CAFÉ OWNERS' ATTITUDES BEFORE THE ENACTMENT OF A MOKE-FREE LEGISLATION IN TRANSITION COUNTRIES

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Abstract

While a growing number of countries and sub-national localities are banning smoking in hospitality workplaces, extant research on the impacts of smoke-free legislation focused on hospitality employees and industries in developed countries. Hoping to assist in filling this void, this research empirically explores the relationships among café owners'/managers' attitudes, demographics, and management-related variables before the introduction of a smoke-free legislation in one transition economy, i.e. Bosnia-Herzegovina. Results revealed that gender, education, length of hospitality work experience, experience living abroad, current position held, length of time in current position, and café seating allocation were for the most part not significant in explaining different perceptions toward a smoking ban. However, preferred café smoking policy and smoking status somewhat influenced how respondents viewed the smoking ban. Moreover, respondents' preferred café smoking policy appears driven by their smoking status. Theoretical and managerial implications and opportunities for future research are further discussed.

Keywords: Second-hand smoke, smoking ban, café, attitude, transition country, owner, manager, Bosnia-Herzegovina

INTRODUCTION

Healthcare and tobacco research has long established that smoking is not only hazardous to smokers, but also to those exposed to second-hand smoke (SHS; also known as the environmental tobacco smoke [ETS]) in restaurants, bars, offices, and other enclosed spaces where smoking is allowed (National Cancer Institute, 1999; World Health Organization [WHO], 2008, 2011a). Moreover, ETS levels have been found to be 3.9-6.1 times higher in bars, as compared to office workplaces (Siegel, 1993). Armed with evidence that SHS harms the health of customers and employees, many countries and jurisdictions (e.g. U.S., Canada, New Zealand, Australia, Ireland, Italy, Croatia, etc.) have in the past two decades adopted legislation restricting or prohibiting smoking in work-places and public places, such as restaurants and bars. Needless to say, in both past and present attempts to ban smoking in restaurants and bars, many hospitality owners, managers, and associations have put up resistance to a smoking ban, citing rights (as owners) to make their own decisions regarding smoking policies and fears from a decrease in patronage and the associated loss in sales and profits (Hirasuna, 2006; Roseman, 2005).

In response to the often heated debates between public health advocates and smoking ban opponents regarding the economic effects of smoking bans in bars and restaurants, over 150 studies in English language have been conducted on the subject as late as February 2008, as identified by Scollo and Lal (2008). Despite voluminous research, a closer inspection of the 150+ smoke-ban-related research articles comprehensively reviewed by Scollo and Lal reveals the following three gaps in the available research. First, only 36 (22%) of the smoke-ban-related studies were peer reviewed, with many non-peer reviewed studies sponsored by the tobacco industry (Scollo and Lal, 2008). What is more, most, if not all, studies took place during the economically healthy times. Very few studies, if any, looked at the effects of a smoke ban implementation during the economic crisis. This is clearly not a trivial issue because tourism demand is heavily impacted by crisis events resulting in negative consumer perceptions (Pforr and Hosie, 2007), especially if the economic downturn is sufficiently intense or prolonged (Kapiki, 2011). For instance, the demand for travel and investment in tourism greatly suffered (Henderson, 2006) in the aftermath of the 1997 world financial crisis that began in Asia and spread to Russia and Brazil in 1998. Similarly, after the Lehman Brothers' bankruptcy in 2008 and the ensuing financial crisis, the U.S. hotel industry experienced intense and immediate drops in occupancy rates and RevPAR, which continued to fall and remained low throughout 2009 and early 2010 (Enz et al., 2011).

Second, out of the 36 peer reviewed studies, 22 (63%) were conducted in the U.S., followed by Australia (4), Canada (3), New Zealand (3), South Africa (2), UK (1), and Italy (1). Meanwhile, research in transition and developing countries remains scarce. Yet, in the context of the current global economic crisis, transition countries (i.e. B-H) differ significantly from the western European countries in that they were among the hardest hit and a large proportion of their

populations resorted to reducing their consumption of basic necessities during the crisis (European Bank for Reconstruction and Development, 2011). Third, very few research articles about owners' and managers' attitudes toward smoking bans have been published in hospitality journals thus far (Hetland et al., 2008; Pizam, 2012). Indeed, updating the literature on smoking ban issues is important to the hospitality industry and hospitality owners, managers, and employee unions are seeking relevant data that identifies the potential impact smoking bans will have on business' patronage.

The lack of peer reviewed research regarding (1) the effects of smoke-free legislation on the hospitality industry during the economic crisis, (2) the impacts on hospitality sectors in transition countries, and (3) owners' attitudes toward smoke-free legislation in general, form the basis for this study. The additional rationale for this study stems from the relevance and timeliness of owner/manager opinion regarding smoking in hospitality establishments in transition countries. In one transition country, i.e. Bosnia-Herzegovina (B-H), the parliament ratified the WHO Framework Convention on Tobacco Control on July 10, 2009 (WHO, 2011b). Consequently, B-H officials are on the verge of introducing the new anti-smoking regulations that will affect cafés, restaurants, schools, theaters, hospitals, factories, and all government offices.

The main objectives of this exploratory study are to:

1. Assess the profile of B-H restaurant owners
2. Examine owners' pre-implementation attitudes towards café smoking ordinances in B-H
3. Empirically explore whether the reported attitudes are associated with demographics (i.e., gender, education, and age) and management-related variables ([MRV] i.e., length of hospitality work experience, current position held, length of ownership / managerial experience at a current café, experience living abroad, smoking status, preferred café smoking policy, and café seating allocation)
4. Assess the influence of demographics and MRV on preferred café smoking policy

The rest of the paper is organized as follows; we first review the impacts of smoke-free legislation on the hospitality sector. Subsequently, the section covering transition countries helps contextualize the current study. We then describe the methodology employed, followed by results and the study's discussion and conclusions.

IMPACTS OF SMOKE-FREE LEGISLATION ON THE HOSPITALITY INDUSTRY

Through a careful reading of outcome measures presented by Scollo and Lal (2008) in their seminal review of over 150 studies in English language on the effects of smoke-free policies in the hospitality industry, three broad themes appear to emerge – impacts on owners and managers, impacts on customers, and impacts on staff. These impacts are discussed in greater detail in the subsequent sections.

Impacts on customers and staff

In terms of impacts of smoke-free legislation on hospitality customers, Kang et al. (2007) detected no significant differences on perceptions or dining out behaviors among Colorado college students based on their smoking status. Miller and Hickling (2006) found higher bar patronage and greater impact of the new law on patronage, current smoking, and future likelihood of quitting among young adults (18-24 years) four months into Phase I of the phased-in smoking ban in South Australia. In a study comparing adult smokers in the Republic of Ireland (ROI) and UK (no smoking ban) before and 8-9 months after the ROI's ban, Fong et al. (2006) found that in ROI 35% of smokers and 16% of quitters reported avoiding going to pubs, and 18% of smokers and 8% of quitters reported avoiding going to restaurants. In a comparison of future dining behaviors among nonsmokers, former smokers, and smokers in Kentucky, Roseman (2005) found that nonsmokers and former smokers were likely to eat out more, while smokers were more likely to eat out less. Similar findings were revealed in studies of Hong Kong (Lam et al., 2002) and South Australian (Wakefield et al., 1999) restaurant consumers. Tang et al. (2003) employed three cross-sectional surveys to examine bar patrons' attitudes at three months, eight months, and 2.5 years after enactment of the 1998 smoke-free law in California. They found that, over time, California's bar patrons increasingly favored the smoke-free bar law, took seriously the health concerns regarding exposure to ETS, and complied with the law. Moreover, 2.5 years after the law's enactment, 32.3% of the respondents reported that they were more likely to visit bars, whereas only 9% had the opposite opinion.

In terms of smoking ban impacts on hospitality staff, Klein et al. (2009) found no significant short- or long-term effect of the type of smoking ban (i.e., comprehensive, partial, and no ban) on bar and restaurant total employment in free-standing bars and full-service restaurants in ten Minnesota cities. In a Norwegian panel study of employee job satisfaction before and after the smoking ban implementation, there was a slight improvement in satisfaction among employees who are non-smokers and a moderate decrease in satisfaction among employees who smoke (Hetland et al., 2008). Adams and Cotti (2007) found that bar employment decreased in U.S. communities where smoking was banned compared with those that allowed smoking. However, bar job loss was substantially more pronounced in areas with a high prevalence of smokers. They

also found evidence of increased employment in warmer regions of the country during the cooler winter months, and in the summer in colder regions, thus suggesting that the prevalence of restaurant outdoor seating might influence the policy's effect. In a study of standalone and combination bars in California, Tang et al. (2004) found that employee support for a smoke-free bar law significantly increased shortly after its enactment and four years later. In the state of New York, Hyland et al. (2000) found no statistically significant change in hospitality employment levels following a ban relative to other places in their study.

Impacts on owners and managers

In the longitudinal analysis of the impact of a 2004 smoking ban on restaurant and pub revenues in Norway, Melberg and Lund (2010) used bi-monthly value added tax reports spanning the period before and after the ban implementation (1999-2007 for restaurants and 2002-2007 for pubs). They did not find any statistically significant effects on Norway's restaurant revenues. However, in pubs, a share of personal consumption revenues went down in the short-run, but in the long-run and in absolute terms revenues increased. Luk et al. (2006) used retail sales tax data from 52 months, comprising both pre-bylaw and post-bylaw months, in the analysis of the impact of a smoking ban on restaurants and bars in a bilingual city of Ottawa, Canada. They found no significant adverse impact of smoke-free legislation on Ottawa's restaurant and bar sales. A survey of New Zealand's bar managers showed not only a significant increase in overall support for the smoking legislation after implementation, but also an increased agreement that smoke-free laws do not affect patron numbers and venue profits (Thomson and Wilson, 2006). Alamar and Glantz (2007) examined the effect of smoke-free ordinances on bar market value, which they used as a proxy for bar profitability. They found no significant differences in purchase prices between similar bars sold in smoke-free and smoking-permitted U.S. jurisdictions. In a similar study of restaurants, Alamar and Glantz (2004) showed that U.S. restaurants in smoke-free locations sold for higher prices than comparable restaurants in locations where smoking was allowed.

McNabb and Hearns (2005) used semi-structured interviews to survey managers of seven bars in the border area between the Republic of Ireland (ROI; smoking prohibited) and Northern Ireland (smoking allowed). While the authors rightfully acknowledge the limits of their sample, findings of their cross-border study indicate that the smoking ban in ROI did not harm the bars surveyed. A ban pre-implementation survey of all restaurant, bar, café, and nightclub owners in Gothenburg, Sweden, revealed that respondents did not expect to be severely hurt by a general smoking ban applying to the entire food and beverage sector (Hammar, 2004). Smoke-free establishments were less likely to expect negative economic effects compared to those which allowed smoking. Moreover, establishments with a non-smoking section were less likely to expect negative economic effects from a general smoking ban. However, in establishments with late night hours or those having a large share of smoking customers, owners were more likely to expect a decrease in revenues.

Cremieux and Oulette (2001) surveyed owners and managers of 401 restaurants and 600 firms in Quebec, Canada, before the enactment of the smoking ban. Specifically, they compared the actual costs of smoking regulation by those who had already voluntarily instituted bans against the anticipated costs by those who did not. While majority of respondents not in compliance feared higher infrastructure costs, decreased productivity, and decreased patronage, compliant respondents did not actually observe any of these costs. In the U.S. nationwide survey of 1,300 restaurant, bar, and tavern owners, majority of restaurant owners indicated that the smoke-free ordinances would not adversely impact restaurant sales (Dunham and Marlow, 2000). However, bars and taverns were expected to experience negative revenue effects more than twice as often as restaurants. Additionally, while negative effects were most often expected in establishments with fewer seats allocated to non-smokers, positive or neutral impacts were most often expected in venues with greater proportion of non-smoking seating. Through a small-scale case study of UK restaurateurs, Curthbert and Nickson (1999) found that respondents' businesses had benefited from cleaner and healthier working environments and a competitive edge had been gained.

Summary

The preceding short summary of peer-reviewed studies generally supports the view that when a smoking ban is uniform throughout a geographic area (city, state, province, etc.), the industry-level effects of regulation seems non-existent or even favorable in the area (Alamar and Glantz, 2007, 2004; Luk et al., 2006; Melberg and Lund, 2010; Scollo and Lal, 2008; Thomson and Wilson, 2006). However, on a firm-level, limited research suggests that the moderating effects of establishment type (i.e., restaurants vs. bars), seating allocation (i.e., outdoor vs. indoor), community population characteristics (i.e., high vs. low smoking prevalence), and the combination thereof might influence the impact of smoking bans (Adams and Cotti, 2007; Dunham and Marlow, 2000; Hammar, 2004; Hyland et al., 2000). Ultimately, all three groups unanimously recognize the negative effects of smoking and SHS exposure.

Overall, in the assessment of impacts of smoke-free legislation in the hospitality industry, researchers have employed objective (e.g., data derived from official employment statistics, staff urinary nicotine levels, etc.) and/or subjective (e.g., data obtained via surveys of owners, employees, and patrons of restaurants, bars and other hospitality establishments) data that was collected before and/or after the implementation of a smoking ban (Luk and Ferrence, 2005). Objective data cover all establishments in jurisdictions under consideration and are collected routinely by official or neutral agencies over an extensive period using consistent methods. These data are verifiable and therefore thought to be superior to the subjective perceptions of owners, employees, and consumers (Luk and Ferrence, 2005).

However, studies using objective data have been criticized for relying on community averages (as opposed to firm-level indicators) and revenues (instead of profits; Dunham and Marlow, 2000), and for failing to account for the effect of confounding factors, such as trend, seasonal variation, the general economic conditions and other events that are unrelated to the legislation (Jones et al. 1999; Kang et al., 2007). On the other hand, subjective data, provided they come from the properly designed owner, employee or consumer surveys, can reveal data at the micro level and thus be useful in supplementing studies that use objective data (Luk and Ferrence, 2005). As expected, studies using subjective data have been criticized for relying on unverifiable perceptions that may be biased by personal attitudes toward the smoking ban.

This being said, extant research on the impacts of smoke-free legislation has centered on hospitality owners/managers and industries in developed countries (e.g., Scollo and Lal, 2008), with the most commonly examined localities being those located in the U.S. (Kenkel and Wang, 2008). Meanwhile, much less is known about the impact on hospitality owners and managers in transition and developing countries.

COUNTRIES IN TRANSITION

The term 'countries in transition' exclusively applies to the former communist countries of Central and Eastern Europe, including the former Soviet Union (United Nations Statistics Division, 2011), that are undergoing a grueling social, political, and economic transformation from a centrally planned economy to a market-based one (Goić and Bilić, 2008). This process of transition begun in the late 1980's following the fall of both the Berlin wall and the communist system. During the decades leading to the fall of the Berlin Wall, private-sector enterpreneurship in these countries was restricted, confined, hampered, suppressed, and even illegal (Goić and Bilić, 2008). Furthermore, in 2003 adult smoking stood at 31.5% (47% men and 15% women) among transition nations, compared to 29% (38% men and 16% women) in the rest of the world (Budak et al., 2006). Moreover, the Eastern Europe and Eurasia region is the only region worldwide to have witnessed a population decrease in 1991-2002 (Heinegg et al., 2005). To this extent, from the developed country perspective, all transition countries either went or are still going through similar processes and face or have faced analogous developmental issues, and thus may be considered as relatively homogenous.

Now, after more than 20 years since the onset of the transition era, the free market economy surprisingly still remains an elusive concept in many, albeit not all, aspects of society at large. Moreover, transition countries were among the hardest hit by the current global economic crisis (EBRD, 2011), and to make things worse, many of them had failing economies prior to the crisis. In this sense, it is important to note that transition countries differ significantly from the

western European countries in that a large proportion of their populations resorted to reducing their consumption of basic necessities during the crisis.

On a related note, B-H has enacted a law governing tobacco use back in 1998; however this law has been a subject of strong criticism on the grounds that it prescribed tobacco advertising, labeling, and smoking in enclosed spaces very loosely. Another area of concern is law implementation. While B-H has long enacted legislation against tobacco sale to minors (i.e., <18 year-olds); however, as in other transition nations (Balabanova et al., 1998), the laws are poorly enforced. For example, 89% of B-H elementary (i.e., primary) and high (i.e., secondary) school students ages 13-15 who bought cigarettes in a store were not refused purchase because of their age (Centers for Disease Control and Prevention, 2008).

Taken together, these examples suggest that the social fabric in B-H and other transition countries cannot be understood simply by looking at developed and other non-transition countries. Host population's perceptions and behaviors are products of complex and long lasting past processes, and thus take time to change. In fact, a business culture in the transition countries cannot be explained exclusively either by their communist heritage or by their journey through transformation. Therefore, the process of introducing modern market mechanics into Central and Eastern European transition countries continues with a specific task of significantly altering the host population's social, economic, political, and environmental attitudes and behaviors.

With these ideas in mind, it appears important to understand how smoke-free laws affect the hospitality industries in transition countries such as B-H. Through an empirical assessment of owners' pre-implementation attitudes toward B-H partial smoking ban in cafés, this article seeks to make a contribution in the needed direction.

METHODOLOGY

This study featured a primary data collection, whereby a two-page anonymous self-administered questionnaire written in Croatian was administered to café owners and/or managers in B-H's third largest city (Mostar). The sampling frame for this study comprised all owners and/or managers in 55 cafés, where the latter was obtained from the yellow pages of *BH Telecom* (2010) and *HT Eronet* (2011), and cross checked with their online databases. A group of trained students helped by personally delivering the first (baseline) paper survey and recruiting café owners, managers or assistant managers to partake in survey completion. The questionnaires were either completed on the spot or picked-up at a pre-agreed later time. For those cafés where owners/managers either failed or initially refused to complete the questionnaire, two additional attempts were made in hopes of completing the task.

The majority of survey questions were borrowed from Biener and Siegel (1997), Brayfield and Rothe, (1951), Cameron et al. (2003), Fong et al. (2006), Hetland and Aaro (2005a), Judge et al. (2001), Kang et al. (2007), Miller and Hickling (2006), Roseman (2005), Tang et al. (2003), and Wan and Pilkington (2009), and adapted to this study's context. Since smoking ban can potentially influence drinking habits of both smoking and non-smoking patrons (Room, 2005), two Likert scale items were developed in order to examine owners' anticipated changes in patron alcohol and coffee consumption after the law's enactment. Additionally, due to economic hardships and/or fears from political prosecution during the second half of the 20th century, many residents in the region under study have historically emigrated abroad (i.e., Germany), where they typically worked in construction and hospitality. Following the break-up of the former Yugoslavia and the creation of newly independent countries (i.e., B-H, Croatia, etc.) in the early 1990s, some emigrants have returned to their homeland, where they invested their monies earned abroad in various businesses activities (e.g., cafés, restaurants, etc.). In short, their experiences living abroad in countries with an established record of restricting and regulating smoking in public places may have an influence on their perceptions towards the smoking ban back at home. Therefore, the 'experience living abroad' item was included in the survey.

The questionnaire was composed of two sections. The first section measured respondents' demographics (i.e., gender, education, and age), length of hospitality work experience, current position held, length of ownership/managerial experience at a current café, experience living abroad, smoking status, preferred café smoking policy, and café seating allocation. The second section measured respondents' pre-implementation perceptions of a café smoking ban, using a 22-item five-point Likert scale anchored by 1 (*strongly disagree*) and 5 (*strongly agree*). Therein, several items were reverse-worded to reduce the danger of response bias (Churchill, 1979; Nunnally, 1978). Questionnaire design followed the established survey guidelines (Fanning, 2005; Dillman, 2000) and was evaluated by two social science research experts. The subsequent pre-test of the instrument on 5 café owners/managers revealed only a few typos that were easily corrected.

Descriptive statistics included frequency analysis of all variables. The differences in expressed pre-implementation attitudes towards a café smoking ban regarding the demographics and the management-related variables (MRV) were tested by the non-parametric Kruskal-Wallis (K-W) and Mann-Whitney U (M-W U) tests. The influence of demographics and MRV on preferred café smoking policy was examined via a series of Chi-square (χ^2) tests. P-value less than .05 was considered as the evidence of statistical significance.

Agglomerative hierarchical cluster analysis of the 22-item attitudinal scale was performed to explore the scale's underlying dimensions. Measure of internal consistency (reliability) of the attitudinal scale was calculated using Cronbach's alpha coefficient (Carmines and Zeller, 1979; Cook and Campbell, 1979).

FINDINGS

Respondent profile

Of the 43 respondents, 14% were female and 86% male (Table 1). Just fewer than 60% identified themselves as owners, while the remaining 40% were managers. In terms of the length of time spent in the ownership / managerial position at a current café, 42% spent 0-5 years, followed by 6-10 years (33%), 11-15 years (16%), and 16-20 years (9%). Just over a third of the respondents worked 0-5 years in any type of hospitality establishment, followed by 6-10 years (33%), 11-15 years (23%), and >16 years (9%). Majority (81%) were high school graduates, while 19% held an associate degree or higher. In terms of age, 42% were in the 35-44 age group, followed by 25-34 year-olds (37%), 16-24 year-olds (14%), and those 45 and older (7%). Just fewer than 12% of respondents lived and/or worked abroad in excess of one year. As for respondents' smoking status, 60% smoked full-time, while the remainder smoked occasionally. Interestingly, the percentage of full-time smokers in this study's sample is slightly higher than that of U.S. bartenders (55.49%; Pizam, 2012). Moreover, in comparison to our sample, 38% of B-H adults (i.e., 18+) are smokers (Bosnia and Herzegovina Federal Office of Statistics, 2011).

When asked about their preferred type of café smoking policy, 46% of the respondents indicated that smoking should be allowed in all guest areas, followed by both outdoor and designated indoor areas (35%), outdoor area only (9%), designated indoor area only (7%), and a full smoking ban (2%). In terms of café seating allocation, 72% (31) of cafés have an equal share of indoor and outdoor seating, followed by nine (21%) cafés with majority indoor and three (7%) with majority outdoor seating.

Table 1

Respondent profile

Variable	#	Valid %
Gender (n=43)		
Male	37	86.0
Female	6	14.0
Age (n=43)		
16-24	6	14.0
25-34	16	37.2
35-44	18	41.9
≥45	3	7.0
Education attained (n=43)		
High school	35	81.4
Associate degree or higher	8	18.6
Current position (n=42)		
Owner	25	59.5
Manager	17	40.5

Length of time in current position in years (n=43)		
0-5	18	41.9
6-10	14	32.6
11-15	7	16.3
≥16	4	9.3
Hospitality work experience in years (n=43)		
0-5	15	34.9
6-10	14	32.6
11-15	10	23.3
≥16	4	9.3
Prior experience living abroad in excess of one year (n=43)		
Yes	5	11.6
No	38	88.4
Smoking status (n=43)		
Full-time smoker	26	60.5
Occasional smoker	17	39.5
Preferred café smoking policy (n=43)		
Ban smoking everywhere	1	2.3
Allow smoking everywhere	20	46.5
Allow smoking in outdoor area only (e.g. on the patio)	4	9.3
Allow smoking in designated indoor area only	3	7.0
Allow smoking in outdoor and designated indoor areas only	15	34.9
Café seating allocation (n=43)		
Majority outdoors	3	7.0
Majority indoors	9	20.9
About the same both outdoors and indoors	31	72.1

Attitudes towards a smoke ban

Because of our dataset's high dispersion (coefficient of variation V>.30), respondents' answers are indicated by the median level of agreement with the 22 attitude items (Table 2). Accordingly, café owners/managers reported the highest agreement with the following five statements: "following the ban's implementation, smokers will frequent partially or fully smoke-friendly cafés more often", "following the ban's implementation, non-smokers will frequent cafés with a partial or full smoke-ban more often", "the impending law is necessary to protect staff's health", "following the ban's implementation, smokers will consume less coffee in cafés", and "the imminent café smoking ban will be very hard to implement". Agreement with the initial two statements can likely be explained by owners'/managers' belief that they should be free to designate their café as either a smoking or a non-smoking establishment. In doing so, the patrons would also be free to visit a café with a corresponding smoking policy. Participants indicated lowest degree of agreement with the statements "the approaching law will encourage smokers to quit", "I'm bothered by others who smoke near me", "I'm concerned about the consequences of SHS on my health",

and "smoking should be banned in cafés". Respondents fully disagreed that the impending law would result in increased café patronage. Disagreement with the idea that smoking should be banned in cafés can be explained by the nature of our sample, which comprises only full-time and occasional smokers.

Table 2

The relationship among smoke ban attitudes, demographics, and MRV

V[i]	*M*[i]	G[iii]	A[iv]	E[iii]	H[iv]	I[iii]	S[iii]	P[iii]	C[iii]	T[iv]	SA[iv]
1[v]	3	.667	.495	.071	.419	.222	.056	.000^{***D}	.431	.936	.945
2	4	.382	.051	.549	.051	.875	.024^{*O}	.002^{**D}	.915	.389	.272
3	2	.718	.067	.675	.365	.159	.778	.183	.534	.556	.999
4	3	.820	.011^{*24}	.211	.425	.449	.034^{*R}	.093	.387	.241	.073
5	1	.334	.988	.043^{*A}	.683	.794	.127	.050^{*D}	.455	.560	.116
6	3	.783	.150	.443	.593	.905	.451	.394	.619	.591	.958
7	5	.016^{*F}	.022^{*24}	.309	.142	.578	.031^{*R}	.059	.967	.089	.927
8	4	.142	.633	.508	.332	.445	.589	.199	.577	.602	.892
9	3	.108	.923	.056	.961	1.000	.346	.166	.041^{*O}	.917	.057
10	3	.324	.184	.129	.002^{*10}	.183	.147	.140	.944	.014^{*5}	.186
11	3	.525	.496	.783	.991	.247	.189	.077	.057	.686	.331
12	3	.083	.716	.343	.694	.149	.058	.018^{*D}	.097	.394	.680
13	3	.829	.322	.531	.751	.969	.064	.048^{*D}	.460	.309	.607
14	2	.939	.904	.422	.284	.263	.003^{**O}	.325	.052	.454	.550
15	2	.251	.274	.754	.284	.535	.000^{***O}	.004^{**D}	.695	.444	.725
16	3	.443	.060	.934	.261	.656	.578	.018^{*D}	.421	.540	.527
17	3	.429	.482	.675	.278	.040^{*N}	.488	.865	.139	.193	.663
18	2	.637	.247	.623	.354	.132	.031^{*O}	.005^{**D}	.094	.131	.437
19	3	.182	.006^{**34}	.575	.295	.674	.016^{*R}	.046^{*A}	.496	.256	.041^{*I}
20	4	.646	.322	.141	.144	.330	.079	.105	.667	.953	.567
21	4	.683	.136	.446	.447	.110	.401	.117	.410	.917	.728
22	3	.178	.185	.673	.204	.163	.002^{**O}	.092	.655	.489	.016^{*O}

[i]Variables (groups with the highest average ranks are in parentheses): G=gender (F=female); A=age (24=16-24 years; 34=25-34 years); E=education (A=associate degree or higher); H=hospitality work experience (10=6-10 years); I=experience living abroad (N=no); S=smoking status (R=regularly; O=occasionally); P= preferred cafe smoking policy (A=allow; D=allow in designated areas); C=current position held (O=owner); T=length of time in current position (5=0-5 years); SA=seating allocation (O=majority outdoors; I=majority indoors).

[ii]Because of dataset's high dispersion (coefficient of variation V>.30), mean is not a valid measure of central tendency, and median is used instead.

[iii]Mann-Whitney U (M-W U) test.

[iv]Kruskal- Wallis (K-W) test. $^{*}p<.05$; $^{**}p<.01$; $^{***}p<.001$.

[v]1. It is more pleasant to visit cafés with full or partial smoke ban; 2. Impending law [IL] is necessary to protect staff health; 3. IL will encourage smokers to quit; 4. IL will negatively impact café business; 5. IL will result in increased café patronage; 6. IL will negatively affect staff; 7. Smokers will visit cafés with full or partial smoking allowed more often after the IL's enactment; 8. Non-smokers will visit cafés with full or partial smoking ban more often after the IL's enactment; 9. IL is unfair to smokers; 10. Smokers will smoke at home more often after the IL's enactment; 11. IL will bring about job loss; 12. I support the IL banning smoking in cafés; 13. I'm frequently exposed to workplace SHS; 14. I'm bothered by others who smoke near me; 15. I'm concerned about the consequences of SHS on my health; 16. SHS is hazardous; 17. IL will improve the quality of life; 18. Smoking should be banned in cafés; 19. Patrons will drink less alcohol in cafés after the IL's enactment; 20. Patrons will drink less coffee in cafés after the IL's enactment; 21. It will be very difficult to implement the IL; 22. Café patrons will react very favorably to the IL.

The effects of demographics and MRV on smoke ban attitudes

For the 22-item attitudinal scale, the average linkage between groups clustering produced a three cluster solution (Friedman test $\chi 2$, $p<0.001$) with a 2-item, 7-item and 11-item clusters (Table 3). The three scales achieved an acceptable .78, .78, and .71 Cronbach's Alpha (Nunnally, 1978), respectively. Based on reliability analysis, items seven and 21 are listed separately.

Table 3

Clustering output for the 22 attitudinal items

Clusters[i]	Mean rank
Cluster 1: (Items 19[ii], 20)	2.78
Cluster 2: (Items 1, 2, 6, 10, 13, 16, 18)	2.58
Cluster 3: (Items 3, 4, 5, 8, 9, 11, 12, 14, 15, 17, 22)	1.52
Item 7	3.91
Item 21	4.21

[i]Friedman test χ^2, $p<0.001$

[ii]For detailed description, please refer to the footnote [v] in Table 2.

Specifically, café owners/managers showed statistically higher degree of agreement with the following statements (cluster 1): "following the ban's implementation, smokers will consume less alcohol in cafés" and "following the ban's implementation, smokers will consume less coffee in cafés". Statistically lower degree of café owner/manager agreement is with the remaining statements (clusters 2 and 3). Some of the items that received the lowest level of agreement (cluster 3) are "the impending law will negatively impact café business", "the impending law will result in increased café patronage", "the impending law will bring about job loss", and "café patrons will react very favorably to the impending law". Moreover, café owners and managers oppose the café smoking ban.

The application of K-W and M-W U tests in order to detect the effects of respondent demographics and MRV on smoke ban attitudes indicates virtually no significant differences in regards to gender, education, length of hospitality work experience, experience living abroad, current position held, length of time in current position, and café seating allocation (Table 2). However, the greatest number of significant differences was noted due to preferred café smoking policy and smoking status.

For instance, occasional smokers favoring smoking in café designated areas only – as compared to their counterparts – hold significantly stronger beliefs that the impending smoke ban is necessary to protect staff health and that smoking should be banned in cafés. These café owners and managers are also

significantly more concerned about the adverse effects to their health from exposure to café SHS. On the other hand, regular smokers aged 25-34 owning or managing cafés with a majority indoor seating and favoring smoking in all café areas – as compared to other respondents – report significantly greater concerns that their patrons will consume less alcohol in cafés following the ban's implementation. Similarly, female owners/managers aged 16-24 who smoke on a regular basis are significantly more likely to believe that following the law's enactment smoking patrons will more often frequent cafés where smoking is either fully or partially allowed. For brevity, other significant results in Table 2 are not further elaborated here; however they should be interpreted in a similar fashion.

The effects of demographics and MRV on café smoking preferences

In terms of respondents' preferred café smoking policy, Chi-square tests revealed significant differences solely due to smoking status. There were no significant differences in regards to gender, education, age, hospitality work experience, current position held, ownership / managerial experience at a current café, experience living abroad, preferred café smoking policy, and café seating allocation. In terms of smoking status, occasional smokers support a partial café smoking ban (i.e., smoking in designated areas only), whereas full-time smokers would allow café smoking in all guest areas (χ^2, $p<0.01$). Perhaps occasional smokers are less tobacco dependent and thus more appreciative of the idea that would grant them the choice to have a smoke in the café's designated smoking area, and then return to the smoke-free part of the café.

DISCUSSION AND CONCLUSION

In light of the significantly more pronounced severity of the current global economic crisis in transition countries (as opposed to developed countries), and the attention being given to smoking globally, the tourism sector in transition countries warrants special attention because tourism demand is impacted heavily by crisis events resulting in negative consumer perceptions (Pforr and Hosie, 2007). Since there is a lack of peer reviewed research regarding (1) the effects of smoke-free legislation on the hospitality industry during the economic crisis, (2) the impacts on hospitality sectors in transition countries, and (3) owners' attitudes toward smoke-free legislation in general, it is believed that results of this timely study have theoretical, managerial, and policy-making implications.

This study empirically profiled B-H's café owners/managers and examined their pre-implementation attitudes towards a café smoke ban. It also investigated the relationships among demographic characteristics, management-related variables, and the reported attitudes. The results revealed that many respondents are generally unaware of the dangers of café SHS. Moreover, there is nearly an even split between those favoring some sort of ban on café smoking and those in favor of allowing smoking everywhere. While gender, education, length

of hospitality work experience, experience living abroad, current position held, length of time in current position, and café seating allocation were for the most part not significant in explaining different perceptions toward a smoking ban, preferred café smoking policy and smoking status somewhat influenced how respondents viewed the smoking ban. This finding suggests that lawmakers should consider population characteristics (i.e., high smoking prevalence) when devising café smoking policies.

From a practitioner perspective, it intuitively makes sense to envision at least two different outcomes from banning café smoking at the height of the economic crisis or when the economy is doing well. That is, since the crisis has reportedly brought many café operators in transition countries to their knees by significantly squeezing the consumers' discretionary spending, it begs the question whether the impending smoke ban will finish them off? Past research suggests that when a smoke ban is implemented during the economically healthy times, a resulting decrease in the number of smoking guests is typically offset by an increased patronage of nonsmokers and former smokers (Roseman, 2005). It remains questionable whether during the economic downturn there will be a large enough and financially viable customer segment of nonsmokers to replace the smokers whom are likely to visit cafés less after the ban. In other words, policy makers in transition economies may do well to consider the most appropriate timing for the introduction of the smoke-free ordinances.

The current study was limited to café owners and managers in B-H before the approaching smoke ban. Thus, future research should involve restaurant owners/managers and comparisons should be made between café and restaurant owners/managers. More research is also necessary to determine patrons' and staff perceptions of the smoke-free ordinances, both in B-H and other transition economies. After the enactment of a smoke-free legislation in B-H and other transition countries, future studies should revisit the issue of the effects of smoke-free laws in the hospitality industry. Similarly, hospitality owners and managers in these countries should be queried to see what kind of challenges they are encountering or have encountered during the changes or to identify how they comply with the smoking regulations.

Another potential limitation of this study lies in the number of response categories used to capture the respondent length of hospitality work experience and the length of ownership / managerial experience at a current café. While both items include a '0-5 years' response category, future studies should consider breaking this down further. Namely, the difference between working one month and five years in the industry and forming attitudes on smoking may be substantial. Also, future studies should consider defining what is meant by full-time and occasional smoking status. Since validity is an incremental build-up of information from various studies dealing with the concept of scientific inquiry (Anastasi, 1976), future research on smoke-free legislation in cafés and other hospitality contexts will serve to enhance and empirically validate or invalidate the research instrument used in this study.

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STAVOVI VLASNIKA KAFIĆA PRIJE DONOŠENJA ZAKONA O ZABRANI PUŠENJA U TRANZICIJSKIM ZEMLJAMA

Sažetak

Dok sve veći broj zemalja i podnacionalnih jedinica zabranjuje pušenje u ugostiteljskim objektima, istraživanje o utjecaju zakona o zabrani pušenja fokusiralo se na ugostitelje i ugostiteljstvo u razvijenim zemljama. U nadi da ćemo pomoći popuniti tu prazninu u radu se empirijski istražuje veza između stavova vlasnika/voditelja kafića, demografije i varijabli upravljanja prije primjene zakona o zabrani pušenja u jednoj tranzicijskoj zemlji, Bosni i Hercegovini. Rezultati su pokazali da spol, obrazovanje, radni staž u ugostiteljstvu, život u inozemstvu, trenutno radno mjesto, dužina rada na tom radnom mjestu, i podjela prostora u kafiću u najvećem dijelu nisu bili važni u objašnjavanju različitih stavova prema zabrani pušenja. Ipak, preferirana politika pušenja u kafiću i status pušenja u određenoj su mjeri utjecali na stav sudionika o zabrani pušenja. Štoviše, čini se da je preferiranje pušenja u kafiću potaknuto statusom ispitanika. Objašnjeni su teorijski i menadžerski učinci, kao i mogućnosti za buduća istraživanja.

Ključne riječi: Pasivno pušenje, zabrana pušenja, kafić, stav, tranzicijska zemlja, vlasnik, upravitelj, Bosna i Hercegovina

JEL klasifikacija: I18, L83, M19