

of transitional shelters to environmental tobacco control interventions.

A telephone survey of all long-term transitional shelters in Los Angeles County was conducted from March to June 2005. The 20 min institutional survey utilised a pretested 31-item questionnaire to query administrative officials at each participating shelter about resident demographics, institutional characteristics (eg, size, average length of stay, etc), inventory of existing "no smoking" policies and the willingness of each facility to participate in environmental tobacco control efforts. The study inclusion criteria included that (1) each facility must be operational at the time of the survey; (2) each facility must offer at least a 12-month length of stay to their homeless residents to qualify as a "long-term" transitional shelter; and (3) each facility must be a transitional housing programme based on the continuum of care model for rehabilitating homeless individuals back to mainstream society.⁹

Bivariate and multivariate analyses were conducted using the STATA 9.0 statistical software package to evaluate the relationships between shelter receptivity to environmental tobacco control interventions (dependent variable) and institutional-resident characteristics (independent variables). To understand whether tobacco control policies varied by size of facility, subgroup analyses were conducted by facility-size categories based on the maximum number of beds that were available at each facility: small (<50 beds), medium (50–199 beds) or large (>200 beds). To estimate individual-level statistics from these facility-specific data, some sociodemographic measures were weighted by the number of beds reported for the facility; other statistics were computed directly from shelter-level data.

In all, 76 transitional shelters met the study inclusion criteria and were contacted (table 1). Of these, 71 (93.4%) participated in the survey. Nearly a quarter (23%) had a programme that focused on helping individuals who were addicted to drugs or to alcohol to reduce their dependence on these substances. Another third (30%) had programmes that focused on helping mothers with small children transition to more permanent housing; eight (11%) were dedicated to housing the mentally ill; three (4%) focused on helping war veterans, emancipated youth or gay men find more permanent housing. A majority of the transitional shelters reported having an indoor "no smoking" policy (75%) and designated smoking areas (78%). A total of, 72% and 95%, respectively, reported that they would be open to adopting new anti-smoking policies and environmental tobacco

control interventions designed to reduce resident smoking.

Results from comparative analyses suggest that the size of the facility was inversely related to the likelihood that the facility would report having a current indoor no smoking policy ($p<0.001$), a designated no smoking area ($p<0.001$) and a policy to limit smoking among its residents ($p<0.001$) (table 1). The size of the facility and the service mission of the organisation (eg, those with substance abuse treatment programmes) also predicted greater receptivity towards environmental tobacco control interventions ($p<0.001$). These findings suggest that enforcement of a smoke-free environment may be more difficult at larger facilities or in facilities without experience in treatment for substance misuse.

Contrary to the prevailing perception among tobacco control advocates that homeless service providers have casual attitudes towards client smoking behaviour,³ the present data showed that homeless service facilities, such as long-term transitional housing, recognise the importance of intervening on this high-risk behaviour; they are highly receptive to tobacco control efforts designed to reduce the prevalence of smoking in this population. This emerging viewpoint in the homeless community would suggest that greater investment of tobacco-control resources, tailored to the unique needs of the homeless, would be justified and deserving of further investigation.^{3 10}

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CORRECTION

In the February issue of *Tobacco Control* the cover credit was incorrect. Please find the correct credit below.

Cover credit: Miss America Chesterfield's Valentine Girl Patricia Donnelly of Detroit. A Pocketful of Pleasure Chesterfield. The real reason why Chesterfields are in more pockets every day is because Chesterfield's Right Combination of the world's best cigarette tobaccos gives you a better smoke. . .definitely milder, cooler and better-tasting. You can't buy a better cigarette. Make your next pack Chesterfield. They Satisfy.