Outline of Key Research Questions, Key Outcome Variables, and Potential Effect Sizes:

Smoke-Free Multiunit Housing Policy Quasi-Experimental Study

Key Research Questions	Key Outcome Variables	Policy Type	Study Design and Population	Effect Size	Source
5 What is the impact of smoke-free MUH policy on MUH	a. Frequency of having respiratory and sensory symptoms among both adults and children	Smoking ban in workplaces	Pre-post longitudinal follow up design, hospitality workers in New York	Respiratory symptoms: no change in overall prevalence. Sensory symptoms: declined from 88% to 38% (P<0.01)	Farrelly, MC et al. Changes in hospitality workers' exposure to secondhand smoke following the implementation of New York's smoke-free law. Tobacco Control 2005; 14:236
residents ?		Smoking ban in indoor workplaces	Natural experiment, cohort, pre-post test with control group, non-smoking bar staff in Scotland	Intervention area: percent of people reporting any respiratory symptoms dropped from 65% at baseline to 49% at follow-up (P=0.001); percent of people reporting any sensory symptoms dropped from 67% to 45% (P<0.001) Control area: no significant change for either type of symptoms	Allwright, S et al. Legislation for smoke-free workplaces and health of bar workers in Ireland: before and after study. BMJ 2005; 331: 1117
	b. Self-reported SHS exposure	Smoking ban in indoor public and	Natural experiment, cohort, pre-post test with control group,	Intervention area: SHS exposure at work decreased from 40 hours	Allwright, S et al. Legislation for smoke-free workplaces and health of bar workers in Ireland: before and

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	at policy- targeted areas	workplaces	non-smoking bar staff	to 0 from baseline to follow-up (P<0.001) Control area: decreased from 42 to 40 hours (P=0.02)	after study. BMJ 2005; 331: 1117
		Smoking bans in indoor public places	Pre-post longitudinal follow up design, hospitality workers in New York	SHS exposure at work declined from 12.1 hours to 0.2 hours (P<0.001)	Farrelly, MC et al. Changes in hospitality workers' exposure to secondhand smoke following the implementation of New York's smoke-free law. Tobacco Control 2005; 14:236
	c. Salivary cotinine concentration	National smoking ban in indoor public	Repeated cross- sectional study, primary school children (mean age: 11.4 years) in Scotland	The geometric mean salivary cotinine concentration in nonsmoking children fell from 0.36 (95% confidence interval 0.32 to 0.40) ng/ml to 0.22 (0.19 to 0.25) ng/ml after legislation	Akhtar, PC et al. Changes in child exposure to environmental tobacco smoke (CHETS) study after implementation of smoke-free legislation in Scotland: national cross sectional survey. BMJ 2007; 335:545
		Smoking ban in indoor workplaces	Natural experiment, cohort, pre-post test with control group, non-smoking bar staff	With policy: dropped 80%, from median 29.0 nmol/l (95% confidence interval 18.2 to 43.2 nmol/l) to 5.1 nmol/l	Allwright, S et al. Legislation for smoke-free workplaces and health of bar workers in Ireland: before and after study. BMJ 2005; 331: 1117

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				(2.8 to 13.1 nmol/l) Without policy: dropped 20% (from median 25.3 nmol/l (10.4 to 59.2 nmol/l) to 20.4 nmol/l (13.2 to 33.8 nmol/l))	
		Smoking ban in indoor workplaces	Pre-post longitudinal follow up design, hospitality workers in New York	Decreased from 3.6 ng/ml (95% CI 2.6 to 4.7 ng/ml) to 0.8 ng/ml (95% CI 0.4 to 1.2 ng/ml) (p < 0.01)	Farrelly, MC et al. Changes in hospitality workers' exposure to secondhand smoke following the implementation of New York's smoke-free law. Tobacco Control 2005; 14:236
		National smoking ban in indoor public places	Repeated cross- sectional study, nonsmoking adults in Scotland	The geometric mean salivary cotinine concentrations fell by 49% (40% to 56%), from 0.35 ng/ml to 0.18 ng/ml (P<0.001)	Haw, SJ and Gruer, L. Changes in exposure of adult non-smokers to secondhand smoke after implementation of smoke-free legislation in Scotland: national cross sectional survey. BMJ 2007; 335: 549
	d. Fine secondhand smoke particle (PM _{2.5}) concentration	Smoking ban in indoor public places	Pre- and post-policy adoption comparison in 40 selected indoor public places including restaurants, game rooms, pubs in Rome, Italy	In the post-law period, PM2.5 decreased significantly from a mean concentration of 119.3 microg/m3 to 38.2 microg/m3 after 3 months (p<0.005), and	Valente P, et al. Exposure to fine and ultrafine particles from secondhand smoke in public places before and after the smoking ban, Italy 2005. Tobacco Control 2007; 16:312

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				then to 43.3 microg/m3 a year later (p<0.01).	
	e. Cigarette consumption among adult respondents	National smoking ban in indoor public places	Pre- and 4 months post-policy implementation comparison, repeated cross-sectional telephone study, a national sample of food service workers	The number of cigarettes smoked by continuing smokers decreased 1.55 (P<0.001)	Braveman, MT, Aaro, LE, Hetland, J. Changes in smoking among restaurant and bar employees following Norway's comprehensive smoking ban. Health Promotion International 2008; 23:5
		Smoking ban in indoor public places	Repeated cross-sectional study. Surveys were conducted at 6 months before, 6 months after, and 18 months after policy implementation among a random sample of telecom workers	A reduction in workday cigarette consumption of 3 to 4 cigarettes a day was observed at 6 and 18 months after policy adoption. Smoking prevalence dropped about 5 per cent 18 months after policy implementation	Borland, R, Owen N, Hocking, B. Changes in smoking behaviour after a total workplace smoking ban. Australian Journal of Public Health 1991;15:130
		Quitting intention / attempt among adult residents	Not applicable	Not applicable	Not applicable

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6.What is the social impact of regulatory smoke-free MUH policy on MUH residents and operators?	a. Knowledge, attitudes, and beliefs regarding secondhand smoke exposure among adult residents	Smoke-free campus policy	Repeated cross- sectional surveys with a nested 4-wave longitudinal cohort design. Baseline of 3,266 Indiana University and Purdue University undergraduates and follow-up of 3,207	Intervention area: Change in attitude from 2007-2009 toward regulation of smoking in public places pre- and post- adoption=6.7% change (83.2% to 89.9%, p<0.01) Control area: Change in attitude from 2007-2009 toward regulation of smoking in public places=-4.2% change (91.3% to 87.1%) Intervention & Control: Difference in change between intervention & control=10.9 (P<0.01)	Seo DC, Macy JT, Torabi MR, Middlestadt SE. The effect of a smoke-free campus policy on college students' smoking behaviors and attitudes. Prev Med. 2011 Aug 9.
	b. Operators' self-reported barriers and facilitators of MUH policy adoption,	Not applicable	Not applicable	Not applicable	Not applicable

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7. What is the cost-effectiveness of regulatory MUH smoke-free policies?	implementati on and enforcement c. Operators' knowledge, attitudes, and beliefs about smoke-free MUH policies a. Smoking- related operation cost saving	MUH policy Smoke-free bars and restaurants MUH policy	Cross-sectional telephone and in- person survey with 241 Western New York State MUH residents Pooled time series cross-sectional design with data from 10 Minnesota cities from 2003 to 2007 Zero-inflated negative binomial model of property smoking-related costs of 343 California MUH complexes	Odds ratio of interest among MUH operators (government-subsidized units vs. none) in restricting smoking in units=3.12, 95% CI = 1.14-8.52 Increase of total revenue in city-quarters due to comprehensive local ban compared to those with no or partial ban=0.026% (p=0.05) Cost savings due to a comprehensive smokefree policy=\$1,339 per property per year	King BA, Travers MJ, Cummings KM, Mahoney MC, Hyland AJ. Prevalence and predictors of smokefree policy implementation and support among owners and managers of multiunit housing. Nicotine Tob Res. 2010 Feb;12(2):159-63. Collins NM, Shi Q, Forster JL, Erickson DJ, Toomey TL. Effects of clean indoor air laws on bar and restaurant revenue in Minnesota cities. Am J Prev Med. 2010 Dec;39(6 Suppl 1):S10-5. Ong MK, Diamant AL, Zhou Q, Park HY, Kaplan RM. Estimates of Smoking-Related Property Costs in California Multiunit Housing. Am J Public Health. 2011 Aug 18.

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	b.Smoking- related unit turn- over cost saving	Not available	Not available	Not available	Not available