Evaluation of the smoke-free legislation in Wales: Qualitative study

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# Table of Contents

1 Executive Summary ........................................................................................................................................... 3  
2 Introduction ...................................................................................................................................................... 5  
   2.1 Background to the study ................................................................................................................................. 5  
   2.2 Aims and objectives of the study ..................................................................................................................... 6  
3 Research design .................................................................................................................................................. 7  
   3.1 The Case Study areas ......................................................................................................................................... 7  
   3.2 The panel interviews .......................................................................................................................................... 7  
   3.3 Data Summary ................................................................................................................................................ 7  
      3.3.1 Overall Summary of Data Collection ................................................................................................. 7  
      3.3.2 Summary of Panel Interviews .......................................................................................................... 8  
   3.4 Air Particle Monitoring ..................................................................................................................................... 9  
   3.5 Locales: the case-study localities .................................................................................................................... 10  
   3.6 The study participants ...................................................................................................................................... 10  
   3.7 Main data-collection periods .......................................................................................................................... 11  
   3.8 The panel interviews and focus groups ........................................................................................................ 11  
   3.9 Observations .................................................................................................................................................. 11  
   3.10 Data analysis ................................................................................................................................................ 12  
   3.11 Ethical approval ........................................................................................................................................... 12  
   3.12 Venues and customers .................................................................................................................................. 13  
4 Pre-legislation expectations and attitudes ......................................................................................................... 14  
   4.1 The Smokers .................................................................................................................................................... 14  
      4.1.1 Smokers’ anticipations of the ban and expected impact on their smoking-related  
      behaviours .......................................................................................................................................................... 14  
      4.1.2 Expectations of compliance .................................................................................................................... 15  
      4.1.3 Anticipation of behaviour change ......................................................................................................... 15  
   4.2 The Licensed on-trade ..................................................................................................................................... 17  
      4.2.1 Anticipations of the ban .......................................................................................................................... 17  
      4.2.2 Bar workers and health ......................................................................................................................... 19  
      4.2.3 Preparedness .......................................................................................................................................... 19  
   4.3 Pre-ban anticipations of other Key stakeholders .......................................................................................... 20  
      4.3.1 Environmental Health ........................................................................................................................... 20  
      4.3.2 Smoking Cessation ............................................................................................................................... 22  
      4.3.3 Local Councillors ................................................................................................................................... 23  
      4.3.4 Police ..................................................................................................................................................... 24  
5 Post-legislation responses .................................................................................................................................. 26  
   5.1 The smokers Response to the ban .................................................................................................................. 26  
      5.1.1 Post Ban: Changes in tobacco consumption ............................................................................................ 27  
      5.1.2 Alcohol and smoking ............................................................................................................................. 30  
      5.1.3 Breaking the habit .................................................................................................................................. 30
1 Executive Summary

A team led by Odette Parry and comprising colleagues: Ros Carnwell, Emily Warren, Sally-Anne Baker and Iolo Madoc-Jones and Natalie Peters at Glyndwr University; Laurence Moore and Simon Murphy at Cardiff University; with input from colleagues carrying out the Scottish and English evaluation work (Amanda Amos and Deborah Ritchie from Edinburgh), Sean Semple (Aberdeen) and Douglas Eadie (Stirling) was commissioned by the Welsh Assembly Government to carry out longitudinal qualitative research to explore the impact of the smoke-free legislation on attitudes and behaviour in Wales. The study focused on the impact of the legislation in community contexts where smoking and drinking takes place.

A range of qualitative methods were used to explore change at the individual and community level, in four socio-economically/geographically contrasting localities in Wales. This included repeat in-depth interviews, in a three month period before implementation of the legislation in April 2007 and 12 months later, with 4 respondent panels (across case study sites). Panels comprised: current and former smokers; bar workers, managers and proprietors of on-trade licensed premises; Environmental Health and Trading Standards officers; Police; and Smoking Cessation workers. An intermediate phase of data collection took place between the two main data collection phases, three months following implementation of the legislation and involved visits to all participating establishments and interviews with key informants. Focus groups with (mainly) non-smokers were held within communities following introduction of the legislation. In addition, discreet observations in bars and pubs were made at each case study site with selected monitoring of air particles in licensed on-trade premises pre and post legislation.

- The no smoking legislation gained overwhelming approval among non-smokers and smokers in our sample, across all case study areas. Bar workers (both smoking and non-smoking) reported improvements in their conditions of work, and feeling healthier, as a function of the ban.

- While many smokers anticipated that the legislation would help them to quit, only a small minority of the sample had quit. However, the vast majority of smokers in the sample, across case study areas, reported reduction in their level of smoking particularly associated with socialising in pubs/clubs.

- Respondents (smokers, non-smokers, those working in the licensed trade, Environmental Health, Trading Standards, Councillors, Police and smoking cessation workers) reported very high compliance with the ban, even in disadvantaged areas where problems with compliance were anticipated. There was reportedly high compliance among those in the hospitality section.
• Of all smokers, young people appear to have coped best with the smoking ban. Generally they reported reductions in smoking level and little change to their patterns of socialising (where and how often they socialised).

• Most smokers liked rules prohibiting smoking. The ban appeared to assist in breaking habitual smoking behaviour, and has particularly impacted on the relationship between smoking and alcohol.

• Older smokers who were unemployed and lived (often alone) in disadvantaged areas were the most affected by the legislation. These smokers reportedly socialised outside of the home less frequently following the introduction of the legislation.

• Trade among the licensed on-trade was most affected in cases where there were no resources for adapting facilities to maintain customer bases and attract new customers. Losses to trade were most keenly felt in disadvantaged areas. However, these losses were ascribed by respondents to a number of factors including unemployment and inflation, price of alcohol and competition from the off trade suppliers as much as the smoking ban.

• There was a reported increase in visibility of smoking and smokers as a function of no smoking in bars. High visibility of smokers outside bars was more likely to be associated with public nuisance in disadvantaged areas which prior to the ban had higher reported levels of alcohol related disorder.

• Smokers and non-smokers talked about the relationship between the legislation and stigmatisation of smoking/smokers and implications for low self esteem among smokers. At the same time, however, in effecting reductions in levels of smoking, smokers felt more able to control their smoking which tended to increase self esteem among some smokers.

• Non-smokers and some smokers favoured invisibility of tobacco products (e.g. removing tobacco products from view in supermarkets) claiming this might help smokers to quit.

• Pre and Post legislation monitoring in bars indicated significant reductions in air particles.

Conclusion

The smoke free legislation has had a marked impact on smoking behaviour in Wales and appears to have contributed to changes in attitudes towards smoking and to consumption. The legislation appears to have achieved a notable impact among smokers in both advantaged and disadvantaged communities, the latter which characteristically have both a higher prevalence of smoking and a greater number of heavy smokers. A major achievement of the legislation appears to be its impact on smokers’ habitual behaviours and in particular the role it has played in helping to sever the link between smoking and alcohol consumption.
2 Introduction

2.1 Background to the study

The Smoke-Free legislation in Wales was implemented on 2nd April 2007. This introduction of the legislation was anticipated to produce significant reductions in Second Hand Smoke (SHS) exposure (particularly in workplaces and in leisure facilities linked to the hospitality trade) and, linked to this, reductions in mortality (Albers et al, 2004; Ludbrook et al, 2004). It was also anticipated that the legislation might have another important public health benefit by reducing smoking among current smokers and changing social attitudes and norms around smoking.

Smoke-free laws have been found to be an effective strategy for reducing second hand smoke (SHS) exposure (Waa and McGough, 2006; Semple et al, 2007). Legislation to prohibit smoking in enclosed public places in Wales aimed to bring about significant reductions in SHS exposure (Eisner et al, 1998; Albers et al, 2004). The Welsh Health Survey (2007) indicated that 42% of adult non-smokers in Wales were exposed to environmental tobacco smoke. In Scotland, one year following implementation, it was argued that implementation of smoke-free legislation has led to a significantly large reduction in SHS exposure, particularly among non-smoking households (Haw and Gruer, 2007), and has brought about an 86% reduction in SHS for bar workers (Semple et al, 2007).

Exposure to the harmful effects of SHS impact negatively upon mortality levels (Ludbrook, Bird and Van Teijlingen, 2004). In 2005, the estimated number of UK deaths caused by SHS among those aged between 20 and 64 years employed in both the hospitality and general workforce each year was estimated at 617 (Jamrozik, 2005). The benefits of non-exposure to SHS have been found in relation to both respiratory related illnesses and, in those countries implementing smoking bans, acute coronary events (Cesaroni et al, 2008; Bartecchi et al, 2006; Sargent et al, 2004; Tong et al, 2007). It is therefore not surprising that great expectations surround the implementation of bans at the national level. In England, for example, it was estimated that the smoking ban will help to prevent around 40,000 deaths over the next 10 years (West, 2008).

Not only does the legislation have anticipated health benefits associated with decreasing SHS, it is also anticipated as having additional public health benefits by bringing about reduction in smoking prevalence and by changing societal attitudes and norms towards smoking. While we know that legislation does reduce exposure to SHS, there is little understanding about how it impacts on particular groups or communities (Dedobbeleer, 2004) or about the implications for changing attitudes towards smoking on levels and patterns of smoking (Giskes et al, 2006).

Changing smoking-related attitudes and behaviour has been found most difficult in deprived communities where smoking prevalence is highest and health inequalities most pronounced. In Britain, 31% of people in manual groups smoke compared to 22% in professional groups and even greater differences are found at the local level (Goddard and Green, 2005). In Wales, where 24% of adults smoke, 17% of adults in managerial and professional households smoke, compared to 31% in routine manual households and 41% in households headed by someone who has never worked or who is long term unemployed (Welsh Health Survey, 2007). In Scotland, it is known that there is less support for the smoking ban in more deprived areas (Richmond, 2007). Furthermore, a qualitative
study from Scotland investigating the compliance with smoke-free legislation (Eadie et al, 2008) found that most violations of the legislation occurred in bars serving more deprived communities.

### 2.2 Aims and objectives of the study

The overall aim of the study was to determine changes in attitudes and behaviour in relation to new smoking restrictions in community contexts where smoking and drinking take place.

The Research Questions were:

1. What are the perceptions and understandings of smokers and non-smokers (frequenting pubs, clubs and wine bars) of the smoking ban and its anticipated affect on their lives and lives of significant others (e.g. in terms of drinking, smoking and social behaviours)?

2. What are the perceptions of the smoking ban among samples of smoking and non-smoking staff (bar workers, managers, and other stakeholders whose livelihood may be affected by the ban) in settings where alcohol is served and how do staff members/management anticipate the social and economic impact of a smoking ban in their premises?

3. How is tobacco advertised/marketed/sold in settings where alcohol is served?

4. In what ways (if any) have smokers, non-smokers or key stakeholders attempted to accommodate any changes in advance of/in anticipation of the ban?

5. What are the perceptions of smokers, non-smokers and key stakeholders of the actual effects of the ban?

6. Are there any noticeable shifts over time in perceptions, attitudes or behaviours relating to smoking and drinking and to the ban?

7. What evidence is there that the ban is being enforced? How (if at all) is compliance/non-compliance patterned by context and locality?

8. How is compliance/non-compliance perceived by those enforcing the ban and those affected by it? How, if at all, do these perceptions differ between contexts and locales?
3 Research design

The study used a case study and panel interview design. A range of qualitative techniques was employed to obtain detailed and contextual accounts of smoking in the four case study areas in Wales, in a three month period preceding the ban (phase one), and 12 months following baseline (phase three). In addition visits were made to each case study site, three months following implementation, to talk to key informants and make observations in the immediate post legislation period (phase two).

The methods used included repeat in-depth (panel) interviews pre-and post-legislation with key stakeholders, focus group discussions, discrete observations and air monitoring.

3.1 The Case Study areas

City
South Wales valley town,
North Wales coastal town
Rural mid Wales town

3.2 The panel interviews

The panel comprised: smokers; bar workers and club/pub proprietors; police officers; environmental health/trading standards officers; local councillors and; smoking cessation workers. In addition, interviews were held with the Licensed Victuallers Association and Welsh brewery representatives.

3.3 Data Summary

3.3.1 Overall Summary of Data Collection

<table>
<thead>
<tr>
<th>Study Phases</th>
<th>Semi-structured Interviews</th>
<th>Unstructured interviews with key informants</th>
<th>observation</th>
<th>Air monitoring</th>
<th>Focus groups</th>
</tr>
</thead>
<tbody>
<tr>
<td>Phase One 3 months prior to ban</td>
<td>80</td>
<td></td>
<td>16</td>
<td>24</td>
<td></td>
</tr>
<tr>
<td>Phase Two 3 months post ban</td>
<td></td>
<td></td>
<td>16</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Phase Three 12 months post phase 1 data collection</td>
<td>90</td>
<td></td>
<td>16</td>
<td>24</td>
<td>8</td>
</tr>
</tbody>
</table>
3.3.2 Summary of Panel Interviews

<table>
<thead>
<tr>
<th>Case Study Area</th>
<th>Smokers</th>
<th>Licensed Trade</th>
<th>Smoking Cess</th>
<th>Env Health</th>
<th>Police</th>
<th>Councillor</th>
<th>Total</th>
</tr>
</thead>
<tbody>
<tr>
<td>A</td>
<td>B</td>
<td>B</td>
<td>B</td>
<td>B</td>
<td>B</td>
<td>B</td>
<td>48</td>
</tr>
<tr>
<td>B</td>
<td>9</td>
<td>11</td>
<td>1</td>
<td>1</td>
<td>2</td>
<td>1</td>
<td>41</td>
</tr>
<tr>
<td>C</td>
<td>10</td>
<td>6</td>
<td>1</td>
<td>1</td>
<td>1</td>
<td>1</td>
<td>42</td>
</tr>
<tr>
<td>D</td>
<td>7</td>
<td>8</td>
<td>7</td>
<td>1</td>
<td>1</td>
<td>1</td>
<td>41</td>
</tr>
<tr>
<td>Total</td>
<td>34</td>
<td>44</td>
<td>33</td>
<td>29</td>
<td>4</td>
<td>4</td>
<td>172</td>
</tr>
</tbody>
</table>

B: Baseline: 82 respondents  
FU: Follow up: 90 respondents

At baseline, a total of 52 respondents were smokers (34 selected as smokers and a further 18 from other –mainly licensed trade –panel). Smokers were aged between 17 and 70 years. Fifty six per cent were female and 44% were male. Most were heavy smokers, with reported average daily cigarette consumption in excess of 20 cigarettes. Eighty one per cent described themselves as dependent smokers, and 88% smoked their first cigarette of the day within an hour of waking. At follow up a total of 90 respondents were smokers (including 44 selected as smokers and a further 23 smokers among respondents associated with the licensed on-trade).

Gender and Age

<table>
<thead>
<tr>
<th></th>
<th>Pre ban</th>
<th>Post ban</th>
</tr>
</thead>
<tbody>
<tr>
<td>Age range Smokers</td>
<td>16-80</td>
<td>16-80</td>
</tr>
<tr>
<td>Gender Smokers</td>
<td>M 45.5%</td>
<td>M 46.7%</td>
</tr>
<tr>
<td></td>
<td>F 54.5%</td>
<td>F 53.3%</td>
</tr>
<tr>
<td>Repeat Interviews</td>
<td>80</td>
<td>56 (78%)</td>
</tr>
<tr>
<td>Repeat Smokers</td>
<td>54</td>
<td>37 (68.5%)</td>
</tr>
</tbody>
</table>

We acknowledge how smoking related attitudes, knowledge, beliefs and behaviours have changed in the period leading up to introduction of the legislation, and indeed how these changes have themselves contributed to the context for legal change. Because of this, although the study used a longitudinal design with pre- and post-legislation data collection phases, we could not assume that the pre-legislation phase represented a static baseline. At the first phase of the study we therefore set out to examine smoking behaviours and beliefs at that time and anticipations held about the legislation, among key stakeholder groups and to identify any similarities and/or differences between the case study areas. Here, we were particularly interested in any patterning of smoking related beliefs and behaviours by locality and social position.
3.4 Air Particle Monitoring

One of the driving arguments for legislation was that non-smokers should not be required to be exposed to SHS, a known carcinogen, in their place of work. Bar workers have been shown to have particularly high exposures to SHS with non-smoking bar workers producing salivary cotinine levels some four times the level of non-smokers who live with partners who smoke, and nearly ten times the levels of non-smokers living in non-smoking households (Jarvis, 2001).

Fine particulate matter such as PM$_{2.5}$ is a good measure of SHS concentrations particularly in environments where smoking takes place and there are no major sources of combustion. Measurements of PM$_{2.5}$ were taken in bars across case study sites before, and up to 12 months after, the introduction of smoke-free legislation in order to collect prospective information on the effect of the introduction of legislation.

PM$_{2.5}$ as a marker of SHS concentrations was measured covertly for 30 minute periods before smoke-free legislation was introduced, and then, again, at 12-months post-baseline, with a TSI Personal Aerosol Sampler and time-weighted averages calculated. The data from these measurements indicate a substantial and consistent reduction in PM$_{2.5}$ concentrations following implementation.

Discreet sampling: Measurement of PM$_{2.5}$ levels in pubs was carried out covertly using methods described in Semple et al (2007). That is, a battery operated aerosol monitor (TSI SidePak AM510 Personal Aerosol Monitor) fitted with an impactor was used in order to sample the concentration of PM$_{2.5}$. The monitor was placed in a small bag with a short length of Tygon tubing attached to the inlet and left protruding to the outside. The monitor was zero calibrated each day prior to use and the airflow rate set at 1.7 l/min using a Drycal DC Lite flowmeter. The monitor logged PM$_{2.5}$ concentrations at 1 minute intervals. The data were downloaded to a laptop using TSI Trackpro software (v3.41) and concentrations were converted to $\mu$g/m$^3$ using a conversion factor of 0.295 as described by Repace (2006).

Bars were visited by 2 researchers for a period of at least 30 minutes at each visit. The researchers became ‘customers’, purchased drinks and sat in a central area of the bar away from doors, windows or any ventilation equipment while also avoiding positioning in the immediate vicinity of anyone who was smoking. Repeat bar visits were undertaken on the same day of the week and as close to the time of the baseline visit as possible.

Table 1: Details of bars visited at each phase

<table>
<thead>
<tr>
<th></th>
<th>Phase 1</th>
<th>Phase 3</th>
</tr>
</thead>
<tbody>
<tr>
<td>Bars visited</td>
<td>12</td>
<td>12</td>
</tr>
<tr>
<td>Total visits</td>
<td>24</td>
<td>22</td>
</tr>
<tr>
<td>Mean Entry time</td>
<td>17:53</td>
<td>17:07</td>
</tr>
<tr>
<td>Median customer number</td>
<td>14</td>
<td>14</td>
</tr>
</tbody>
</table>
The method of discreet sampling used in this study is a particular strength of this dataset. Due to the high levels of interest and strong views held by both sides of the debate it was felt that overt sampling within bars may well have influenced smoking and/or ventilation use behaviours in the bars being sampled resulting in either higher or lower SHS concentrations to those present on typical days. A full discussion of some of the issues surrounding discreet data collection in public spaces is presented in a paper by Petticrew et al (2007).

3.5 Locales: the case-study localities

Case study localities were selected to represent a range of criteria including geographical location, urban/rural, and relative advantage/disadvantage.

<table>
<thead>
<tr>
<th>Code</th>
<th>Designation</th>
<th>Sampling</th>
<th>Relative Advantage/disadvantage</th>
<th>Urban/Rural</th>
</tr>
</thead>
<tbody>
<tr>
<td>A</td>
<td>City</td>
<td>Docklands City Centre and local</td>
<td>Advantaged</td>
<td>Urban</td>
</tr>
<tr>
<td>C</td>
<td>South Wales Valleys</td>
<td>Town Centre</td>
<td>Disadvantaged</td>
<td>Urban</td>
</tr>
<tr>
<td>B</td>
<td>Mid Welsh provincial</td>
<td>Town and rural</td>
<td>Advantaged</td>
<td>Provincial/Rural</td>
</tr>
<tr>
<td>D</td>
<td>North Coast</td>
<td>Town</td>
<td>Disadvantaged</td>
<td>Urban/rural</td>
</tr>
</tbody>
</table>

3.6 The study participants

The participants in the study comprised:

A purposively recruited panel of 82 participants across all localities including smokers, licensed on-trade workers, Environmental Health/Trading standards Officers, Smoking Cessation, Police and Councillors, and representatives from a brewery and the Licensed Victuallers’ Association.

Eight focus groups (two in each area) were convened with (mainly) non-smokers, 3-5 months following the legislation. Three focus groups were with young people (one youth group and two schools) and five were with older people (recruited through community groups).

Participants received a fee of £15 for each interview in which they participated. In some cases focus group participants received a fee of £10, and in other cases a payment was made to the hosting organisation (e.g. school or community group).
All interviews and focus groups were recorded (with the consent of participants) and fully transcribed.

3.7 Main data-collection periods

Panel participants were interviewed on two occasions. The first interview took place during a period 3 months before the legislation came into force (Time Point 1). Of these 82 respondents, 56 were successfully re-interviewed at stage 3 (one year following the first interviewing phase). An additional 34 respondents (smokers and licensed trade workers) were recruited to the study at phase 3 (n=90). An intermediate phase, three months following implementation involved visits to participating establishments and interviews with key informants (n=8). Focus group interviews with (mainly) non-smokers were held 3-5 months following implementation of the legislation.

3.8 The panel interviews and focus groups

The in-depth panel interviews with smokers/ex-smokers were based on topic guides that addressed participants’ past and current relationship with tobacco. The interviews explored:

- participants’ smoking behaviour or exposure to second-hand smoke (SHS) within the context of their daily lives
- perceived levels of dependency on nicotine
- their beliefs and understandings of “passive smoking”
- ‘rules’ or regulation of smoking within different settings including the home
- awareness, understandings and attitudes towards the legislation
- any changes in patterns of smoking and consumption

The focus groups explored participants’ views about smoking in relation to their particular setting, attitudes towards smoking and perceptions of the legislation.

The other panel groups were asked about:

- knowledge and understanding of the legislation
- perception of their role (if any) in enforcement
- preparedness for the changes
- pre-legislation expectations of the impact of the legislation on their setting and community
- post-legislation perceptions of the impact of the legislation
- views and experiences of the new law within their particular setting

3.9 Observations

Observations were carried out by the research team, working in pairs, in licensed on-trade premises (bars and clubs), at both data collection waves. The observations were semi-structured and recording was made of the layout of the venue, smoking-related signage, designated non-smoking areas, how
many smokers and non-smokers were present, how often and for how long smokers left the venue to smoke outside, whether smokers congregated or smoked alone and so on. Any smoking-related incidents were recorded as “vignettes”, along with critical incidents of observed infringements of the law. In all, sixteen observations were conducted at both data-collection waves.

3.10 Data analysis

For the thematic analysis, the interviews were read by members of the research team and a thematic categorisation system was developed. The verbatim data were then coded (and robustness of codes was tested against the data set). Emergent themes were then explored in relation to study phase, locality/community and respondent groups. Extracts from the interview transcripts are used to evidence themes and points within them. Each data extract is followed by a respondent identifier code, the key to which is as follows.

Respondent Key

The Panel Respondents.
The first letter of the Respondent code signifies the case study area (A,B,C or D).
The second letter/s signifies the respondent panel: S=smoker, P=Proprietor, B=Bar worker, Po=Police, EH= Environmental Health/Trading Standards, CS=Smoking Cessation, C=Councillor.
Where there is a number before the full stop, this signifies the unique respondent number in the respective panel.
The number following the full stop signifies the study phase (1 or 2).

The Focus Group Respondents
The first letter signifies the case study area (A,B,C or D).
The second letter signifies the group as either older people (O) or young people (Y).

3.11 Ethical approval

Ethical approval for the study was obtained from Glyndŵr Research Ethics Standing Committee (GRESC). The study complied with the B.S.A. guidelines for ethical research involving human participants, observed the key requirements of informed consent and anonymity, and participants were informed that they could withdraw from the study at any stage. The study included an element of covert participation and air monitoring (in clubs/pubs), which raises ethical issues attendant around overt/covert research design. Here advice was sought from GRESC and colleagues in Scotland who likewise carried out covert data collection.
It was not necessary to seek approval from a NHS ethics committee.
3.12 Venues and customers

While each case study was characterised by licensed on-trade premises attracting different types of customer group, there were some general area specific distinctions. In Area A the city, for example, the sample reflected the mix of ‘local’ pubs, establishments catering for tourists, and young people’s venues. City dwellers and visitors have a far greater choice of venues. Many are part of chains which were able to prepare for the ban by providing facilities for smokers, or adding new attractions (such as food and entertainment) to attract new customers. Many had introduced no-smoking before the ban was introduced. Here there was least concern about the ban.

In Area B, the rural Mid Wales town, most bars cater for all age groups although some are particularly popular among younger people, who tend to move between pubs, especially at week ends. Here, there was not such a great difference between pubs as in the city, there were no large chains and less opportunities/resources to expand.

The two more disadvantaged case study areas (C and D) were characterised by a harder drinking male culture, particularly apparent throughout the day. Premises in these areas had few resources to adapt and most feared going out of business, because of the ban.
4 Pre-legislation expectations and attitudes

4.1 The Smokers

4.1.1 Smokers’ anticipations of the ban and expected impact on their smoking-related behaviours

The majority of smokers (across the case study sites), and particularly younger smokers, welcomed the ban, anticipating that it would help them to cut down or quit:

I think it is a good idea, I mean hopefully it will help me. (AS9.1)

I think the ban is a great idea I think it will help lots of people to stop. I think it may help me to stop, I know that I will not be able to smoke after the ban so I hope I can succeed in stopping. (BS9.1)

I think that it is good I do anyway, because it stops people, it will make people cut down and everything. I think it’s good. (CS2.1)

While, there was some evidence of hostility to the forthcoming legislation in disadvantaged areas (and pockets of disadvantage in the two more advantaged sites), even in these areas most of the smokers we interviewed were positive about the ban. While these smokers appeared less optimistic that the ban might be ‘a magic pill’ for quitting, many felt it would help them to cut down:

It will help me to stay off but it won’t get me off cigarettes. (CS6.1)

It wouldn’t be easy no…but when the baby comes, that might help cos we can’t have smoking in the house...that might help us. Maybe this ban might just help us. (DS2.1)

I think it’ll be good, especially in pubs, I wouldn’t like to take my child to pubs and it’s like all smoking and I think second hand smoke is worse than smoking normally and I don’t want anyone smoking in front of my little one so I’m happy that it’s happening and it could help me quit. (DS1.1)

Most smokers reported on their familiarity with regulations which prescribed where they could and could not smoke. The impending legislation was therefore perceived as an extension of those regulations, and around which smoking might or (in the case of those who planned to use the ban as an aid to quitting) might not be accommodated:
I also discipline myself. I do like a cigarette when I have had something to eat and I do like a cigarette when I am having a drink...but I can do without and it’s all down to disciplining where you can and can’t smoke. (BS5.1)

I went to my friend’s house yesterday and she has got a baby. You have to go outside, so it is, you cannot just light up there you will go without. (BS2.1)

I don’t think not being able to smoke in certain areas will stop me from smoking because you can’t smoke in clothes shops, restaurants most cafés and that has not had an impact on me and public transport they stopped that years ago. (CS1.1)

I think the principle of having non-smoking as a standard is good and you are not going to have exceptions. If there were places I would go there and I would not give up. (AS4.1)

4.1.2 Expectations of compliance

Expectation of compliance among smokers was high, with no-one claiming that they would flout the ban. However, in the more disadvantaged areas, some suggested the legislation might be difficult to enforce and that some landlords might bend the rules:

I know the publican here and when the ban comes I will go out to smoke because I don’t want to make trouble for him, I think my friends will accept it too even though they don’t like it but just to be fair to the owner. (BS4.1)

Most will abide but not in some pubs around here. The local pub is rough and the landlord is a bit of a clown - if they can’t stop drugs what can they do about smoking? (CS6.1)

If they really, really want a cigarette then I’m sure (the landlord) would not mind them going upstairs into his flat. (DS8.1)

4.1.3 Anticipation of behaviour change

The younger smokers in the sample, across case study areas, for the most part did not anticipate the legislation would affect their socialising in pubs/clubs. For them, the most important aspect of going out was about meeting friends and socialising:

At the end of the day it is not going to change the people that I associate myself with and spend time with. (AS3.1)

I wouldn’t not go somewhere because there’s no smoking. (DS3.1)
Indeed among those who had visited Ireland and Scotland since the introduction of smoke-free legislation, there was anticipation among younger smokers that the ban might be ‘sociable’ and ‘fun’:

> When I went to Scotland it was fun and pleasant to go outside with lights and heaters. Very friendly sociable not at all unpleasant. Really accommodating – not much of a deterrent there. (AS2.1)

(We) had fun when all the smokers go out onto the street and socialise. (BS3.1)

You get to meet lots of people because they are smoking. (AS4.1)

These respondents anticipated that premises offering the best facilities for smokers would be the most patronised:

> Pubs which provide the best facilities for smokers will be most popular. (AS2.1)

While some older smokers (across case study areas) claimed they would accommodate their smoking to the legislation “it’s unlikely I’ll change pubs – I’ll just go outside” (CS9.1), in the disadvantaged communities, generally, the anticipation that the ban would affect the ways in which smokers socialised was more prevalent:

> I think you will find a lot more people going to the shop to get some beers and staying in instead. There will be a lot more house parties (DS8.1)

> I can see a lot of pubs closing because no one wants to go for a pint when they can’t have a smoke...there’s no way I’m going to stand outside in the pissing rain to have a smoke. (DS1.1)

> The other side of it is that there’s other people who come into the pub-there’s elderly people and they are there during the day and that is their social life. They sit there and have a drink and they have a smoke. I think what’s going to happen to them – because they are not going to be going in and out- they won’t come (out). (BS1.1)

> I go to cafés occasionally and have a coffee or something; I won’t be going to cafés any more. If I can’t have a coffee and a fag then that is it. (CS7.1)
4.2 The Licensed on-trade

4.2.1 Anticipations of the ban

The majority of licensees and proprietors of on-trade establishments interviewed anticipated that the ban would have a negative impact on trade. Respondents most concerned for the future had least resources available for adapting their premises to accommodate smokers:

Certainly from the business perspective, this threatens my livelihood and my investment. It could finish me and my family. I will have invested over £20,000 and it might not pay off. It’s a gamble. (AP2.1)

I am certain that I will lose trade; I am hoping for nothing drastic. I’m having to look at other ways of covering it at the moment. I can tell you that the percentage (of smokers) will be a lot higher than the percentage taken in Wales generally; people who come into this pub are more likely to smoke. Say 50%. (BP1.1)

When the ban comes in it will have a big impact on my revenue coming in, with the rates being so high, all the other bills, electricity bills the businesses have got to pay, I would imagine that my takings would be down by in the region of 60 or 70%, which I would not be able to manage on. So after the smoking ban comes in I can see myself being bankrupt within two months. (DP2.1)

The main concern expressed by these respondents was that, following implementation of the smoke-free legislation, regular customers would smoke and drink at home:

I think, a lot of people won’t come out, they will probably sit at home and have a drink and a cigarette. (AP1.1)

I think initially sales will drop as a result of the ban. We shall just have to see what happens after that. (CB1.1)

It happened with the supermarkets first of all, when the supermarkets were licensed to sell beer it lost the pub trade a lot of money, people were going to the supermarket and buying a slab of beer going home and drinking it in the house. I think it was about 10 or 12%. It will happen exactly the same with smokers now, they will go and buy their fags and booze at the supermarket, have a BBQ and invite a few friends around. (DP2.1)

While those with more resources were identifying ways in which they might retain their existing (smoking) customer base and attract new (no-smoking) customers, others maintained smokers to be the backbone of on-trade custom:
If the public was really looking for that (smoke free venues) you would expect those (non-smoking) pubs to be the busiest pubs in the world, and they are not.... So that does not say to me that people are rushing out to find non-smoking pubs, which has been an argument of the pro ban people. There are individual businesses where trade increases but they are well set up for it. But they are generally the managed house businesses where you have got more food, and where you have got the opportunity to invest and improve the quality and the service standards. There is no market as a whole where trade has increased because of the ban so the one certainty is that trade is going to go down, and it will go down disproportionately and in a very unpredictable way, massively in one site and quarter of a mile away it will go up. (AO.1)

There are a lot of people out there that like non-smoking pubs and will go for that reason, but there are not enough of them to support a pub. (AP3.1)

90% of my regulars smoke and I’m worrying about losing them. I’m worried because I don’t have any grants. The lounge cost £10,000 and the front/back will be the same. Also my electricity bill is currently £250 a week and what’s it going to be like after I install outside heaters? Everything is so expensive. (AP2.1)

Premises catering for more ‘marginalised’ smokers (such as the unemployed, older or simply those who lived alone) felt that the legislation would impact negatively not only on their takings but also on the customers themselves:

We get a lot of older customers in here. May be in the week 70% of our customers are older people – mainly men. At lunchtime its older retired men and they are going to suffer as a result. A lot of them can’t smoke at home because their wives/families won’t let them. (AP1.1)

(This pub) will be of all the smoking pubs in the world that is the one that will give you the idea of how the smoking ban is going, because it is 90% of the people that go in there smoke. A lot of them are on benefits and there are social problems, that’s the type of pub it is. Most of the people that drink (here) in the day are people on long term sick, people with not great health, divorced, separated. (CP2.1)

Around lunch times you tend to get the older people coming in and people who just wander around town shopping, around 30 plus really. (DB4.1)
4.2.2 Bar workers and health

While a minority of bar workers argued that “people that are bothered about smoking, are less likely to take a bar job” (AB2.1), prior to the ban, bar workers (smokers and non-smokers) across all case study areas described problems which they associated with working in smoky environments

I have got quite a bad chest over the last couple of months it (smoke) does irritate it. (AB.1)

If there is heavy smoking like New Years Eve for instance will be a problem for me later in the evening once I have come out of the kitchen into the bar. (BB3.1)

You come into an environment like this and there is smoking. When I smoke my chest is terrible, and I am in here all the time. (CB1)

I don’t like it to be honest with you, I don’t mind around the rest of the pub, it’s the bar because people will just leave cigarettes burning in ash trays and it will go over me. I have had problems with my skin and having bad chests and things through it, to be honest I don’t really like it. (DB1.1)

Bar staff reported additional negative consequences of working in smoky environments:

Even though I do smoke myself the thing I don’t like about it is going home and stinking. We all have the same issues when we go home stinking but I think we all smoke... If we want a cigarette we have to go and stand the other side of the bar. But I could be serving someone, and someone standing there could be smoking. (BB1.1)

4.2.3 Preparedness

Among proprietors and licensees in the on-trade, there was concern about delay in the receipt of information about the forthcoming legislation from the Welsh Assembly Government. This concern was two fold. First it involved receipt of information about the regulation of smoking in licensed premises, particularly regarding signage, enforcement and penalties:

I haven’t received any information I know I’ll be fined – but how are they going to enforce it? Will I get signs – will they give them to me – or will I have to buy them? (AP.1)

I’m sure that there will be regulations in terms of the size and the lettering size. I’m sure we will be faced with having to display signs so many per square feet, meters whatever and they will have to be of a certain size and we have not had any guidance in terms of that. (BP1.1)
For most part concern focussed on information about how the licensed on trade might adapt premises to accommodate smokers in outside smoking shelters:

“We are attempting to make provision for smokers; it is the area where we are sat now. Where this window section is we would remove the windows and create banisters and a safety feature, we have to have these plans passed (but) our council do not have directives from the Welsh Assembly yet. (DP1.1)

(Planning permission) takes 19 weeks to get it through – because first of all you’ve got to get someone here to look at where you want to put it – then you’ve got to get an architect to do the plans – then you’ve got to submit your plans which takes the council 6 weeks to look at and come and inspect and then they turn you down and want something different – its 19 weeks – and what are we left with 5-6 weeks? (CP4.1)

In anticipation of the ban, and in an attempt to be ahead of the game, some establishments adapted premises and introduced no-smoking regulations in advance of the ban:

“At the end of this refurbishment work we are reopening as a non-smoking establishment, and using it as much as a PR swing as we can, being the first in (this area) and one of a few in (the city), and one of the biggest in the country to do this so early. (AP4.1)

Notably, adaptation and preparation was only a possibility where the necessary resources were available. The vast majority of preparatory work was undertaken by city venues. Comparatively few preparations were made at other case study sites.

4.3 Pre-ban anticipations of other Key stakeholders

4.3.1 Environmental Health

Prior to the ban, Environmental Health and Trading Standards Officers were cautiously optimistic about how the legislation would be received:

Generally we are a law abiding nation. People on mass don’t flaunt the law and fundamentally we must remember that the vast majority of people do not smoke, approximately 70% + don’t – so that there is a tremendous peer pressure there and in a sense there’s a self regulating perspective (CEH.1)

Across all case study areas, respondents were confident that the environmental health who “have trained 500 people in this new piece of legislation” (CEH1), along with lessons learnt from the
experience elsewhere about who to train, would stand them in good stead upon implementation of the legislation:

One thing we have learnt from Scotland and Ireland is that you don’t need to go out and employ 20 smoking enforcement officers because they’ll be sat round doing nothing. So we said right “X amount of this officer’s time will be spent on smoking and the rest will be spent on food or health and safety” (AEH.1)

Concerns about how the regulations would affect planning for smoking shelters were expressed by respondents across all sectors. Enquiries about the regulations comprised the bulk of enquiries from the licensed on trade:

We have had a lot of enquiries come in from the licence premises, the pubs and clubs in relation to smoking shelters that’s our main enquiry at the moment. (DTS.1)

Nobody’s going to make an application for planning permission until they actually know what the regs say - the problem has been that the regs aren’t due out until the 31st January, the ban comes in on the 2nd April, you’ve got to get planning permission in that time so say you give yourself 2 weeks to get your plans drawn up and you get them into the planning authority, they’ve then got to turn around the application fast enough for you to get your structure up, or your awning on your building before the 2nd April and its not going to happen because the planners aren’t geared up to do it (AEH.1)

It’s only in the last few weeks we’ve started receiving any applications at all – now it’s a bit chicken and egg – we haven’t got the regulations so I think the trade will be making a justifiable complaint on that side (CEH.1)

Other than issues of planning and building regulations, problems anticipated by these respondents largely related to grey areas in the legislation. That is, how the legislation would affect other groups:

Social Services who have to visit people in their own homes, there is nothing in the legislation at the moment that prevents a person from smoking in their own home in the presence of a visiting Social Worker. Long term residential homes have allocated smoking areas, we are facing problems here. We have a large hospital. We will have a problem with this, they have a policy to ban smoking on all hospital property including the car park, but there will be a concession made for long term mentally ill patients with consent from their doctors, also a concession for patients in mourning, I don’t know at this stage where these people will smoke, ...I also foresee problems with rural traditional Welsh pubs...where smoking may well continue, also some of the small private clubs. (BEH.1)
4.3.2 Smoking Cessation

Those working in smoking cessation wholeheartedly welcomed the ban, anticipating that it would help smokers who were trying to quit:

*I think it can only be positive. The patients I see and certainly the ones I see on a weekly basis many of them don’t have a problem quitting during the week and they find it a real struggle when they go out with their friends on a Friday night to the pubs when friends are smoking around them and I think it will help them enormously and the feedback I’ve had from patients as well is that it will help.* (DSC.1)

Prior to the ban smoking cessation workers anticipated, or had already experienced, an increase in their client bases which they associated with the forthcoming legislation. This increase caused some concern about resources for those delivering the service:

*I don’t think we will reach the stage where we say I’m sorry we can’t see you (but) there was a huge knee jerk reaction, because I think the public at large do not know what is happening they hear the word ban, and their first thought is that I am going to have to stop, they don’t see that there is any chance that they would be able to smoke again, so it is right I have to stop now. When they understand that they can stand outside a pub and smoke, it comes down slightly.* (ASC.1)

*We haven’t had any resources, we haven’t had any extra funding. We could well be swamped because I understand Scotland were but we’re trying to address that by doing more groups so we’re seeing bigger numbers in groups rather than one to ones so we can see a lot more people in an hour. So I anticipate that we will get a lot busier but we certainly haven’t had any extra funding or resources.* (DSC.1)

In addition to resource concerns, smoking cessation workers cautioned that the ban would not be ‘a magic wand’ for smokers who wanted to quit:

*There’s an enormous demand (fuelled partly by the ban and there’s just me doing it. I’ve seen more due to the smoking ban but it’s not a magic wand. They have to want to quit –The ban will help these people in the process of quitting- they won’t be so tempted when they are out in the pub. I’m sure it will impact on my work I’m noticing it already...people have to want to give up- they need to be motivated, if they are not motivated I don’t think the ban will help them to stop. Only those going through the quitting process.* (CSC.1)
One smoking cessation worker identified disadvantaged smokers as those who might find the ban most problematic as these smokers were among those who found quitting a difficult if not impossible endeavour

\[ I'd \ say \ probably \ underprivileged, \ perhaps \ people \ who \ are \ unemployed \ relapse \ more \ and \ access \ the \ service \ time \ and \ time \ again \ so \ they \ do \ keep \ coming \ back. \ (DSC.1) \]

4.3.3 Local Councillors

Councillors interviewed across case study areas anticipated that the introduction of the legislation would, for the most part, pass smoothly among smokers. In the City particularly, where the Council had already initiated smoke-free legislation at a number of venues:

\[ A \ couple \ of \ years \ ago \ the \ council \ took \ a \ lead \ by \ banning \ smoking, \ we'd \ already \ prior \ to \ that \ banned \ smoking \ in \ all \ council \ offices \ and \ premises \ which \ included \ places \ like \ (concert \ hall \ and \ theatre) \ and \ other \ publicly \ accessible \ venues. \ (CC.1) \]

Overall the feeling was that non-smokers would welcome the ban and smokers would adjust:

\[ People \ will \ adjust \ very \ quickly, \ you \ will \ have \ the \ real \ chronic \ smokers \ and \ the \ unsocial \ who \ will \ avoid \ places \ but \ the \ majority \ will \ adjust. \ They \ will \ grumble \ they \ will \ complain \ they \ try \ and \ smoke \ anyway \ but \ within \ 6 \ or \ 7 \ months \ they \ will \ adjust \ and \ just \ accept \ it \ as \ a \ fact \ of \ life \ that \ you \ don’t \ smoke, \ you \ will \ either \ go \ outside \ to \ smoke \ or \ they \ will \ not \ smoke. \ (CC.1) \]

\[ I \ believe \ that \ generally \ people \ will \ welcome \ and \ accept \ the \ ban. \ I \ think \ people \ will \ execute \ the \ legislation \ themselves, \ it \ will \ be \ self \ supporting. \ (BC.1) \]

Councils supported a ‘softly softly’ approach to enforcement, although this would be backed up by penalties for non-compliance:

\[ Well \ we’re \ hoping \ that \ compliance \ won’t \ be \ too much \ of \ an \ issue, \ I \ think \ the \ experience \ that \ we’ve \ had \ from \ Edinburgh, \ I \ think \ since \ the \ introduction \ of \ the \ ban \ last \ year, \ is \ that \ there’s \ only \ been \ six \ penalty \ notices \ that \ have \ been \ introduced, \ so \ we’re \ hoping \ that \ there \ shouldn’t \ be \ too \ many \ problems \ in \ terms \ of \ the \ actual \ compliance. \ (CC.1) \]

\[ I \ would \ like \ to \ see \ a \ softly \ softly \ approach, \ I \ wouldn’t \ like \ to \ see \ it \ hardened \ up \ (but) \ we \ will \ act \ swift \ and \ fast \ when \ the \ legislation \ is \ in \ place \ once \ we \ have \ decided \ what \ action \ will \ be \ taken \ against \ offending \ individuals \ or \ establishments. \ (DC.1) \]
The issue for councillors prior to the ban was not smoking or smokers per se but the relationship between smoking and drinking and the implications for public nuisance/order following implementation. For councillors representing disadvantaged areas, issues about the ban and smoking were linked to the bigger problem of alcohol.

The biggest problem I think will be with pubs, where smokers move into the street and with this the possibility of unacceptable noise levels, those matters would probably come under the licensing laws and would be the publicans responsibility. (BC.1)

In the disadvantaged areas this was perceived as particularly problematic:

The issue of alcohol is the big problem and all council members feel very strongly about the sale of alcohol to anybody, the availability of it, the easy access to it. … we can police the supermarkets but there are so many small off licences and other sources where alcohol can be bought and very very cheaply which adds to the alcohol problem we have in (the town) which has a severe alcohol problem and all the councillors want to do something about this… you don’t see anyone in (the town) after 8 or 9 pm, definitely on Friday or Saturday. (CC1)

There are groups of drinkers drinking this cheap (cider), which is 80 or 90 proof a bottle. They are acquiring this cheap stuff and are drinking it in the only place that they are allowed to as a group which will be perhaps in an old disused warehouse or the back of an old building or down a side street, maybe that is what we will force smokers to do as well. The poorer especially the more deprived class of people because they will not be able to sit in a pub or a café and have a fag. (DC.1)

4.3.4 Police

Police respondents across the case study areas did not anticipate many problems arising from the forthcoming legislation. All anticipated that any problems would relate mostly to young people, alcohol and pub closing times on Friday and Saturday nights. The highest concentration of young people in this respect was down town Cardiff, however even here “I don’t think it will be a big problem, I think there will be a slight change”

The new licensing act came into force in November 2004 we were the most pro active police force in the country four years ago when we saw the new licensing act come in, our department increased in strength three fold, we had each and every application for extra hours coming to us we visited the premises, we met with the operators of the premises and we made various representations to them of how we wanted them to run it, most people were asking for 24 hours and we said that no one is having 24 hours and
nobody did with the exception of a few supermarkets. We designated (a main) street as an area where we would not grant any more licensed premises, we call it a saturation area, when we visit pubs and clubs we will serve the conditions on them which means we want quality CCTV cameras covering all the areas that the public can access, not to allow drinkers in under the age of 21 years of age, they have to (have) registered door staff and on international days they have to make sure that every premises does not have glasses or bottles, every drink must be dispensed in a non glass receptacle, that has worked since we put that condition in on the licensing act and it has reduced the amount of glassings and bottlings by 35%. (APo.1)

In the other three case study areas police anticipated the legislation might exacerbate noise nuisance around licensed on-trade premises at night:

Towards the end of the night, it will certainly have an effect on local residents with the noise, certainly those in town. Some other areas where you have pubs in built up areas I’m sure there will be an effect, whether it will be a direct effect for us, will it increase violence…, it will increase the chances of people that have been avoiding each other and then seeing each other on the street. There is no logical reason why it should; we don’t operate with logical people half the time. But I suspect that it may do but I cannot see a huge increase to be honest with you. (BPo.1)

Most concern was voiced in the two least advantaged areas which reported more alcohol related disorder associated with pubs emptying late at night:

Yes and perhaps them coming onto the street and things kicking off in the street, perhaps the pubs and things are ok, but it brings groups of people onto the street its intimidating for other people. At the moment with all the kids around it’s very intimidating for people coming into town, especially the elderly, people that aren’t going out for a drink, it might make the town more intimidating if more people are on the streets. (CPo.1)

Most violence in (this town) is alcohol or drug related: mostly alcohol. You will get the flash points where people are waiting to go into clubs, people waiting for taxis and people when they are inside the pubs and clubs…. When they hit the pavement they shouldn’t be out in public with a glass. You (either) get the licensee to get them to come in or we (the Police) will ask them to do it. (DPO.1)
5 Post-legislation responses

5.1 The smokers Response to the ban

Across all case study areas smokers reported complying with the ban. For the vast majority it was described as acceptable, with only a very small minority reporting “I don’t like it at all, I think it’s against our human rights” (CS5.2). These data suggest a notable shift in the perceived social acceptability of smoking:

At first it was a bit annoying (but) now it’s just got into a regular thing and we are used to it like. It’s not really bothering me. And it’s nice to go into a pub and for it not to be smoky or any place to be honest with you. (CS18.2)

Well I just think that people have just adapted. We moaned for a while and all the jokes going around and I think everybody just thinks of it as normal really. (AS6.2)

I have complied really, but I’m not happy about it, I still come to the pub I still like to have a drink, what I do miss is not being able to have a drink with my cigarette. (BS4.2)

It’s alright. I know lots of people that moan about it but if you’re going to smoke you know you need to do whatever they say don’t you really, I mean I don’t mind it. (DS.5)

Not only was there evidence of acceptance and compliance, the majority of smokers reported on various positive aspects to the legislation. First of these was health, with several respondents noting that:

Communities are healthier since the ban, I am certain about that, and there is no doubt about that, pubs are certainly healthier places. (AS10.2)

I am all for the ban. I know I sound a hypocrite because I smoke myself but I would do anything to make people’s health better. (BS3.2)

Smokers also commented on the improved air quality in pubs/clubs “the air in the pub is better (AS2.2)” and that their clothes smelt better (some smokers were intolerant of other’s smoke) following an evening out than before the ban:

I think the ban has been an excellent move, there was a real need for it even myself who likes the occasional cigarette, I think it’s wonderful being able to go home not smelling. (BS8.2)
If they have got a shelter there is so many people packed into that shelter having ciggies that I can’t stick the smoke in it and I’m a smoker myself. I can’t handle it. (CS4.2)

5.1.1 Post Ban: Changes in tobacco consumption

Whilst, for the most part, our respondents appeared to accommodate to the legislation with relative ease, in the early days of the ban some smokers reported a phase of adjustment to their smoking behaviour. This phase appeared temporary and involved ‘tanking up’ on nicotine to tide smokers over to the next cigarette:

...the early days of the ban. I remember driving from (here) to Aberystwyth ... and I remember more or less chain smoking the whole way to Aberystwyth, knowing if I can’t smoke in the office I am going to smoke in the car the whole time, but this has now stopped. (BS7.2)

As we shall see later, post-ban the majority of smokers claimed a reduction in their level of smoking, associated with their visits to licensed premises (pubs and clubs). We found that the level of smoking among respondents following implementation of the legislation was in part related to the importance which they attached to socialising with friends. Female smokers in particular tended to describe smoking as a bonding activity. When smokers socialised together, this bonding might occur outside as well as inside the pub/club. Hence some (particularly) female respondents noted that the ban afforded opportunities to socialise (albeit outside) with other smokers:

I find that smokers socialise easier than non-smokers if you have a cigarette you will always have someone to talk to someone who will talk to you and you will talk to someone. If you just went out into the street no one would talk to you. So it does have a socialising effect to it as well. (AS12.2)

I mean you get to make lots of new friends because you’re talking to people outside that you wouldn’t talk to before. And plus making new friends when you’re out there because like I say you know they’re all whingeing about coming outside I’m like ‘yeah it’s freezing’ and then you get talking about something else and you go back in and have a few more drinks and dance on the dance floor. (DS5.2)

However, those women who socialised with non-smokers were often loath to forfeit conversation with non-smoking friends inside the pub, in order to smoke outside:

If I’m with a group of friends I tend not to go out for a smoke as often as I would like to because it rather spoils the reason you are in the pub in the first place; which is to be with friends. (BS5.2)
When I am out in the pub, I definitely smoke less, you time it you know - whoever you are with they will go out for a fag and they will say are you coming for a smoke. (AS6.2)

If I am with non-smokers and I haven’t got anyone to go out and have a ciggie with I don’t bother I stay there, then when I come out of the pub and walk home then I will have a fag. (CS4.2)

When you’re in company and having fun talking to friends, I would consider this to be inappropriate since it would break the flow of conversation. I just think why bother (to smoke) resulting in smoking less. (BS7.2)

In the disadvantaged areas, there were a higher number of smokers using pubs and clubs and it was more common for groups of smokers to vacate the premises to smoke. Nevertheless, smokers had to return inside in order to finish their drinks, which meant that smoking was reduced, and often, someone from the party was elected to remain to watch over drinks left behind:

Instead of just sitting round the table and drinking and smoking like we used to, I mean if there’s three or four of us there it’s not so bad because two of us will go out, if there’s just me and (female friend) there like there was last time, she had to stay in and I’d go out then I’d come back in and go “your turn now”. (DS5.2)

In the case of solitary drinkers (often older people and men), the main reason given for smoking less while at the pub, was discomfort. Where pubs provided no facilities for smokers, these customers either stood outside doorways or (in poor weather) moved to pubs which had smoking shelters.

I’m just about 70 now I’m getting too old to give up, and I certainly still enjoy a cigarette, it’s possible that I smoke a little bit less when I’m in the pub that’s only because I have to go out in the cold each time so maybe that has had a little effect. (BS4.2)

You’d think you’d be smoking more but because you’ve got to go outside sometimes, and especially if it’s cold, you don’t seem to get up as much as it was when you could sit down and just get one out of your bag. (DS2.2)

I do go to other pubs but very rarely because I don’t like them but I do go, the reason I sometimes go is if it’s raining outside and it’s really bad I go to another pub, the reason being they have a smoke room. If I come here I have to stand outside and get wet through so that’s why I go to another pub. (DS12.2)

Some smokers (particularly females) reported that as a function of the ban, they had become ‘outdoor’ smokers:
I think it’s definitely turned me into an outdoor smoker. Whereas it was deemed to be quite naff and anti social to smoke outside in the street…. maybe not so in decades before I was born, but in my life time. I can remember times when even quite heavy smokers would choose not to smoke on the street. They would wait until they got to someone’s house or their own house. So my smoking has changed in that respect. I have become a walking along the street holding a cigarette person. (AS11.2)

Other changes in smoking related behaviour, reported by a minority of respondents, related to the way in which smokers smoked and a switch from ready rolled cigarettes to rolling tobacco. First, it was argued by a couple of respondents that when smoking outside no-smoking premises, smokers inhaled more sharply and deeply in order to obtain the most nicotine in the shortest period of time. Hence while many reported smoking only part of each cigarette, it was suggested:

However the way in which people smoke their cigarettes has changed so now they are actually breathing more tars in. (AS11.2)

If I was sitting in here smoking I would smoke it right down to the end until I couldn’t smoke no more then I would drop it in the ash tray. Because you are outside in the weather you are chucking half away all the time. (CS12.2)

Second, in areas of disadvantage it was apparent that some smokers had switched from ready rolled to rolling tobacco; although given the wastage described above, it is likely that this was for financial reasons:

I don’t bother buying normal cigarettes now just use my roll ups so I roll one when I’m in the pub and then go out and smoke it and I think that’ll do me for the next three of four hours. (DS5.2)

Certainly, since the legislation, many respondents had perceived a cultural shift away from smoking, which made their endeavours to cut down and/or quit, easier:

I have been thinking about it for a while. But this is the final straw so this has given me a positive nudge into doing something which I have been thinking about doing for years and so now I will give up and the people that I have met that have given up have said that they feel better they save more money and they don’t get terrible pains when they are exercising. (BS9.2)

It’s the smell I am sure in some ways the ban has made it easier and I’m sure if I didn’t have a boyfriend and a son who smoked…if no one smoked anywhere at all, clearly it would be that I would think about it less often. (AS8.2)
Because I can go a long time without a cigarette, I don’t think about it, it’s only when you smell it. (DS3.2)

5.1.2 Alcohol and smoking

Perceptions of the impact of the ban on smokers’ alcohol consumption were mixed. Where, for example, it was prohibited to take alcohol outside, some found they were drinking more:

When you are drinking you have got to drink the whole thing, so you have gone in bought it and you are like I fancy a smoke, and you have got to drink the whole pint then you go outside for two minutes and you come back in and have to buy another drink. (AS10.2)

A very small minority reported increased alcohol consumption because they did not know what to do with their hands:

If I go to the bar and I’ve got a drink I automatically lit a ciggie up with my drink but now the smoking ban is in place I found that I drink more because I have got nothing to do with my hands. (CS4.2)

In the majority of cases, however, smokers reported little or no change in alcohol consumption, although marginally more reported drinking less as the long held association between smoking and drinking had been undermined by the legislation:

During the summer, when the ban first came in, of course you could...go out and take your pint out with you. But in this sort of weather the pint gets left on the bar and then you have your smoke and go back in. So I am drinking less. (BS12.2)

I do drink alcohol and it used to make a difference to the amount I smoked. But now since the ban I am getting more used to having a drink without a cigarette. (BS7.2)

5.1.3 Breaking the habit

Following implementation of the legislation, overwhelmingly, smokers reported surprise at the length of time they could go without smoking. A good example of this was observed in a pub where smokers watched an international rugby final. BS3.2 summed up the responses of a crowd of smokers present:

I never thought I would see the day when I could sit in a pub watching the Six Nations Cup without a cigarette in my hand. (BS4.2)
This response was echoed in reports from the majority of smokers we talked to:

I don’t need it as much as I used to... I think the more time you have between having a cigarette it can expand and expand. When I know I’m going into an environment where you can’t smoke and there is no where to smoke - I can do that. (BS6.2)

There is just a total blanket ban no one has got a choice about it. It is a lot better... I used to get through a ridiculous amount of cigarettes when I was going out and now I don’t because I am in a place where I can’t smoke. (AS9.2)

5.1.4 Going Out

The impact of the ban on the level at which smokers used pubs was mixed. Generally the ban did not appear to deter young people from visiting pubs/clubs:

I think the ban is a brilliant idea. I have heard that some smokers in (this town) are complaining about it, lots of them don’t go out as often. I enjoy going out more now since the ban, because I really want to stop smoking. I think the ban helps me in a way. (BS9.2)

Only a minority of smokers reported visiting the pub less often as a function of the legislation:

I just don’t go to pubs as much any more. I don’t actually like pubs as much now they are not smoking, I think they smell more. They are full of children, I just can’t bear it. I might as well be in a café; I don’t think pubs have been improved (by) the ban on smoking. (AS8.2)

I think perhaps I go to the pub less often since I cannot smoke there. So I am more likely to stay at home or go to someone’s house rather than go to the pub, (but) it’s not actually stopped me from going to the pub. (BS7.2)

I think people are drinking more at home because they can’t, it puts a lot of people off going out, it definitely does. I don’t know really, it wouldn’t put me off going out because I can go a long time without a cigarette, I don’t think about it, it’s only when you smell it. (DS3.2)

The smokers reportedly most likely to be affected by the legislation in terms of their usage of pubs were older, unemployed smokers who used pubs in the day time, and were more likely to be located in disadvantaged areas:

Before the ban came out I did a head count. There were 18 of us in there and 17 were smokers, say out of that 17 now, we all go there. But the few that would be in there every day, it’s the social thing, they would come
down and have 2 pints couple of fags and a chat with the boys and that or whoever was in there and then they would go and do their shopping and go back home and you don’t see a few of the people (now). (If) they can’t have a fag and a chat with their friends, its pointless going in there in the first place (so) “I may as well come down and do my shopping and go straight home”. (CS15.2)

I used to go out to socialise and I very rarely drank but I used to go out regular but I don’t go out - the ban it is part and parcel of it yes. Because prior to the ban some places had no smoking areas which you have got to abide by them anyway you know in a restaurant and things like that and we would go out for a meal and I would go into another room for and have a cigarette. If you go for a meal you have got to go and stand outside, we don’t go out for meals or anything very often now. I think I have been out three times in the last 12 months. (CS17.2)

I perhaps don’t go out as often because it is easier to sit in the house and have a cigarette and a drink, than what it is to go out it’s a lot cheaper to stay in. I would go anywhere if there was an offer on so perhaps I would go to (a supermarket) wherever there is an offer on for cheap beer. (CS19.2)

5.1.5 Stigmatisation

Most smokers reported awareness of the stigmatising affect of smoking. In one case, a respondent reported feeling less stigmatised since the smoking ban because the choice to smoke inside public places had been removed:

I do go to restaurants and pubs and I have noticed a difference since the ban. You can walk into a restaurant you don’t have to worry because there are no designated areas which make you feel like a leper. (DS4.2)

For the most part, however, smokers felt stigmatised as a function of heightened visibility since introduction of the legislation:

... the sad knot of smokers that are forced to stand outside office buildings now, guiltily trying to blend into the exterior of the building by hiding behind a pillar or moving down the road to someone else’s door way so that they cannot be associated with the workplace that they have just come from. (AS7.2)

If anything, smokers when they’re outside having a fag feel like lepers. You are having a cigarette and cars are coming past, you think they are thinking ‘oh look at him having a fag outside there’. You get people laughing at you the non-smokers are laughing at you having a fag outside. (CB3.2)
5.2 The Licensed On-Trade

5.2.1 Compliance

Apart from minor and isolated infractions (often in the early days following the ban), across all areas those working in the licensed on-trade agreed that smokers had accepted the ban and that compliance was not a problem for them:

There was an old man and he continued to (light up). He just said that he wasn’t happy with it at all and he would go to the toilet and light up, and he would light up and walk to go out. And I said if you do that once more I will ban you, and I did. (AP1.2)

All the people that smoke...we thought oh no what are they going to be like? But they get up and just go outside. (BB1.2)

Some of them are pretty big smokers as well and they really don’t mind. (CP1.2)

We have to do constant checks in the toilets obviously people trying to sneak in there and hide in the toilet to have a cigarette. We haven’t really had that much of a problem with it. We have had two or three people in the first three weeks of the ban coming into effect without really thinking (so) not too much trouble really. (DB.4)

People accepted the ban almost entirely and accepted that they had to go outside and smoke. (DP1.2)

5.2.2 Trade

Prior to the ban, the big issue for those involved the licensed on-trade was the way in which the legislation might affect their trade. Respondent assessments of the impact on trade varied enormously, as a function of type of establishment (e.g. brewery owned or free trade) their customer base, resources and location. Those least affected were establishments in the two more advantaged areas, who relied less on wet trade (alcohol), had access to more resources, were able to diversify, had a designated outside area where customers could take drinks, and provided facilities (such as shelters and heaters) for smokers and where there was little or no competition. So, for example, in our mid Wales rural town, where establishments did not, or could not (because of financial or space constraints) provide outside facilities for smokers, there was little reason for smokers to take their custom elsewhere:
I don’t think it actually stopped anybody from coming in, the regulars, we didn’t have problems with visitors...the total impact it didn’t actually deter business don’t think and once everyone got used to the fact that there was no smoking in public areas it kind of went quite smoothly, I was expecting some drop in trade but there wasn’t. (BP3.2)

In the down town city area, most respondents talked about the legislation creating a level playing field. In other, outer city areas, there was more evidence (which will be discussed later) of establishments competing with each other for custom:

I think if it was just our pub we would have lost a lot of trade as people want to sit down and enjoy a cigarette with their drink. But because it is the whole of (the city) I don’t think we have lost much trade (AB.2)

Establishments relying less on wet trade and more on dry trade (food), reported less custom loss associated with the legislation:

We have pushed the food a lot more to try and draw customers in to have food because we were not sure how the smoking ban was going to affect the business. So far so good. (AP3.2)

The food trade is more important to us. Its good profit as well as the customers; families - and you can improve on your business that way. (AP5.2)

This was particularly apparent in the case of a city based large chain establishment, able to offer beer at extremely competitive prices. Whist the profit on beer was low, younger customers spent considerable sums on designer drinks:

On a match day, the last match day we took almost £60,000 in one day. Well it’s so cheap so probably not that much money (on beer) when its £2 a pint, how many pints can you drink,...but then you get the people that come in on a Saturday night and spend £60 in one go, blowing it on shots and champagne and everything. (AB2.2)

Establishments located in the two disadvantaged areas were most likely to report a negative impact on trade. This was largely described as a function of smokers preferring to stay at home to smoke:

The last two days, yesterday and the day before were the worst days I have had since April last year so they were really bad so it is definitely getting a lot worse. This time last year we probably would have made three or four times of what we made yesterday. The takings have never been as bad as they have been the last few months. (DP.2)
It’s cheaper now to buy a few cans and sit in your house and smoke in your own environment without being forced to go outside. But a lot of the people, they still come in and have a drink because they still want to socialise. (DB5.2)

People don’t go out too much. The pubs are not busy they won’t come out when it’s raining to be stood outside getting soaking wet for a cigarette. It’s cold and wet, so it has affected the pubs. Whether it’s the time, January - but there is a lot of people drinking in the house now and they can sit in comfort and have a cigarette you know. (CB1.2)

The response to falling trade experienced by one club in a disadvantaged area was to provide incentives to attract young people by offering deals on alcohol:

It’s an eye grabber...the idea started around students, a lot of students had £15 to go out on and it was like there is not much point in going to the pub. It costs £3 a pint or whatever, so if you charge that, basically a lot of people come in and they don’t spend £15, they might be here all night. They will have a couple of bottles and a couple of cokes and then they will move on. It averages out that they would have spent £12 to £15. So if you are charging £15 on the door you are guaranteeing £15 from every single customer as they walk in. The stock we get in, we are still selling it above cost, you get certain ones which are a lot more than others, the popular brands like (cocktail mix), you know. You are buying more of those in because your customers like them anyway, so the profit you are making on it is still about the same. You are not losing a great deal, you get other drinks and customers think they are getting a really good deal when they are still paying really on the door. You do get people who come in and hammer it, but then they start getting silly (and) they get warned if they continue acting silly and making a fool of themselves then they will have to be put out. (DB3.2)

While many respondents, not just in the disadvantaged areas, did report “takings have gone down” (AP.1) and “trade is down” (BP1.2) at the beginning of 2008, many respondents levied the blame for this drop at factors other than the ban. These included, the weather, competition and (particularly in disadvantaged areas) a lack of money and, related to this, the availability of cheap beer in off-trade (especially supermarkets) outlets:

I think because it was such a novelty in the beginning and the weather was nice when it started so people didn’t mind. I don’t think there has been any; I mean I can’t say it has gone quieter. There is other factors, I think other people are realising there are other factors to have made it go quieter. (BP5.2)
However, as time has progressed our business was affected by a complete separate event which was some competition that opened in the town. And the truth is that that has had a greater effect on our trade. And in terms of comparisons now, I am not in a position now to be able to make comparisons because I don’t know if we are relatively quiet because of the competition or the smoking or the change in the licensing laws two years ago. There has been an anomaly thrown in full of competition, so I am not able to make that judgement anymore. (DP1.2)

Some of it is down to you can buy beer cheaper now and I think that is making it a lot easier for people to buy from the supermarket then they can smoke at home. It isn’t just the fact that the smoking ban has just come in, it’s the fact in the last year the price of beer sales in places like (supermarket) have gone down. I mean sometimes you know I see things in (supermarket) that is selling cheaper there than what I get it from the brewery. (DB3.2)

I would say that we have lost customers but not because of the smoking ban but because of the lack of jobs in the valley. (CP1.2)

It is also arguable that the impression that less people were using pubs was (in some cases) a function of the fact that smokers congerated in shelters or elsewhere outside, rather than because they used pubs less. This was bourn out by the observations of the research team:

Most people when the weather is nicer are outside. It’s very very quiet inside the pubs, they are either in the smokers areas either to the front or the rear of the property, so it has become a lot quieter inside. (AP3.2)

All the old regulars are there despite what we thought what would happen to them they still come in - the pubs are a lot quieter (because) they either have to stand outside or they have got an area in the back which is open outside. (BB1.2)

If I have only got half a dozen people in the bar and five of them are smokers, because there has always been a higher percentage of pub goers that smoke as opposed to the public at large , five of those six are smokers they will all go out together. If someone else walks into the pub to see where everyone else is they will see one person in the bar. If they will see I only have one person in, they will come in and go out again because they think there is no one there. (BP1.2)
5.2.3 Facilities

To reiterate, where establishments had access to resources (space and money) they tended to employ strategies to attract new non-smoking customers (through food) and/or adapt premises to cater for smokers (provision of shelters and heating). This created competition at the local level, which undermined the ‘level playing field’ imperative:

There is not a lot you can do with (this pub) where you have got a really small frontage. You are out on the street, which if I lived across the road I wouldn’t be too keen on them being out there all hours. If it’s a summer’s day you will sit outside, if it’s winter you used to smoke inside. Unfortunately there is nothing that we can do about it we have just got to live with it. I think if people spent thousands on shelters, i.e. (a pub chain), you can afford to do it. When you are a lessee like myself, you can’t afford to do it. (AP4.2)

There is the (another pub) across the road and he has big gazebos, heated ones and a big beer garden as well. So they have better facilities so some of them (customers) do go over there. They still come in here but not that often. (AB4.2)

There are places around here that are slightly sheltered and they have got the automatic heaters that come on for a few minutes at a time when you press the button. So it’s a lot better for the smoker to go there and have a drink. (DB4.2)

The ones with the beer gardens certainly do get a lot more trade. There is a pub up there that has a little outside bit. They have got some heat lamps out there. Its perfect for them everyone can go out have a ciggie and still have their drink because there is no drinking in the streets, really is there, so people can’t stand outside and sup a pint. (DB3.2)

It was clear, however, that catering for smokers was just one element of a suite of measures employed by better resourced establishments who might, in addition to shelter and heating, provide big screen TV and Satellite sports programmes:

(This is) the one pub in (the town) that does cater for smokers. You go to other pubs and you see a little canopy up, where we have gone a bit further to make it more comfortable for the smokers... When the smoking ban came into place we thought that there was going to be a bit of a difference but there really hasn’t, not even when it has been chucking it down with rain. It’s not a major problem because we have got the canopy, a small shelter out the front and the porch way - it’s a porch but people will stand out there and have a cigarette. (Satellite channels) which we were big on that as well - the rugby internationals and the big football games, because we have got
While establishments with resources have tended to cater to their customers in many ways, proprietors placed little importance on the provision of tobacco vending machines. Many had removed their vending machines following the implementation of the ban and those that retained them, reported that they were not a viable source of income. Most said “why bother when you can get them next door, (convenience store) much cheaper” (DP.2), and the proprietor of a young people’s night club noted:

“Our vending machine sales had gone down drastically even before the ban came into force. (AC1.2)

5.2.4 Customer base

For the most part, and particularly where there was little or no competition, pubs tended to keep their regular customers:

All the old regulars there we thought what would happen to them but they still come in. (BB1.2)

Establishments catering to young people reported little or no loss of custom related to the legislation:

The ban has made no real notable difference to the (night) club in reality, and much less than we anticipated in the first place. (AC4.2)

This was associated with what was described by a respondent as the diminishing trend of smoking among young people:

One thing I should say is for some time we saw far less smoking in the club than used to be..., possibly because smoking was seen as something less fashionable amongst young people than used to be and partly because people saw that the ban was on it’s way and that may have put additional pressure on people to give up smoking. So from our experience the ban has worked very smoothly. (AC1.2)

Those establishments which were least dependent on their wet trade reported attracting more families and children:

It does encourage more kids to come in though I think, I think more families. (AB2.2)
Since the ban there has been a little difference in my opinion. There were more of my customers that didn’t smoke than those who smoked and now more people come in that don’t smoke and I would like it if there was more of that. I have noticed that families come in and have food but they tend to stay and have more drinks since it has become smoke free. (BP4.2)

A whole new influx of customers...with families and children’s menus being introduced and so forth. (There’s) a definite change in the clientele. As well, I mean, because of children, it became more of an eating venue again...the reason to visit us changed... (with) less pressure (on the) bar and more (on) table service. (AP4.2)

Conversely, those unable (or who chose not) to woo this new customer base were disappointed to find they had no new trade from non-smokers:

I am quite aggrieved because of all the people that used to say that I don’t come into pubs because it’s smoky, and I haven’t actually picked up one additional customer. I think people are going to use pubs whether they smoke or not. (BP1.2)

It was in areas of disadvantage where respondents were most likely to report loss of trade associated with older, unemployed, socially marginalised customers – largely daytime trade:

I know two customers who have never been out, two customers used to be in the pubs every day and the both of them have never been in the pub since the smoking ban they drink in the house now and that’s two that I know of, there might be more. (CP2.2)

During the day time we typically get more older customers than we do at night time. I think there has been a bit more disappointment from them about the smoking ban, we don’t see much of some of them, some don’t stay as long. (DP1.2)

We have had several customers that just don’t come at all anymore, just because they will pop into town get their bits and go home sort of thing or go around their friends. A lot of them did like to come in and have a ciggie and a coffee just before they went and did their shopping sort of thing so I mean that’s, it was quite convenient there as we are right on the corner they would get off the bus and come and have a coffee and think god its cold out here, run out and do their stuff and come back have a coffee and go home. It was just a convenience that they could do it. We found that they are not stopping for their coffees as much anymore. (DB3.2)
5.2.5 Working conditions

The majority of bar staff we talked to reported benefits of the ban. First they reported that their clothes no longer smelt of cigarette smoke:

Yes it is nicer, when you smell your clothes and they don’t stink. (AB4.2)

I would say is that the smell is brilliant, you don’t get the smoke on your clothes so much, or the smell in the pub and fag burns and all that sort of stuff. (CB3)

It’s way better for us because we don’t get smoke behind the bar especially for the people that don’t smoke and you don’t go home with your work clothes stinking of smoke like we used to. It’s much fresher and cleaner. (AB2.2)

At the same time, many reported noticing other (body) smells previously masked by tobacco smoke:

Smoke used to cover up all the cigarette smoke used to cover up all the other smells and now...you could smell the toilets and all sorts over there. Before I used to just smell cigarettes but that was natural and normal. (AB3.2)

The atmosphere in the pub has changed and the people who come here can now smell other smells (but) I won’t go into that. I do have a spray behind the bar for this purpose. These were smells when smoking was allowed that you couldn’t smell due to the smell of smoke masking it. (BP4.2)

As a rule it really hasn’t changed apart from the smelling. You smell a lot more body odours now than you did before because the smoke covered that you know, but that’s about it. (CB3.2)

Notwithstanding this, the vast majority of bar staff approved of the ban, reporting improvements in their work environment:

I think the ban is a good thing. It makes life behind the bar, life in a place like this, makes things easier in my opinion. Everyone feels better at the end of the night. (AC2.2)

Interestingly, despite reported trade loss, very few respondents reported staff cuts or shift reductions. The most adjustment reported in working patterns was less reliance on casual staff in a minority of cases:
5.2.6 Health

Certainly, in terms of health, respondents reported an improvement as a function of the ban:

*Before I came here (to work) I have never had any sort of chest or anything like that, but the first couple of winters before the ban I was very chesty. I’d never been to the doctors with anything for the chest before, but touchwood I have had nothing since. (BP5.2)*

*I was terrible, I used to suffer from sinus. I still have sinus it hasn’t gone away but I don’t have it now. I don’t have to buy tablets to get rid of it anymore. You know I can breathe better and I am not going home smelling. It’s lovely. (CB1.2)*

*I think in myself I feel a lot healthier because I work behind the bar all the time and I do feel a lot healthier. (DB1.2)*

In one case a proprietor reported how his decision to buy a hotel (which was purchased five months following the ban) was influenced by the planned legislation:

*I think the ban had an effect on my decision to purchase this Hotel. I would not want to put the rest of the family at risk, since none of them smoke, and they would be expected to work behind the bar, and with the place being full of smoke, it had an effect on people like Roy Castle and so forth. I certainly would not have bought the business if smoking was still permitted. (BP5.2)*

5.2.7 Problems/concerns

Despite concerns expressed prior to the ban about planning processes, issues to do with planning were raised by only a small minority of respondents following implementation.

*We had the awning fitted to the front of the property and we have had an issue with that now. We put it up and afterwards it became a conservation area. So we have now been told that we have to take it down, so we are in the appeal process now. (AP3.2)*

*One thing we are wanting to do is to provide a smoking space which is off the street for the smokers who come here to the club, and at this stage we*
have not succeeded to do this. As it is a difficult problem, we have
designated a door on the side of the building for smokers to go out but
planning regulations and fire regulations counteract each other, and
because of this it has been difficult to finish the work. (AC1.2)

Pubs situated in, or in close proximity to, residential areas reported complaints from local residents
in some cases. After midnight when pubs closed their doors to new customers, this did cause some
problems for bar staff:

You will get a lot of people coming up and saying, “oh have you closed the
doors are we allowed to go out for a cigarette?”. But we say that we prefer
them not to, “but if you are desperate go, keep the noise down”, and most
of the time they do. Yes they have to go in the back, but because it’s outside
next door or perhaps people walking past or living could hear the noise,
that’s been a problem in the past you know. (BB1.2)

We also tend to have complaints from one neighbour in particular. When, in
the summer time and the matches are on, there are a lot of customers
outside. We do try and keep them under control and they are quite
respectful. But we do have complaints from the neighbour. (AP .2)

In one case, local by-laws forbade alcohol consumption outside (on a paved area fronting the street)
after 7pm. Up until that time customers were permitted to sit in a corralled area with their drinks:

There are no drinks allowed out into the smoking corral, which doesn’t have
a shelter at all. It’s simply a half blue canvas barrier, no drinks to be taken
out after 7pm and that has caused a problem trying to police that in the
summer. (AM1.2)

Most problems with compliance and public order were apparent in disadvantaged areas, in cases
where establishments were unable to provide outside shelter for smokers:

The main trouble we have is people won’t want to edge into the cold outside
to have a fag. They all like crowd in the little door way we have got there,
and we are always telling them they are going to have to push out you
know. (DP3.2)

We have already received a notice off the council telling us that there were
people smoking in the porches. My argument with that is we have got signs
up that they are not to do it. If the council see them, why don’t they go and
tell them? Why should we have to confront these people who have been
drinking and get aggressive. And you phone the police and you can’t get
hold of them. (CP2.2)
While, to a lesser extent concern about “the number of people that have congregated outside on a busy night” (DP1.2) was reported by respondents from the mid Wales rural town, it was in the disadvantaged areas that most public disorder was reported:

*The town is so wild you can’t leave things out so its no point me spending a couple of hundred pounds putting heaters out and this type of thing because they last no time. We put them up twice and they ripped them off. We put lights out and they ripped them off, so no more.* (CP2.2)

Certainly in the poorer areas, and late at night in particular, people smoking outside, along with smoking-related debris, were most in evidence:

*You can walk down the high street and people are smoking everywhere. Cigarette butts everywhere. There is no cigarette butts bins around this area. There is not even a litter bin to be honest, (and) you can have women all with buggies and all teenagers smoking their heads off.* (DB5.2)

### 5.3 Environmental Health/Trading standards

#### 5.3.1 Compliance

Environmental Health and Trading Standards representatives reported compliance to the legislation exceeding expectations:

*People are still being nicked for not wearing seat belts and for drinking and driving, but the compliance for smoking is astonishingly high.* (AEH.2)

Even in the more disadvantaged areas, where expectations about compliance (although generally high) were tempered by knowledge of high levels of smoking and more (alcohol-related) public disorder, respondents reported unexpected compliance levels:

*We have done the best part of 4,000 visits since the ban. And the good news is that 3,905 (out of approximately 3947) completely complied, 3,631 were compliant for signage and I have got 305 here that were not...so we are looking at about 10% if you like that were not compliant in terms of signage and 1% (32) where we found people smoking...We expected compliance but the response that we have had has been very, very encouraging.* (CEH.2)

*The compliance levels really are very high...the feedback that we are getting from our routine visits from other officers that it is being complied with.* (DTS.2)
5.3.2 Enforcement

At the time of the second phase of interviewing (January-March 2008), there was just one prosecution pending in Wales, and a few fixed penalty notices (usually associated with smoking in work vehicles or in work places). All areas reported maintaining a ‘softly softly’ approach to enforcement, involving visits across the board and, where necessary, warning letters:

We have not had to issue any penalties. We have, as enforcers, sent about 10 warning letters out, following a complaint or resulting from something we have noticed. The problem then is normally solved. We do have a problem from time to time with people smoking within work vehicles, lorries, vans and cars. We have reports on this which show a lack of understanding regarding the smoke free legislation. We have problems of people smoking within taxis which have been registered by the council, we’ve had reports that drivers are smoking often when waiting for calls when stationary. This may have been solved for now by letter and by adopting an informal approach. And I hope this will continue like that. (BEH.2)

You know you are only looking at a tiny percentage...you are looking at 1% in warning letters and in terms of fixed penalties we have only actually issued four, of which three were in work vehicles and one in a work place. (CEH.2)

Since the ban there have been two occasions where we have issued fixed penalty notices and they have both been smoking in Bulk fuel tankers so it’s not actually the premises or the work place. (DTS.2)

5.3.3 Problems Anticipated

To reiterate, the main problem which respondents (at phase one of the study) had anticipated, centred on delays in planning approval for smoking shelters. The problem was described as a function of delays in the issue of WAG guidance on provision of shelters, coupled with the length of time needed to process applications. In the actual event, this problem was offset by the unexpected good weather. That is:

They knew that the planners were not going to be ready, but the plans were saved by the good weather. Outdoors was the venue of choice, with or without a shelter, so the planners were very much saved by that (AEH.2)

Whereas timing did not materialise as a major problem, respondents did report on misunderstandings about the regulations on shelters, and also on how the regulations were to be applied:
A break down in communication between different departments has caused Planning to approve something then Trading Standards going out saying that it doesn’t comply with the regulation. (DTS.2)

What we have found problematic is the misunderstanding relating to the rules relating to smoking shelters. It has created problems in the town with some licensed premises not having space for shelters and no protection from the wind and rain and (there is) a misunderstanding of what the rules are. (DEH.2)

The guidance...didn’t really elaborate on what kind of shelters will comply and what type of leeway, and there were no distances. It was all officers’ discretion. So in one sense it makes our job a lot easier because we can use our discretion, but we are not being consistent because obviously we all have our different opinions on what distances etc. (DTS.2)

Other issues relating to the legislation highlighted by respondents included “increase in litter relating to smoking”, particularly “where smokers gather in doorways”, fear of possible “anti-social behaviours”, “noise levels” near licensed premises and “smoke drift”. In addition one respondent noted (anecdotal source) an increase in the number of house fires since April 2007, which might be related to “people staying at home drinking quite heavily so they can smoke”.

Interestingly, while prior to the legislation some concern had been expressed about the possibility of increased incidence of drink spiking (as a result of drinks left unattended inside the pub while customers smoked outside), this was not raised by respondents as a problem post implementation:

There is rarely any evidence of it (spiking) and if you look at their drinking pattern and you think well quite possibly not...people anecdotally talk about my ‘drink must have been spiked’ (but)...this is as good an excuse as ‘it was a bad curry’. The evidence is extremely anecdotal. (AEH.2)

5.3.4 The future

Respondents highlighted two key issues to be tackled. The first related to current exemptions and issues about workers entering private homes:

I think as far as the exemptions go we’ve probably gone as far as we can without the public going “no we don’t like this now”. But those areas we’ve got to look at and the issue of people going into people’s private houses-peripatetic workers, health workers notably, going into homes where people smoke - and what can you do about it. Some of the local authorities have fiddled around with it. Foster carers are another thing that we have fiddled around with, foster carers who smoke. The trouble is you are talking about people’s homes so you do then get into bigger human rights issues. (AEH.2)
The second issue highlighted for the future was smoke drift:

The issues of smoking outside is more difficult. We are going to have to start looking at that as we are getting smoke drift going into neighbouring premises and I suppose if you take a pragmatic view you could say well the risk to those people is not as great as a risk to people who previously stood in pubs. But that, transferring a risk, however small, is not necessarily desirable. (CEH.2)

5.4 Smoking Cessation

5.4.1 Numbers accessing the service

As anticipated by smoking representatives, contact to the service increased prior to the legislation, and to a large extent this was from smokers who, while panicked by the prospect of the ban, were not in an appropriate state of readiness to quit:

It was my main concern, and we did get quite a few people that came and weren’t ready. But they listened that they weren’t ready and others that came, that said, “oh no I am going to try”, but really they weren’t ready. (CSC.2)

Representatives from smoking cessation services, generally agreed that following a short pre-ban period, when enquiries from and contact with clients swelled considerably, the anticipated increases in the client base failed to materialise.

We have had one of our normal Januaries. January is one of the busiest months. Nothing like last year with the ban coming in, more like the year before. (ASC.2)

The anticipations probably were that we were going to be inundated with client requests from GP surgeries and some referrals. We were busy, we were steady but we didn’t notice a marked increase, and we certainly weren’t swamped with referrals as we had anticipated. (DSC.2)

We are seeing a few more younger people accessing the service which is quite encouraging but generally not a great increase than we normally see, and certainly this time of the year. (CSC.2)
5.4.2 Quitting

Among representatives from smoking cessation there was a consensus that the legislation reinforced changes in public attitudes towards smoking and cultural changes in normative culture to no-smoking. Awareness among smokers about the diminishing opportunities to smoke legitimately was, it was claimed, encouraging them to re-evaluate their own smoking behaviours:

I think what it has done is finally made peoples mind up “it’s about time I packed up” and that’s the sort of thing, that is coming through from the younger age group. The older ones have been thinking about it for a while and it had finally tipped the balance for them to do it. (BSC.2)

I think its making people think about their smoking habits. There are a limited number of places they can smoke now and I think it’s certainly encouraging people who smoke to think about stopping. (DSC.2)

The general consensus is that it’s not easy to smoke anymore now and there’s so many obstacles to get over. (They) can’t smoke in the workplace; they can’t smoke in the pub. The only place they can smoke is in their own car ...so it has prompted people perhaps to think about “well why am I doing this”? (DSC.2)

Noticeable changes in the cultural climate towards smoking prompted one respondent to comment upon the growing awareness among smokers of the social stigmatising affect:

We are seeing more people coming through the service now and it’s generally because they feel that they are a social outcast if they do smoke, and they don’t want to be seen outside smoking. I don’t think it’s because they don’t want to go outside in the cold weather, I don’t think they actually want to be seen going outside, there’s the whole stigma issue. (BSC.2)

5.4.3 Visibility

One issue highlighted by smoking cessation representatives was the implications of decreased visibility of smokers and smoking, for smoking cessation:

I think it has made a big difference when they are out socially in that when they are in the venue they don’t see anybody that’s smoking, that’s been the really positive thing. They consciously have to make that attempt to go outside to smoke, and most people that have given up with me have told me that has been a huge factor in making it way, way easier this time. A huge factor. (CSC.2)
Talking to a lot of people who smoke, if cigarettes were no longer visibly on display, you know when you walk into supermarkets or whatever and the lottery counter and the sweet counter and the cigarette counter and they are all out on display, I’m not saying they won’t buy, but if they are not visible... (DSC.2)

5.5 Local Councils

5.5.1 Acceptance and Compliance

Across the four case study areas, representatives from respective councils were in agreement that implementation of the legislation had been smooth and that compliance was high. This held in more disadvantaged areas characterised by high levels of smoking, where it had been anticipated that the legislation might “polarise relationships between members of the community”

I think people have just taken it on the chin, because deep down they must have already known it was an anti social habit anyway. And yes its quite amazing really one would have imagined a group of smokers fighting for the right to smoke, but there has been nothing. (CC.2)

5.5.2 Displacement issues

Three issues raised in interviews with council representatives were noise pollution, litter and increase of smoking around entrances and on streets (with the attendant health risks).

The only problem I think it may have caused is forcing smokers out on to the street, then there is a tendency for people to gather, it may well be that this has caused the problem of noise and litter. (BC.2)

There have been a few cases reported to us where pubs without any space for a smoking room for the customer, the smokers have sort of hung around by the front door. (DC.2)

Smoking on the high street. You can walk along the street and someone can be smoking in front of you and the smoke it’s just awful, and I think this ban on smoking in public places should be extended to the high streets. (DC.2)

5.5.3 Alcohol and Smoking

In the two more disadvantaged case study areas, council representatives tended to focus upon alcohol as the most prominent local problem. While reporting that there were pockets of antisocial behaviours associated with a minority of specific premises, which might possibly be exacerbated by
large numbers of smokers on the street, it was noted that public houses had been experiencing a longer term trend of diminishing custom:

*Pubs generally are struggling anyway. There are many evenings in the week when they are not getting the crowds in anyway and they have got to go the extra mile and put football on a big wide screen telly. (DC.2)*

It was particularly in these two areas where respondents highlighted the problem of cheap off-sales alcohol, which could be purchased and consumed at home:

*The issue of alcohol, is a big problem...We can police the supermarkets but there are so many small off licences and other sources where alcohol can be bought, and can be bought very, very cheaply which adds to the alcohol problem we have here, and we do have a severe alcohol problem. (CC.2)*

### 5.6 The Police

#### 5.6.1 Public disorder

While it was acknowledged that a significant amount of crime was alcohol related, and that more people congregated outside of public houses as a function of the legislation, the ban per se was not described as a priority issue in terms of police time/work.

*I would say, from our point of view, there is definitely an increase in people stood outside the pubs, and that has always got a potential for flash points. And there is little things like certain pubs and certain locations where the road might be a problem (although) I can’t think of any particular incidents. (BPo.2)*

*It (the ban) is pretty much off the radar. (Here) in particular they stand outside with pint glasses and bottles and stuff so it’s an issue for the licensee to prevent them from coming out, and an issue for us to make sure they are actually behaving outside. (CPo.2)*

In the more disadvantaged areas which had acknowledged a greater problem with alcohol disturbances, more concern was expressed about people drinking outside as a function of the ban:

*People are drinking outside as part of the smoking ban and leaving glasses outside and there was concern that things could get smashed and be used as weapons...we were getting the licensing department to write letters to the pubs and clubs to sort of advise them, and one of the boys went around to the door staff to try to stop them letting people going out with drinks. (CPo.2)*
In residential areas police reported increased complaints about noise from those smoking outside pubs:

*The only implications I have noticed are the complaints about noise, especially in residential areas where people are having a smoke outside the pub.* (APo.1)

*I thought there would be more complaints. There is a pub down on X Street and there is some residents opposite there who have had some problems. More so annoyance really because people are coming outside to smoke (and) the doors were being left open, so the sound of the pub was coming out.* (CPo.2)

### 5.7 Non-Smokers

#### 5.7.1 Focus Groups with Older people

##### 5.7.1.1 Attitudes towards smoking and smokers

In the focus groups with older people, we found participants quite tolerant towards smoking and sympathetic to the needs of smokers. This may be a function of the fact that many of these respondents had, in their youth, experienced a cultural context where smoking was not only acceptable behaviour, but also the norm:

*I think one should not judge too harshly the smoking behaviours of others.* (BFO)

*I don’t smoke because I personally don’t like smoking, I don’t like the smell, but I don’t feel strongly about smoking and I would not say to anyone that it’s bad to smoke, some of my friends smoke.* (AFO)

*People say it’s a habit but of course they are all addicted, and many say they can’t give it up. So it’s not a question of not wanting to or not trying to. It probably leads to feeling victimised in that sense.* (AFO)

#### 5.7.1.2 Compliance

Most older participants agreed that compliance with the ban was high and that, in this respect, the majority of smokers were behaving responsibly:

*I think that people are making an effort to be responsible. I’ve not seen anyone anywhere light up where they shouldn’t.* (AO)
Evaluation of the Smoke-free Legislation in Wales: Qualitative Study

I certainly have not seen any people light up cigarettes in places where they should not, not even young people. (CO)

Participants did take issue with smoking when it was perceived as ‘irresponsible’, that is, harmful to others, particularly children:

I don’t think it’s fair why somebody else should be ill because they’re smoking; I think it’s a lot better since the ban. (CO)

My issue with passive smoking is when a parent smokes in their own home and there’s a child. That is an issue that does annoy me because obviously that child does not have a choice about that. (AO)

5.7.1.3 Atmosphere

Older non-smokers clearly appreciated the effects of the ban in a range of public contexts:

It’s wonderful travelling in taxis these days, since the ban of course. A taxi is a work place. The old smell in the car has gone and drivers cannot smoke in their taxis since it is their workplace. (BO)

Yes it’s better since the ban, at least you can come in, sit down there and not be bothered by smoke. (CO)

It’s wonderful to be in eating places now and it’s far more pleasurable to be in public places. (BO)

5.7.1.4 Pubs

Those non-smokers who routinely visited pubs prior to the ban described bars as more pleasant places to be. Some of those who had avoided pubs prior to the legislation were now more encouraged to visit:

It’s lovely that I can go, on a Sunday night, I go out with my friends for a drink and not come home head to toe smelling (DO)

In terms of smoking in pubs it’s really nice now. You can go to any pub around here and you know that the smokers will be outside. Before the smoking ban, there were certain pubs that my husband and I couldn’t go to because we knew that on certain nights that smoking would be really bad. My husband suffers from asthma and it’s aggravated by smoking. We could not go to a smoky pub, it’s really nice now we can go to any pub in (the city) and we don’t have to worry about that. Same with restaurants. (AO)
I now frequently go to a public house to eat, whereas prior to the ban I would not go so often because of the smoke. (BO)

You see a lot of the pubs will do coffee now because of the way it’s gone. They’re willing to make you a cup of tea now…we’ve gone in and said “do you make coffee”, and they’ll go “aye, go on, we’ll make one”. Now if that ban hadn’t been in, they’d say “oh no, we’re not a café”. (DO)

Moreover, those non-smokers who socialised with smokers appreciated smoke-free bars, following introduction of the legislation:

The atmosphere inside a bar is a lot nicer now. You come out at the end of the night and...stink of smoke and tobacco. Most of my friends smoke. I can often be left in the bar on my own while they all go for a smoke. I’ve got used to that now, and of course if I wanted to I could always go out with them. (AO)

Personally I agree with it, because I’m an ex-smoker myself, and losing a brother to smoking. In this club before the ban some of the smokers would have smoked six to ten cigarettes while they were here. Although the smokers here were very considerate, with the people on their table, but they still had their cigarette, and they used to edge away from the non-smokers. (CO)

5.7.1.5 Smoking displacement

Participants commented on the higher visibility of smoking and smokers since the introduction of the legislation:

The thing I do dislike now is when (smokers) are outside offices and businesses and shops and places like that and in the street. As you walk past it smells and you inhale second hand smoke. This I really dislike. (AO)

The smell of smoke, when you do smell it now, is somehow more noticeable since there are now fewer smoking places. (BO)

I personally would ban smoking in like say highly pedestrianised areas like (main) street, shopping centres, town centres. I would extend it throughout…I just feel for all the mums pushing all the kids past there every morning, and these adults are smoking. (AO)
Smoke displacement which participants associated with the ban was largely linked to public houses:

When you were allowed to smoke in bars and other places, you would sit in these places and you would be exposed to smoke coming over you continuously. It was a bit of an invasion of privacy really, and now that the ban has come about and you’re walking down the street, especially on a Saturday afternoon, when all the smokers are standing outside the pub, it is rather difficult to avoid. (AO)

You can’t avoid it, although I try to cross streets sometimes to try and avoid smokers. But obviously in smoking areas in pubs, smoking seems to go hand in hand with having a drink and a smoke. But at least it is in a separate area and if you want to avoid it, you can (AO)

Some older participants expressed concern about the congregation of (particularly) young smokers on the streets outside pubs at night time:

If you drive around the one-way system in (the town) and when you reach the (public house frequented by young people) at certain times, lots of people gather here to smoke. The street is narrow and the pavement is narrow. It is mostly young people here right around both sides of this street, since there is a wine bar on the other side. You come along in your car and you feel uncomfortable since you are afraid someone might step on to the road. (BO)

I walk everywhere but, particularly when I walk in that street, I have to leave the pavement. They refuse to move. I have to move on to the street to get past them and they blow smoke in your face. In a way, I’m not saying they do it intentionally; they just seem not to be conscious of this behaviour. (BO)

In the disadvantaged areas, non-smokers were more concerned with the public order aspect of people congregating at night. At one case study site, the expectation was that policing was insufficient to control disorder, and that the police were “definitely not providing a service for the community” (CO):

If somebody was getting attacked and hammering that (police station) door they’d be dead before they opened it. They won’t open the door. You’ve got to press that thing and talk to the microphone or something, all this nonsense…You don’t even see them on the beat around here. (CO)
5.7.1.6 Visibility of tobacco products

Focus group participants also raised the issue of visibility of tobacco products and implications for quitting:

*Displays should simply disappear as a deterrent for children. Already price is having an effect, it’s quite prohibitive. If you have health warnings on cigarettes, if it’s banned in public places then I think it should be taken a step further with the removal of tobacco displays in shops (AO)*

*I think it may be a help to some people who are trying to smoke less or to give up it may be of help to them not to see the cigarette display in the shop, although they will know that it’s under the counter. I don’t want a sweet if I don’t see them...so I think that it is a good idea not to see the cigarettes in the shop. (DO)*

*As a non-smoker I would rather not see cigarettes displayed in shops. I don’t want to see them anywhere...I think it will be less of a temptation for those smokers who are trying to cut down or give up. (BO)*

5.7.2 Focus Groups with Young People

5.7.2.1 Attitude towards passive smoking

Participants in the young people’s focus groups were generally intolerant of smoking and supported the ban:

*I find it really irritating, the smoke. It really annoys me when you’re stood there, for example in the toilets in school, girls smoke and it’s really irritating to go into the toilet and come out stinking of smoke. (AY)*

*I’m glad they passed the ban on indoor smoking because if you were going out for a meal or something, although they had like separate places for smokers and non-smokers, if you were eating you could still smell the smoke as it drifted in. (BY)*

*If my dad had been down the pub and came home you could smell smoke without being near him. (AY)*

5.7.2.2 Health

For participants in the young people’s focus groups, health appeared to be more of an issue, than for older participants:
It (passive smoking) gives you cancer. (DY)

Why should we suffer for someone else smoking? (BY)

We didn’t decide to breathe that air in, so I don’t see why we should have to. (AY)

Smoking is more of a dangerous way of affecting other people because you don’t actually know how it’s affecting these people. (AY)

5.7.2.3 Public Places

Young people reported on the high visibility of smokers particularly in town centres:

Now I always see people smoking I’m always passing people who are smoking down town. (AY)

In (city centre) on a Saturday morning people smoke on the street and outside shop entrances. It’s also caused a litter problem on the streets and you can see men on their litter machines sweeping and sucking up cig butts. (AY)

They smoke on the benches as well, you know the benches in the middle of (the city) where you can sit down, there’s always people smoking there so if you just want to sit down for a bit, but you know you can’t because there’s people smoking there. (AY)

5.7.2.4 Pubs

Young people talked about changes to the atmosphere in pubs following the ban, also noting a displacement of smoking from inside to outside of bars:

There was always a cloud in little village pubs with low ceilings, and lots of people spent a lot of time in that cloud. (BY)

Its better cos like there’s loads of little kids that go in pubs and that. (DY)

In the summer then, you’re in the pub and you want to sit outside in the sun, then you may be surrounded by smokers, they are still right by the pub. (AY)
5.7.2.5 Smoking, alcohol and disadvantage

Young people in the focus group argued a strong association between drinking and smoking:

*I think that under the influence of alcohol people are more likely to try smoking. Lots of people who say if they’re out drinking they may try smoking, because they are under the influence.* (BY)

They also made a clear distinction between social drinking and alcohol misuse:

*There’s no point in getting drunk just for getting drunk’s sake. It’s ok if you’re doing something with friends socialising and having a few drinks.* (BY)

*You always find the chavs in the town talk about getting wasted this weekend, and they go to (another town) on Saturday night.* (BY)

Young people talked about alcohol abuse as a pressing issue affecting young people. Much discussion in one focus group with young people centred on an association between alcohol misuse and tobacco, personal circumstances and disadvantaged lives:

*I’ve got a friend... he’s got a hard life, cos his parents split up. His dad’s got a child with another person, he never sees his dad his ...and then his mum had a bad relationship, they argued a lot. My friend didn’t get on with the man...his mum is never with him, his dad’s never with him, so he goes out and drinks* (AY)

*Regularly he’s down (local town) on a Friday night. I think the reason is because the alcohol is so cheap. He’s buying the (supermarket) cheapest alcohol which is easy to drink. You drink it and you get smashed.* (AY)

*When you look at the standard of how some people live then they’ve got a lower standard of living. I know for a fact that maybe most of them would be smoking. If you had a higher standard of living then there would be less of you smoking.* (AY)

*You have some stereotypical people who just, you know they never really want to do well and they tend to smoke and drink and more likely to have sex and stuff.* (AY)

*The trouble is though, if you’re living in a deprived area then you either want to do good or you just carry on with your life as it is and you go with the flow type of thing. I’m sure a lot of people within this estate are there because of debt, mainly because of smoking* (AY)
However not all participants were happy with the stereotypical portrayal of disadvantaged lives:

*My mum and my step dad just had a divorce. We’ve moved house. I’ve moved in with my grandpa and my mum, but I haven’t gone straight to drink have I? (AY)*

*Standard of living doesn’t affect how you’re brought up though. You could live in a council house, (but it) doesn’t affect how well your parents have in parenting skills, how they bring you up. (AY)*

*I know people in one of the roughest estates in (town) and she gets top sets for everything. But she doesn’t do this (smoke and drink), she’s been brought up well. (AY)*

*I think it’s really easy to say that sort of person smokes, and that sort of person smokes, but then there’s other people you think that would never smoke, and they do. For example my mother smokes and she has since she was 17. She stopped smoking when she was pregnant with me, but she’s still smoking now because she’s addicted, and she wants to give up really bad. (AY)*

### 5.7.2.6 Peer group pressure

Young people also associated smoking with low achievement at school, and the pressure to conform with peers:

*It’s the low achievers (who smoke) (AY)*

*It’s more the people who are not so interested in doing well. (AY)*

*I know a girl in my set, and she’s bright, she’s a smoker, she has missed lessons. She does have friends who are lower achievers; I think it’s a lot to do with her friends as well. (AY)*

*You know I’ve got friends who are really responsible and everything, but they do it for the sake of it. They’re not necessarily addicted but if someone offers cigs they will take one. (BY)*

### 5.7.2.7 Visibility

Young people in the focus groups suggested that limiting the visibility of tobacco products may deter some smokers:
If cigarettes were under the counter less people would light up. Maybe the smokers who don’t smoke often might stop, because if they are standing there and they see the tobacco display that may just be enough to tempt them to buy. If it’s out of sight I think it might help some of those who don’t smoke often. (AY)

If they are out of sight, you wouldn’t have the temptation would you? (AY)

I think maybe cigarettes in shops should be out of sight and put under the counter? (BY)

5.8 Air Monitoring

Discreet PM$_{2.5}$ measurements

At phase one of the study, PM$_{2.5}$ concentrations in bars visited as part of the study were frequently above the US-EPA’s ‘unhealthy’ threshold for outdoor air pollution of 65 $\mu g/m^3$ with 79% of bars visited at phase one providing 30-minute average concentrations above this concentration.

PM$_{2.5}$ concentrations in bars were almost exclusively higher at phase one than at the follow-up (see table 2). Using the US-EPA’s air quality guidance for outdoor air pollution, more than four out of five bars visited had PM$_{2.5}$ concentrations above the ‘unhealthy’ (65 $\mu g/m^3$) threshold.

The data consistently demonstrate very substantial reductions in PM$_{2.5}$, as a marker for SHS. The size of the reduction varies from bar to bar and by time of visit but overall the size of the reduction experienced is between 84 and 91%.

Table 1: Summary details of PM$_{2.5}$ levels measured at each study phase.

<table>
<thead>
<tr>
<th></th>
<th>P1</th>
<th>P3</th>
</tr>
</thead>
<tbody>
<tr>
<td>Total visits</td>
<td>24</td>
<td>22</td>
</tr>
<tr>
<td>Range of PM$_{2.5}$ concentrations ($\mu g/m^3$)</td>
<td>16-872</td>
<td>5-68</td>
</tr>
<tr>
<td>Median PM$_{2.5}$ concentration ($\mu g/m^3$)</td>
<td>184</td>
<td>24</td>
</tr>
<tr>
<td>% above 65 $\mu g/m^3$</td>
<td>79</td>
<td>5</td>
</tr>
<tr>
<td>Median % reduction from P1*</td>
<td>-</td>
<td>85</td>
</tr>
</tbody>
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* paired samples
Wales demonstrated substantial reductions in PM$_{2.5}$ concentrations at follow-up (see figure 2). Using paired samples and comparing the changes experienced in these day/time pairings the median reduction in Wales was between P1 and P3 (93%).

There does not appear to have been marked differences in pre-legislation PM$_{2.5}$ levels between bars located in different socio-economic areas although this may be due to the imprecise nature of using postcode sectors to define the deprivation category of each bar.

Due to practical difficulties of performing a study of this nature discreetly and for reasons of personal safety, the timing of our measurements tended to be early evening and so it is likely that these measurements under-estimate the PM$_{2.5}$ levels experienced in bars at later and busier times of the evening.
6 Discussion

The findings presented in this report are based on a qualitative case study approach. The study focussed upon smoking related beliefs and behaviours at four case-study sites across Wales, centring mainly upon public contexts where alcohol was served. We acknowledge that the methodological approach has implications for limited generalisability of the findings, across both geographical locations and different social contexts within them. Notwithstanding this caveat, case study locations were carefully selected to provide maximum representation of individual and contextual differences. In addition, high levels of respondent agreement within and between respondent panels at pre and post phases of the study support the robustness of the findings. Moreover, the study design has yielded a depth of qualitative data, which captures contextualised change from pre to post implementation of the legislation and provides an account of the changing social context of licensed premises through the creation of smoke-free environments.

The findings overall indicate that the legislation has found overwhelming acceptance among both non-smokers and smokers. Compliance with the smoke-free legislation was reported as consistently high across all case study areas and within each of the respondent panels. There was very little evidence of articulated anticipation of resistance, and actual behaviour among smokers was found to be highly compliant.

Most smokers welcomed the legislation, anticipating that it would help them to quit. While only a tiny minority of the smokers had actually quit at phase three of the study, the legislation does appear to have initiated notable changes in smoking patterns, among smokers socialising in licensed premises. Most smokers reported smoking less as a function of the legislation, preferring to forgo (or at least avail themselves less often of) the opportunity to smoke in favour of remaining inside the premises (especially in bad weather). Those who socialised with non-smokers, preferred not to leave their friends inside the pub in order to smoke (often alone) outside.

Consequently, the period of time between cigarettes was lengthened for most smokers, who reported surprise and often pleasure that they were able to abstain from smoking for long periods, with little or no apparent discomfort. Not only was the ban credited with denting the habit of smoking, it also appears to have gone some way to severing the perceived link, noted by many smokers at phase one of the study, between smoking and alcohol consumption.

The support for ‘external’ control over smoking was evident from the accounts of many smokers and is an important point for policy makers. The success that respondents reported making in regard to control over their smoking, prompted some to support implementation of smoke-free legislation in other (private) contexts, in order to help them to further reduce their smoking and/or quit. Smokers claimed it was easier not to smoke where smoking was not permitted: where no-one else was smoking; and where smoking activity was not visible or detectable by smell. Some respondents (both non-smokers and smokers) spontaneously suggested, for this reason, that they would prefer tobacco products not be visible at retail outlets.
Post-legislation, awareness of second-hand smoke had increased among smokers and non-smokers. There was evidence of smoking displacement from inside public contexts to outside, and this had rendered smokers and smoking more visible to non-smokers. It was apparent that this had affected smoking behaviours and, linked to this, increased feelings of stigmatisation among smokers as a function of perceptions of increasing public disapproval of smoking.

Younger smokers among the sample, appeared to be the least affected by the legislation, in terms of where and how they socialised. It was the older smokers, who were unemployed and lived (often alone) in disadvantaged areas, who appeared to be affected most in that they reportedly socialised outside of the home less frequently following the introduction of the legislation. Notwithstanding this, other factors were described by respondents as affecting patterns of socialising, particularly in areas of disadvantage. These included unemployment and inflation, price of alcohol and competition from the off trade suppliers. Irrespective of its cause, the findings suggest that the increasing social isolation of (particularly) disadvantaged, older, unemployed people who live alone, is an important issue for community based intervention.

The licensed on-trade reported business as being most affected in cases where there were no resources for adapting facilities to maintain customer bases and attract new customers. However, while losses to trade were most keenly felt in disadvantaged areas, it was acknowledged that these other factors (unemployment and inflation, price of alcohol and competition from the off trade suppliers) might affect business as much, if not more, than the smoke free legislation.

Certainly it was evident that social pressure not to smoke and the perceived increasing stigmatisation of smoking (and smokers) was experienced across study sites, including the disadvantaged areas. Hence, even in areas where the culture of smoking is strongest and most resilient, the legislation has been effective in changing behaviours and, linked to this, contributing to a social climate in which smoking is becoming less and less acceptable. As smoking becomes more ‘de-normalised’, this contributes to the ‘spoiled identity’ of smokers (then Chapman and Freeman, 2007), which has been cited as a major factor in the decision to quit (Hyland et al, 2004).

The findings of the study clearly suggest that enforced reshaping of public contexts as smoke free is an effective way to change both attitudes towards smoking and smoking behaviours. Notwithstanding this, it is acknowledged that some smokers find it difficult to quit because smoking is used by them as a mechanism for coping with disadvantaged lives. It is these already marginalised smokers who are particularly vulnerable to the brunt of social disapproval surrounding smoking. It is important therefore, that any increased use of legislation to reshape social environments should be accompanied by the implementation of public health area-based interventions to help individuals to quit smoking. These will further assist in reshaping the socio-cultural environments, away from smoking, in disadvantaged communities.
7 References


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