



## Majority of smokers and non-smokers in favour of smokefree parks in New Zealand

Some local government authorities in New Zealand have started to introduce 'educational' smokefree park policies, including those in South Taranaki, Ashburton, Tararua, Gisborne, New Plymouth, Rotorua, and Upper Hutt. The policies depend on signage and media coverage, rather than bylaws, to encourage compliance. Upper Hutt introduced a policy in May 2006. Little is known about the public attitudes to and compliance with such policies.

We carried out a multifaceted evaluation aiming to assess attitudes towards, and compliance with, Upper Hutt's smokefree parks policy in 2007.

Data collection occurred in the three largest parks in Upper Hutt with one or more children's playgrounds. We carried out a face-to-face survey and observational study among park users in two of the parks, on 4 days in September 2007. This included data collection during a family-orientated event. We collected and counted cigarette butts from areas in three parks, a week after they had been cleared of all visible butts. These areas were concentrated close to paths, benches, playgrounds, and litter bins. We also carried out a visual analysis of signage in all three parks. The detailed methods and results are described in the project report,<sup>1</sup> with the main findings summarised here. Ethics approval was provided through the University of Otago's ethics review process.

The main finding was that 83% of adult park users thought that having a "smokefree parks policy" was a good idea (n=488/587). However, only 63% of respondents knew about the policy. Most smokers (73%) also agreed with the policy (n=109/149). Seventeen percent of smokers who knew about the policy and 32% of smokers who did not know about the policy reported that they smoked in the parks.

Of those who thought the policy was a good idea, the most common reasons given were enhancing positive role modelling (28%), reducing secondhand smoke exposure (28%), and because parks are children's environments (27%). The main reasons people gave for opposing the policy were: "smoking outdoors is acceptable" (50%), "smokers should have the right to autonomy" (26%), and "the policy won't work or cannot be enforced" (12%). Furthermore, the respondents who agreed with the policy most often thought the Upper Hutt City Council had implemented the policy because: "parks are for children", "it reduces negative role modelling", and "it reduces litter". The respondents who disagreed with the policy most frequently stated that the Council implemented it for "political reasons".

Observational data of smoking behaviour indicated that smoking was rare among adults, with 8 out of 488 adults observed smoking over the data collection period. No smoking among children was observed (0/1013). However, systematic collection of cigarette remnants indicated that smoking in the parks was still occurring—with 210, 87, and 12 new cigarette butts found in the study areas after 1 week in the three parks. The parks all displayed at least one "Smokefree Parks" sign. However, these were

only visible from a few locations in each park, and were often not in the field of view when looking towards the playground.

The results of this study were generally positive, particularly with regards to public support for a smokefree parks policy. The findings are consistent with the few available studies in other countries and within New Zealand that indicate majority public support for smokefree parks. In New Zealand, a District Health Board survey of 200 park users in Opotiki (following the introduction of a smokefree parks policy) found that 69% supported smokefree outdoor council areas, despite 31% of interviewees being smokers.<sup>2</sup> A Health Sponsorship Council (HSC) survey of subjects across New Zealand found that 51% of interviewees said it was “not at all” acceptable to smoke at outdoor sports fields and courts, and 69% agreed with the statement “smoking should be banned in all outdoor places that children are likely to go”.<sup>3</sup> In the HSC survey, 76% also said it was not acceptable to smoke at outdoor children’s playgrounds. In Minnesota in the USA there was 70% support for a smokefree parks policy.<sup>4</sup> There was also majority public support for smokefree beaches in California,<sup>5</sup> and for a number of other smokefree outdoor settings (including child play yards, outside of building entrances, and outdoor restaurant dining patios).<sup>6</sup>

The attitudinal and observational surveys in our study were limited by only involving users of two parks, and not interviewing non-users of parks. Non-response was not recorded systematically, but was reported by interviewers to be very low (<5%). However, some park users were not included in the survey—e.g. joggers were not approached. The results may also have been subject to social desirability bias, since the interviewers were identified to respondents as being “medical students”.

In summary, we found strong support for smokefree parks among park users. However, only 62% of respondents knew that the parks were covered with a smokefree policy, signage appeared to be inadequate, and the butt study suggested an appreciable degree of non-compliance. This suggests that more promotion through better signage, media campaigns, and public education is required. Recommendations for further research in this area are provided in the report.<sup>1</sup> However, while further research on smokefree parks is warranted in New Zealand, there is probably enough public health justification for the introduction of such policies already,<sup>7</sup> especially in settings frequented by children. Furthermore, the available research findings suggest that legislators can be confident of majority public support for smokefree parks.

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**Competing interests:** Wilson, Edwards, and Thomson have previously worked for NGOs and the Ministry of Health on tobacco control issues.

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