

Supplementary materials

Appendix 1: Assessment Checklists

note	Greetings!
select_one YN	Are you volunteer to participate in this study?
select_one Q1	Q1 Region?
text	Q2. Town Name
text	Q3. Name of institution
text	Q4. Type of Business or Service
text	Q5. the Name of the person who gives the interview
select_one Q6	Q6. What is your role or position within the organization?
select_one YN	Q7. Existence of DSA (N.B- A space labeled as DSA)-Observation
select_one YN	Q8. Are there people smoking a cigarette in any indoors or within ten meters radius outdoor of the establishment? (10-meter radius from window, door, or open gate of the indoor, other than the DSA)-Observation
select_one YN	Q9. Availability of No smoking signage or Stickers-observation
select_one YN	Q10. Are No smoking signages or Stickers placed appropriately and visibly? (At the gate, where people used to work or sit to entertain)-observation
select_one YN	Q11. Is the language used in the No smoking signage or sticker clear or understandable to the customer or employee?
select_one YN	Q12. Presence of an ashtray or lighter or other devices in any indoor section or within ten meters radius outdoor of the establishment? (10 meter radius from window, door, or open gate of the indoor)-observation
select_one YN	Q13. The presence of tobacco remains such as cigarette butt within the smoking prohibited section of the establishment-observation
select_one YN	Q14. Presence of tobacco smell within the smoking prohibited section of the establishment-observation
select_one YN	Q15. Presence of a person actually smoking tobacco within the smoking prohibited section of the establishment-observation
select_one YN	Q16. Presence of written regulation by the establishment to ban or prohibit smoking-observation
select_one YN	Q17. Mechanism set by the establishment to enforce smoke free provision (e.g measures to take when it found someone start smoking)
select_one YN	Q18. Do you know about tobacco smoke free law?
select_multiple Q19	Q19. Where do you get the information about smoke free law
text	Q20. What do you think about the implementation of SFE? Probe: Contribution of staff
select_one YN	Q21. Is there any challenge you faced to implement Smoke free law?

text	Q22. If Q21 is yeas, what mechanisms you have used to cope up with the challenges?
select_one YN	Q23. Is there a mechanism to regularly check that everyone respects the rule?
text	Q24. What do you do to stop a person who is found smoking?
text	Q25. What were the reasons behind for those who violated in spite of the existence of signage?
select_one YN	Q26. Do you think your establishment is implementing 100% smoke free law?
text	Q27. If Q 26 is yes, how do you achieve this result?
text	Please write a comment

Appendix 2: CONSENT FORM (English version)

Greetings!

My name is _____. My colleagues and I are both from the Ethiopian Food and Drug Authority (EFDA).

Introduction: This informed consent form is for respondents who can provide adequate information about smoke-free environment implementation. This establishment was selected as a part of the smoke-free initiative in this study. Before you decide to participate, it is important to understand why the research is being conducted and what it will involve. Please take time to read the following information carefully and do not hesitate to ask our staff if there is anything that is unclear or if you would like more information. Please take the time to decide whether you wish to participate.

Purpose: This research aims to understand the implementation of smoke-free laws in public places.

Type of research intervention: This research will involve collecting relevant information about smoke-free status in various public places, such as government buildings, schools, healthcare facilities, transport facilities, and hospitality settings.

Participant selection: All public places in the selected town were part of the study, and participants were preferably adults and those who knew the smoke-free environment implementation well, including owners, managers, and employers.

Voluntary participation: Your participation in this study is voluntary. It is your choice of whether to participate. You may change your mind later and stop participating even if you agree.

Risks: This study poses a minimum risk. The visits will take a small amount of time, but we will try to keep the observational assessment as short as possible and observe all the indoors and premises of the building.

Benefits: All participants will indirectly benefit from the data collected, as this will help us better understand the smoke-free law implementation status in Ethiopia. As tobacco kills secondhand smokers, the findings of this study will help directly nonsmokers from involuntary smoking exposure, because a 100% smoke-free environment is the only measure to prohibit smoking in any public place.

Confidentiality: The information that we collect during this study will be kept confidential. Information collected from you and your institution will be stored away, and only the researchers will be able to see it. In addition, only identifiers will be used during the data analysis, an aggregated form of data will be used, and no single type of data will be reported. The data will not be shared with or given to anyone except for the EFDA and regional regulatory offices.

Who to contact? If you have any questions, you may ask our staff about them now or later. If you wish to ask questions later, you may contact the research coordinators.

Annex 3: Field Checklist

- I. Inform the appropriate government body such as town administration or health office in the selected town using the official support letters about the data collection and get support letter from them if needed.
- II. Get familiar with the city and determine the institution's real location in consultation with your field guide to design the route plan for smooth data collection
- III. Choose an appropriate time for data collection based on the nature of the workplace and hospitality settings (based on each type of institution's regular working hours).
- IV. Contact the appropriate person of the institution such as managers, directors, or owners, introduce yourself using official letters and a personal badge, and get informed consent using the printout consent form

- V. Determine the institution venue Including all areas within the compound and indoor area of the institution particularly, a toilet area near a dining area and the dining area, lobby area, a stairwell, bedrooms, offices, a waiting area, or common area, classrooms, wards, offices that were open to the public, corridors, and other indoor areas for your assessment.
- VI. Draw a standard itinerary to address all prohibited areas within the selected establishment and select the starting point purposely and follow a continuous path.
- VII. In hospitality venues' data collection, please enter the venue, sit as customers, visit the toilet area, and observed the other areas available in the venue.
- VIII. Record all information based on the study checklist using your tablet.
- IX. In each study location, please record the number of people smoking, the presence or absence of cigarette butts, cigarette sales, ashtrays, a label of DSA, the smell of tobacco within the prohibited area, and no-smoking signs, and the visibility of any no-smoking signs – compare with EFDA-approved signage using your show cards.
- X. Take pictures of a cigarette butt, lighter/ashtray, and no smoking signage/stickers within the prohibited area if possible, during the interviews.
- XI. Send your data regularly and keep your records securely
- XII. Contact your supervisors and coordinators and share your plan