i>10</i>
IV. CONCLUSION.....	11
V. REFERENCES	15
FIGURE 1.	7
FIGURE 2	8
FIGURE 3	9
TABLE 2. PERCENT AGREEMENT (SAMPLE SIZE=1000) WITH ATTITUDES TOWARDS EXPOSURE TO SECOND-HAND SMOKE, HAMILTON-WENTWORTH 2000.....	12
TABLE 3. PERCENT AGREEMENT (SAMPLE SIZE = 1000) WITH ATTITUDES TOWARDS TOBACCO BY-LAWS FOR PUBLIC PLACES (RESTAURANTS, BARS, BOWLING/GAMING CENTRES AND POOL/BINGO HALLS AND IVOR WYNNE STADIUM) AND THE WORKPLACE, HAMILTON-WENTWORTH, 2000.....	13
TABLE 4. PERCENT AGREEMENT (SAMPLE SIZE = 1000 OR 1001*) WITH ATTITUDES TOWARDS SMOKING BY-LAWS FOR RESTAURANTS, BARS AND WORKPLACES BY SMOKING STATUS, HAMILTON-WENTWORTH, 2000.	14

Executive Summary

The 2000 Hamilton-Wentworth Health Survey (HWHS) was initiated to provide information on attitudes and beliefs about by-laws intended to address smoking in enclosed public places, smoking in the workplace, second-hand smoke, providing tobacco to individuals under 19 years of age and current smoking practices. General health, as well as demographic information, were collected. This report will focus on the 2000 survey's findings relating to attitudes toward various municipal by-laws restricting smoking in public places and the workplace, and beliefs about second-hand smoke.

The 2000 HWHS asked respondents about their concern with exposure to second-hand smoke. Concern about exposure to second-hand smoke was expressed by 70% of respondents. Almost 9 out of 10 respondents (88%) felt that second-hand smoke was likely to cause health problems.

Support for eliminating smoking in workplaces was reported by 75% of respondents. Making restaurants completely smoke-free was supported by 64% of respondents and making bars completely smoke-free was supported by 50%.

The survey also asked respondents about support for restricting smoking to designated smoking rooms (DSRs). Eighty-one percent of respondents expressed support for restricting smoking in restaurants to fully enclosed, separately ventilated designated smoking rooms (DSRs). Restricting smoking in bars to DSRs was supported by 65% of respondents. The use of DSRs in workplaces was supported by 77% of the respondents.

Support for completely smoke-free restaurants was expressed by 80% of non-smokers and 27% of smokers. Sixty-six percent of non-smokers and 15% of smokers supported eliminating smoking from bars. According to the 1996/97 Ontario Health Survey 74% of Hamilton-Wentworth residents aged 18 and older do not smoke.

The results of the 2000 Hamilton-Wentworth Health survey are consistent with results of the surveys conducted in 1995 and 1999. The 1995 HWHS reported that 72% of respondents supported smoke-free workplaces whereas the 1999 survey reported 74% support and the 2000 survey reported 75% support. Smoke-free restaurants were supported by 67% of the sample in 1995 and by 64% of the sample in the 2000 survey. The 1999 survey found that 47% of respondents supported DSRs in bars, while the 2000 HWHS recorded support for DSRs in bars at 64%.

Data were collected via telephone survey between November 17 and December 10, 2000. Interviews were completed with 1,000 residents of the Regional Municipality of Hamilton-Wentworth, now the City of Hamilton. The survey has a margin of error of plus or minus 7%, 19 times out of 20 (95% of the time).

Section I. Introduction

The 2000 Hamilton-Wentworth Health Survey was initiated to provide information about attitudes and beliefs about by-laws intended to address smoking in enclosed spaces, smoking in the workplace, second-hand smoke, providing tobacco to individuals under 19 years of age and current smoking practices. General health, as well as demographic information, were collected. The Hamilton Social and Public Health Services Department (HSPHSD) has collected information on smoking-related topics using two previous surveys (1995 Hamilton-Wentworth Health Survey and the 1999 Hamilton-Wentworth Health Survey).

This report will focus on the 2000 survey's findings relating to attitudes toward various municipal by-laws restricting smoking in public places and the workplace and beliefs about second-hand smoke. Opinions regarding smoking in restaurants, bars, bowling centres, pool halls, bingo halls, gaming centres and Ivor Wynn Stadium are detailed. Feedback with respect to supporting 100% smoke-free establishments, enclosed designated smoking rooms of various sizes and unenclosed designated smoking sections are presented. Residents were also asked about their personal concern about exposure to second-hand smoke and whether they thought that second-hand smoke is likely to cause health problems.

Section II. Methods

The 2000 Hamilton-Wentworth Health Survey is a general population survey conducted for HSPHSD by Smaller World Communications, Richmond Hill, Ontario and SOM of Montreal, Quebec. Data were collected via telephone survey between November 17 and December 10, 2000. Interviews were completed with 1,000 residents of the former Regional Municipality of Hamilton-Wentworth, now the City of Hamilton.

Questionnaire

The 2000 Hamilton-Wentworth Health Survey measures public support for municipal by-laws regarding smoking in enclosed public places and in the workplace. With respect to smoking, the survey includes questions pertaining to second-hand smoke, current smoking practices and providing tobacco to youth under 19 years of age. The questionnaire also includes questions regarding general health status and demographics. Where possible, questions of proven validity and reliability were used. Some questions were modified from similar existing health and public opinion questionnaires in Canada and from the 1995 and 1999 Hamilton-Wentworth Health Surveys. A small number of questions were created. The survey and a list of question sources are available upon request.

The questionnaire was piloted by SOM (15 interviews) prior to data collection to test question wording, order and skip patterns and to assess survey length. The pilot test revealed that the questionnaire length ranged from a low of 12 minutes to a high of 18 minutes, with an average of 15 minutes. This was deemed to be an acceptable length.

Survey Methods

The sample for the 2000 Hamilton-Wentworth Health Survey was designed to represent the adult population (aged 18 years and over) residing in private homes in the six municipalities that made up the Regional Municipality of Hamilton-Wentworth, now the new City of Hamilton. Half of the survey sample (500 residents) was derived from residents of Ancaster, Dundas, Flamborough, Glanbrook and Stoney Creek. The remaining half of the survey sample was comprised of 500 residents of the old City of Hamilton, for a total sample size of 1,000 residents. A weighting scheme was applied to the survey data, so that the results would more accurately reflect the distribution of adults across the six municipalities comprising the former Regional Municipality of Hamilton-Wentworth.

Residents living in institutional settings, such as university or college residences or long-term care facilities, were not included in the survey sample. Residents without telephones were also not included in the sample. Statistics Canada reports that in 1999 approximately 98.2% of Canadian households had a telephone.¹

Respondent Selection

The survey respondents for each municipality were chosen through a two-stage process. In the first stage households were selected from within each municipality. This was done by randomly selecting residential telephone numbers using a random digit dialing technique. In the second stage, individual respondents were selected by selecting the adult household member (age 18 years or older) who most recently had a birthday. The questionnaire was administered to this individual.

In order to maximize the survey response rate and minimize non-responder bias, up to 20 calls were made to each household and 70% of refusers were called a second time.

Data Collection and Management

Data collection (via telephone survey) was carried out at SOM's telephone facilities in Montreal, Quebec and Quebec City, Quebec using their proprietary Computer Assisted Telephone Interviewing (CATI) software called SOMTEL. Automated call scheduling procedures were utilized with multiple attempts at different times of the day to increase the survey response rate. Visual and audio monitoring facilities were used to review each interviewer's work.

Statistical Analysis

Data were analyzed using Statistical Package for Social Sciences (SPSS) version 9.0 and are presented as percentages of respondents answering each question. Further information regarding survey methods and data analysis, including the weighting scheme, are available upon request.

Section III. Results

Surveys of a relatively small sample of a population can, within limits, represent and describe the entire population provided that an acceptable response rate is achieved and that the sample is representative. Of the 3,292 telephone numbers included in the initial sample, 1,892 (57%) were known to be eligible households. Ineligible households (1,400) included non-English speaking households, not in service telephone numbers, commercial telephone numbers and telephone numbers for which the eligibility of the household could not be determined. Among eligible households, 1,000 adult residents completed the telephone interview. This translates into a total survey response rate of 53%. This response rate is about the same as the response rate achieved for the 1995 Hamilton-Wentworth Health Survey (52%). Rates for the 1999 Hamilton-Wentworth Health Survey and the Heart Health Hamilton-Wentworth Survey were higher at 62% and 69%, respectively. An estimating procedure was used to determine the degree of precision for the 2000 Hamilton-Wentworth Health Survey. The findings suggest that the margin of error is plus or minus 7%, 19 times out of 20 (95% of the time). Further information on survey response rates and confidence intervals is available upon request.

Description of the Survey Sample

The extent to which the survey sample was the same or different from the Hamilton-Wentworth population was determined by comparing demographic characteristics and a selected health behaviour variable (current smoking status) from the 2000 Hamilton-Wentworth Health Survey to the most recent census² (demographic) and Ontario Health Survey³ (smoking status) data. The results of the Census data comparison are shown in Table 1. Compared to 1996 Census data for Hamilton-Wentworth, individuals interviewed for the 2000 Hamilton-Wentworth Health Survey are approximately the same age and just as likely to have ever been married, but are more likely to be female, report higher household income, be employed and have higher education levels.

In terms of current smoking status, of those surveyed, 29% were smokers (23% daily smokers and 6% occasional smokers). This is comparable to the 1996/97 Ontario Health Survey data which indicate a smoking rate of 26% (22% daily smokers and 4% occasional smokers) for individuals aged 18 years and over in the Hamilton-Wentworth Region.⁴ This is also comparable to the 1999 HWHS results which indicate a smoking rate of 28% (22% daily smokers and 6% occasional smokers).

Survey Findings

This descriptive report will detail findings from the 2000 Hamilton-Wentworth Health Survey regarding a variety of attitudes, behaviours and beliefs relating to second-hand smoke, by-laws intended to address smoking in enclosed public places and smoking in the workplace.

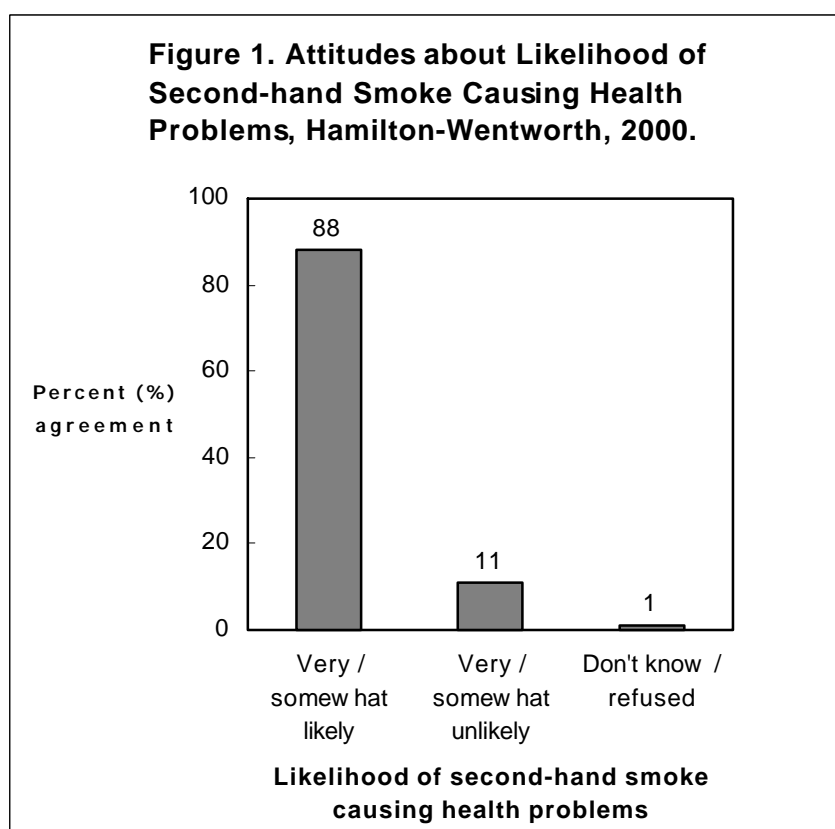
Second-hand smoke

Respondents were asked to describe their concern about personal exposure to second-hand smoke. Overall, 70% of respondents reported being either very concerned (43%) or somewhat concerned (27%) about exposure to second-hand smoke (Table 2).

Fifteen percent of respondents said that they were not very concerned and a further 14% were not all at concerned about exposure to second-hand smoke.

Eighty-five percent of respondents that do not smoke at all reported being concerned (56% very concerned, 28% somewhat concerned) about second-hand smoke exposure. Only 36% of smokers (daily or occasional) felt similarly with 11% being very concerned and 24% somewhat concerned about exposure to second-hand smoke.

Most respondents thought that exposure to second-hand smoke is likely to cause health problems (Figure 2). More than half of the respondents (54%) thought that it was very likely that exposure to second-hand smoke causes health problems. An additional 34% think that it is somewhat likely to cause health problems. Only 5% of respondents think it is very unlikely that exposure to second-hand smoke causes health problems.



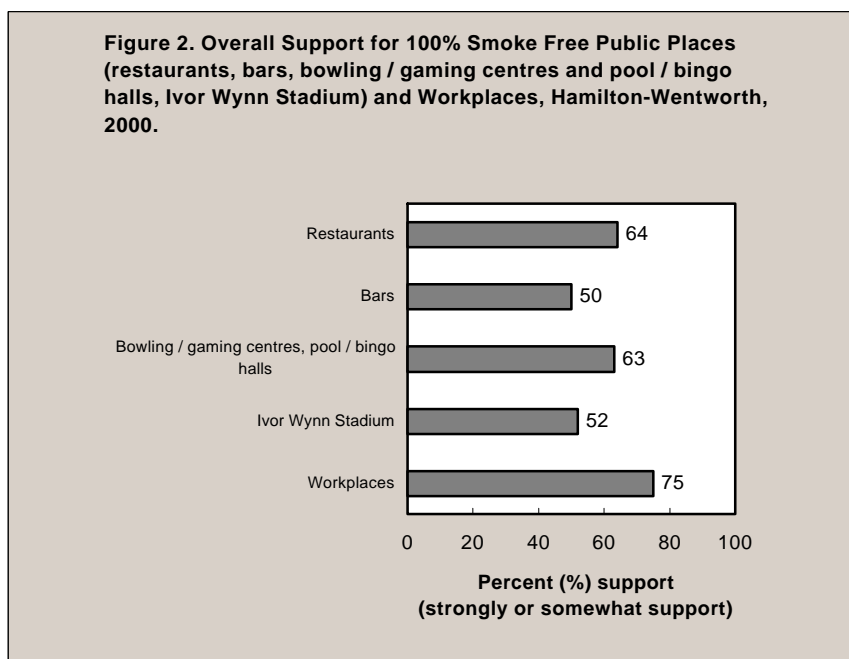
Ninety-four percent of non-smoking respondents reported that it is likely (65% very likely, 29% somewhat likely) that exposure to second-hand smoke causes health problems. Seventy-seven percent of smokers (daily or occasional) felt similarly with 29% reporting that the connection is very likely and 47% reporting it as somewhat likely.

Public support for 100% smoke-free public places and workplaces

The 2000 Hamilton-Wentworth Health Survey polled residents regarding their attitudes towards various restrictions aimed at regulating smoking in workplaces and public places such as restaurants, bars, bowling centres, pool halls, bingo halls, gaming centres and Ivor Wynn Stadium.

Support for making public places 100% smoke-free varied between classifications of public places (Table 3). The highest level of support was recorded for restaurants with 64% of respondents saying that they support making restaurants 100% smoke-free (Figure 2). Support for making billiard halls, bingo halls, gaming centres and public halls smoke-free was quite similar to that recorded for restaurants, with 63% of respondents registering their support. The lowest levels of support were expressed for making bars and Ivor Wynn Stadium completely smoke-free with 50% and 52%; respectively, of respondents indicating their support.

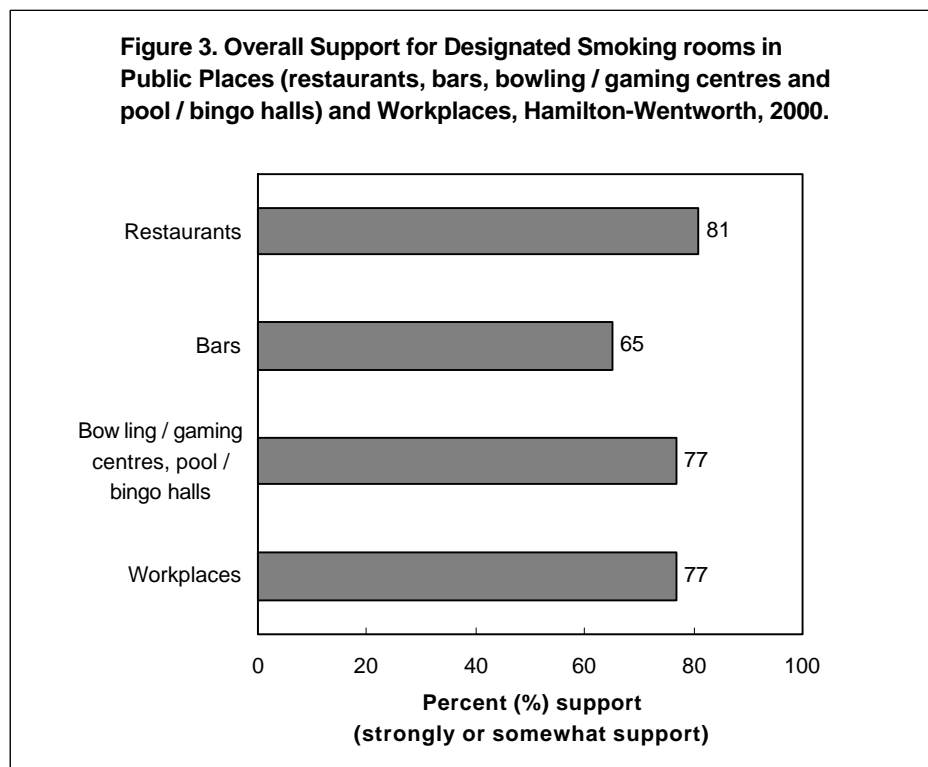
Respondents were also asked about their support for eliminating smoking in the workplace. Fully three quarters (75%) of respondents support 100% smoke free workplaces with strong support from a majority (62%) of respondents (Table 3).



Public Support for Designated Smoking Rooms

Varied levels of support were also recorded for restricting smoking to fully enclosed separately ventilated smoking rooms (DSRs) (Table 2). Support for DSRs in restaurants was expressed by 81% of those surveyed (Figure 3). Support for the use of DSRs in billiard halls, bingo halls, gaming centres and public halls was indicated by more than three-quarters (77%) of the respondents. Support for the use of DSRs in bars was indicated by 65%. The designated smoking room alternative in workplaces was supported by 77% of respondents.

The survey also inquired about the size of DSRs that could be allowed. Fifty-four percent of respondents felt that a quarter of a restaurant's seating area should be allowed as a designated smoking room and 27% of respondents thought that half of a restaurant's seating area should be so designated. Thirty percent of respondents thought that a quarter of a bar's seating area should be devoted to a DSR whereas 42% of respondents felt that half of a bars' seating area should be set aside as a DSR. A question was also asked about using unenclosed smoking sections in bars. Support was expressed by 48% of respondents.



Public Opinion by Smoking Status

Public opinion varied between respondents who identified themselves as smokers and those who identified themselves as non-smokers. In general, non-smokers expressed higher levels of support for 100% smoke-free public places and workplaces. In many cases, non-smokers and smokers expressed similar levels of support for the use of DSRs.

Support for smoke-free restaurants was expressed by 80% of non-smokers and 27% smokers (Table 4). Support for the use of DSRs in restaurants, however, was identical between smokers and non-smokers with 81% of both groups expressing support.

Nearly two-thirds of non-smokers (66%) support eliminating smoking in bars whereas only 15% of smokers expressed support. When asked about support for DSRs in bars, nearly three-quarters (73%) of non-smokers supported the restriction while the level of support among smokers rose to 46%. When asked about making workplaces 100% smoke-free, again, a higher percentage of non-smokers expressed support (86%) than smokers (51%).

IV. Conclusion

The survey results indicate that the 88% of those surveyed felt that exposure to second-hand smoke is likely to cause health problems. Seventy percent of respondents reported being concerned about personal exposure to second-hand smoke. When asked about their support for smoke-free policies: 75% of respondents said they wanted smoke-free workplaces, 64% said they wanted smoke-free restaurants and 50% said they wanted smoke-free bars. Eighty-one percent of respondents reported supporting the use of DSRs in restaurants, 77% supported the use of DSRs in workplaces and 66% supported the use of DSRs in bars.

The results of the 2000 Hamilton-Wentworth Health survey are generally consistent with results of the surveys conducted in 1995 and 1999. The 1995 HWHS reported that 72%⁵ of respondents supported smoke-free workplaces whereas the 1999 survey reported 74%⁶ support and the 2000 survey reported 75% support. Smoke-free restaurants were supported by 67% of the sample in 1995 and by 64% of the sample in the 2000 survey. The 1999 survey found that 47% of respondents supported DSRs in bars, while the 2000 HWHS recorded support for DSRs in bars at 65%.

Table 1. Demographic Characteristics of 2000 Hamilton-Wentworth Health Survey Respondents Compared to 1996 Census Data for Hamilton-Wentworth

Characteristic	2000 Hamilton-Wentworth Health Survey Respondents (%)	1996 Census* (%)
Gender		
Male	40	49
Female	60	51
Age (years)		
18 – 19	3	--
20 – 44	53	52
45 – 64	28	29
65+	14	19
Marital Status		
Ever married	72	71
Single / never married	28	29
Living with common law partner	7	--
Household Income		
Less than \$20,000	15	24
\$20,000 - \$39,999	26	25
\$40,000 - \$59,999	25	20
\$60,000 - \$79,999	16	15
\$80,000 - \$99,999	7	8
\$100,000 and over	10	8
Employment Status⁺		
Employed	64	57
Unemployed	3	6
Not in the labour force [~]	33	37
Education		
Primary school or less	3	12
Some secondary school	11	25
Completed secondary school	30	14
Some community college, technical college, CEGEP or nursing program	6	7
Completed community college, technical college, CEGEP or nursing program	23	19
Some university	7	8
University degree	21	12

*All Census data is based on a population 15 years of age and over. The 2000 Hamilton-Wentworth Health Survey data is based on a population 18 years of age and over. Breakdown is not available.

⁺Employment status is based on total population (not specific to population in the labour force).

[~]Refers to individuals who are not actively seeking employment at the time of the survey and 1996 Census e.g., students, retired individuals, homemakers).

Table 2. Percent Agreement (sample size=1000) with Attitudes Towards Exposure to Second-hand Smoke, Hamilton-Wentworth 2000.

	Percent (%)
<i>Concern about personal exposure to second-hand smoke:</i>	
Very concerned	43
Somewhat concerned	27
Not very concerned	15
Not at all concerned	14
Don't know	1
<i>Exposure to second-hand smoke likely to cause health problems:</i>	
Very likely	54
Somewhat likely	34
Somewhat unlikely	6
Very unlikely	5
Don't know / Refused	1

Table 3. Percent Agreement (sample size = 1000) with Attitudes Towards Tobacco By-laws for Public Places (Restaurants, Bars, Bowling/Gaming Centres and Pool/Bingo Halls and Ivor Wynne Stadium) and the Workplace, Hamilton-Wentworth, 2000.

Attitude toward tobacco by-law	Percent* (%) agreement with attitude				
	Restaurants	Bars	Bowling/gaming centres and pool/bingo halls	Ivor Wynne Stadium	Workplace
<i>100% smoke free:</i>					
strongly support	48	25	40	31	62
somewhat support	16	25	23	21	13
somewhat oppose	14	14	13	13	7
strongly oppose	21	34	23	33	17
don't know/refused	1	3	2	4	1
<i>Designated smoking room:</i>					
Strongly support	57	37	44	-	50
somewhat support	24	28	33	-	27
somewhat oppose	8	13	8	-	6
strongly oppose	11	21	13	-	15
don't know/refused	1	2	2	-	1
<i>Percentage of seating area of designated smoking room (DSR):</i>					
0% (no DSR)	10	8	-	-	-
25%	54	30	-	-	-
50%	27	42	-	-	-
75%	3	14	-	-	-
100%	0	3	-	-	-
don't know/refused	5	4	-	-	-
<i>Unenclosed designated smoking section:</i>					
Strongly support	-	22	-	-	-
somewhat support	-	26	-	-	-
somewhat oppose	-	15	-	-	-
strongly oppose	-	35	-	-	-
don't know/refused	-	2	-	-	-

*Percentages may not add up to 100% due to rounding.

-Question was not asked.

Table 4. Percent Agreement (sample size = 1000 or 1001*) with Attitudes Towards Smoking By-laws for Restaurants, Bars and Workplaces by Smoking Status, Hamilton-Wentworth, 2000.

Attitude toward smoking by-law	Percentage of Smokers	Percentage of Non-smokers
<i>Restaurants being 100% smoke-free:</i>		
Support	27	80
Oppose	73	20
<i>Restaurants having a DSR:</i>		
Support	81	81
Oppose	19	19
<i>Bars being 100% smoke-free:</i>		
Support	15	66
Oppose	85	34
<i>Bars having a DSR:</i>		
Support	46	73
Oppose	53	27
<i>Bingo halls, bowling alleys, billiard halls, gaming centres and public halls being 100% smoke-free:</i>		
Support	33	75
Oppose	66	23
<i>Bingo halls, bowling alleys, billiard halls, gaming centres and public halls having a DSR:</i>		
Support	73	79
Oppose	26	19
<i>Workplaces being 100% smoke-free:</i>		
Support	51	86
Oppose	49	14
<i>Workplaces having a DSR:</i>		
Support	84	76
Oppose	16	24

- due to weighting or rounding

V. References

¹ Statistics Canada's internet site. Canadian Statistics: Selected dwelling characteristics and household equipment. <http://www.statcan.ca/english/pgdb/People/Families/famil09b.htm> [accessed on 1 February, 2001.]

² Statistics Canada. Canada census 1996: profile of census divisions and subdivisions: area profiles: 1996 census population [computer program]. Ottawa (ON): Statistics Canada, 1998.

³ Ontario Ministry of Health. Ontario Health Survey 1996/97: data files [computer program]. Toronto, (ON): Ministry of Health, 1999.

⁴ Ontario Ministry of Health. Ontario Health Survey 1996/97: data files [computer program]. Toronto, (ON): Ministry of Health, 1999.

⁵ Taylor T, Krueger P, McFarlane A, Chambers L, Tomasik HH. 1995 Hamilton-Wentworth Health Survey: Tobacco Results. Regional Municipality of Hamilton-Wentworth Public Health Department.

⁶ Kreps B, Feightner K, Chambers L, Suggett B, Tomasik HH, Taylor T. 1999 Hamilton-Wentworth Health Survey: Second-hand Smoke and Municipal Tobacco By-law Descriptive Report. May, 2000. Hamilton-Wentworth Social and Public Health Services Division.