

Non-Smoking Area Implementation and Habbit Change in Bugis Ethnic, Sidrap Regency, Indonesia

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Abstract

This study to provide an overview regarding the implementation of Non Smoking Areas (Kawasan Tanpa Rokok) on the Bugis Ethnic in Sidenreng Rappang (Sidrap) Regency, South Sulawesi, Indonesia. This research was conducted using a qualitative method by collecting data through interviews and Focus Group Discussion (FGD) methods with related literature and reviewing various regulations issued by the government to support the existing data. The results shows that the implementation of the KTR has not complied by some of the community, so there are still many violations committed regarding the implementation of KTR in public places. Legal implementation related to violations of the Non Smoking Areas is considered still weak and need to improve but the habit changes made was in the series of "Mappacci" activities in Carawali village, no longer serving cigarettes but instead giving plant seeds to the bride and groom. However, this good implementation cannot be followed up due to the Covid-19 Pandemic. The community considered not ready to accept the sanctions. Outreach, promotional and preventive efforts really need to be massively increased to increase public knowledge regarding

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the rules and dangers of smoking but in carawali village, they can replace old habits with new ones.

Keywords: Non Smoking Area, Implementation, Habbit Change, Bugis Ethnic, Sidrap Regency.

1. INTRODUCTION

One of the world's health problems is the uncontrolled use of smoking tobacco which has a very negative impact on world health [1]. Based on data from the World Health Organization (WHO) smoking prevalence among adult male and female smokers in ASEAN who conducted a population-based survey study of adults aged 25-64: In Thailand (2020) the number of male smokers is 41% and 2.9% female. In Malaysia (2020) the number of male smokers is 44% and 1.1% female. In Singapore (2020) the number of male smokers is 28% and 5% for women. Meanwhile, in Indonesia (2020) the number of male smokers is 71% and 3.7% for women. The high number of smokers in Indonesia [2], is a part that must be the focus of the government's attention [3].

Smoking has become entrenched in life in society and is an integral part of most community activities. Cigarettes are an addictive substance that contains 4000 chemicals [4], of which 200 contain poison and 43 other types can cause cancer in the body so that it can be dangerous for smokers and those around them [5]. Smoking is a determinant of a country's morbidity and mortality rates [6]. One of the biggest causes of death in Indonesia is circulatory system disease [7] including Chronic Obstructive Pulmonary Disease (COPD) [8], Cardiovascular disease [9], and is one of the causes of lung cancer [10].

Smoking habits in an area have influenced the customs of an area, for example in the Bugis Ethnic, smoking habits among the community make cigarettes a filler in their spare time when working, become one of the treats at an event, and there is an assumption that smoking can strengthen togetherness and strengthen their bodies. when working. The unstoppable habit of smoking is a challenge in the world of health, so it is very important for them to pay attention to promotive and preventive efforts. Government participation is one of the efforts to reduce the growth of the smoker population, especially in Indonesia.

One effective way to control tobacco to reduce smoking is with a policy [11]. Several policies have been issued in various countries as an effort to control the prevalence of smoking, such as in the United States there is the Law on Tobacco Control, the Law on Prevention of Family Smoking [12]. In Indonesia there is Law of the Number 36, 2009 concerning Health (UU No. 36/2009), Minister of Health Regulation Indonesia Number 40, 2013 concerning Road Map of Controlling the

Impact of Smoking Consumption on Health (Permenkes No. 40/2013) [13].

Tobacco Control Support Center Indonesian Association of Public Health Experts (TCSC-IAKMI) in collaboration with the Southeast Asia Tobacco Control Alliance (SEATCA) and the World Health Organization (WHO) [14], Indonesia states that there are 4 best policy alternatives for tobacco control, they are; 1) increasing taxes (65% of the retail price), 2) prohibiting all forms of tobacco advertising, 3) implementing 100% Non smoking areas in public places, workplaces, education, and 4) enlarging smoking warnings and adding pictures of the effects of smoking on cigarette packs [15].

Based on this policy, each region has the mandate to implement these regulations through Regional Regulations. This shows that the government in South Sulawesi, especially the Bugis Ethnic, in Sidenreng Rappang (Sidrap) Regency, administratively takes a holistic approach by considering preventive and promotive efforts so that people do not smoke in Non Smoking Areas. The effectiveness of several Non Smoking Area policies has not been reported so that this can hinder the implementation of Non Smoking Areas in Indonesia. Based on research by Levy, et al cited by Gorin et al in 2003, it was reported that the existence of a Non Smoking Area could have an effect on reducing the number of smokers by 10% and the concentration of cigarette particles inhaled by passive smokers was reduced by 84% [16].

Implementation of Non Smoking Areas (Kawasan Tanpa Rokok/KTR) is a form of effort to protect the health of people who do not smoke but have the opportunity to be exposed to cigarette smoke, commonly referred to as passive smoking [17], [18]. Non Smoking Areas are rooms or areas that are declared prohibited for the production, sale, advertising, promotion and or use of cigarettes [19]. The places included in the Non-Smoking Area are divided into seven public areas, namely: (1) Health care facilities, (2) Places for teaching and learning, (3) Children's play areas, (4) Places of worship, (5) Public transportation, (6) Workplaces, and (7) Public places and other designated places [20].

Previous research conducted at two hospitals in the Bugis ethnic community, namely Arifin Nu'mang Hospital, Sidenreng Rappang Regency and Andi Makkasau Hospital, Pare – Pare City, showed that from the point of view of implementing regional regulations regarding Non Smoking Areas, it was stated that they had not been implemented optimally because there were factors that influence of policy implementation, communication, resources, disposition, and bureaucratic structure [21], [22].

The Local Government of Sidrap Regency, which have also issued Regional Regulations on Non Smoking Areas, are currently optimizing the implementation of Regional Regulations. It is necessary to review how tobacco control is implemented from the perspective of the local government and the community. This study provides an overview regarding the implementation of tobacco control which is in Indonesia interpret it to Non Smoking Areas on the Bugis Ethnic Community in Sidrap Regency.

2. METHOD

This research was conducted on the Bugis Ethnic in Sidrap Regency. The objects of this study were representatives of the local government, the health office and the Bugis people who live in the Sidrap Regency. This research was conducted using qualitative methods by collecting data through in-depth interviews, focus group discussions (FGD) and field observations. Related literature is used to review various regulations issued by the government to support the existing data.

3. RESULTS AND DISCUSSION

The results of the analysis of in-depth interviews with the local government, health department and the community show a positive attitude towards the implementation of Non Smoking Areas in Sidrap Regency. Some of the things that are the focus of the implementation of this law in this study, related to the implementation of sanctions for violations and the Implementation of Non Smoking Area in Sidrap Regency. includes the following.

a) Implementation of Non Smoking Areas in Public Places

The implementation of Non Smoking Areas in public places has been carried out by many local governments and health workers. The Implementation is carried out by placing signs in public places as a warning that smoking is prohibited in these places. The purpose of the Local Government Law (PERDA) policy regarding Non Smoking Areas is to provide health protection for the community from the dangers of cigarette smoke and provide a clean and healthy space and environment for the community. Results of interviews with informants in Sidrap Regency:

“.....there has been an appeal and there have been signs that smoking is prohibited based on the regional regulation, we have distributed it. For those who mean smoking is a hobby, the effect is minimal. I see these people with pneumonia, ISPA, tuberculosis and then they do an examination and then this disease is diagnosed that the disease is related to smoking behavior which can affect the rate of decreasing or

stopping smoking in one family. But in general I think this is still lacking.” (1st Informant)

Based on 1stInformant said, there has been an appeal and there have been signs that smoking is prohibited based on the regional regulation that we have distributed. Then he said for those who are referring to smoking as a hobby, the effect is minimal. People with pneumonia, ISPA, tuberculosis and then they do an examination and then this disease is diagnosed that the disease is related to smoking behavior which can affect the rate of decreasing or stopping smoking in one family. But in general, he think this is still need more than that.

“.....It hasn't run optimally because there are still many people who oppose it because their desire maybe to smoke is big enough to be a violation, we also don't know about the KTR regional regulation and there has never been any socialization about it....” (1stFGD)

Based on 1stFGD said, It has not run optimally because there are still many people who oppose it because maybe their desire to smoke is big enough to be a violation. The community also don't know about the KTR regional regulation and there's never been heard any socialization about it.

The Non Smoking Areas Regional Regulation still needs to be socialized, carry out education, promotion and preventive actions on an ongoing basis so that it will reduce the prevalence of smokers in the area. Previous research stated that by increasing cigarette taxes; implementing a comprehensive Non Smoking Areas; ban all tobacco advertising, promotion, and sponsorship; and funding comprehensive tobacco control programs, especially those that include media campaigns, is a highly effective strategy for reducing smoking prevalence. This, when combined with several other policies that stand out tend to be very effective in increasing the success of reducing the prevalence of smoking and increasing smoking cessation efforts, for example by imposing sanctions on Non Smoking Areas violations [23].

Based on the results of field observations, it is shown that some Bugis Community adhere to not smoking in formal areas such as in several offices where non smoking signs are posted, in schools and colleges in Sidrap Regency. But on the other hand, there are still many smokers who smoke in Non Smoking Areas, especially in public places in informal areas such as parks, public transportation, markets specially in tradional market and in parking lots/outside the main buidling places of worship.

The problem faced is the lack of self-awareness not to smoke in places that have been designated not to smoke in the area. Public awareness is still very low to create a Non Smoking Area. The interesting thing from the results of each smoker FGD interviewed stated:

"In terms of people's attitudes, because there are also people who have been banned but still think it's stupid, it depends on their respective awareness, even though there are rules, for example in hospitals, we still see a lot, after all, smoking has been banned, but smoking is still in place. outside"(1stFGD)

The 1stFGD said in terms of the attitude of the community because there are also people who have been banned but, they still think they are ignorant, it depends on their respective awareness, even though there are rules, for example in hospitals, we still see a lot of people, smoking is prohibited, but they still smoke outside.

In other FGD activities, the almost some of informant stated that they agreed with the existence of Non Smoking Area.

"We agree with the No-Smoking Area (KTR) because it can protect non-smokers from cigarette smoke, especially women and children" (2ndFGD)

The 2ndFGD, said they agree with the Non Smoking Area (KTR) because it can protect non smokers from smoke of cigarette, especially women and children.

"Agreed with the existence of a non-smoking area, smoking must also be eradicated in the mosque. I agree with the existence of smoking-free and non-smoking areas because why.. A lot of people don't really like cigarette smoke because they know the dangers of smoking so if it's not restricted so it could have an impact on people who don't smoke, especially since smoke is actually more dangerous that comes out of the smoker rather than inhaling it so it's like that" (3rdFGD)

The 3rdFGD also said that they agree with the existence of a non-smoking area, smoking must be eradicated in the masjid (worship place for muslim) too. They also agree with the existence of smoking free areas and non smoking areas because a lot of people don't really like smoke of cigarette. They know the dangers of smoking so if it's not restricted so it could have an impact on non-smokers, especially since smoke is actually more dangerous smoke that comes out of the smoker rather than non smoker.

This finding is in line with research conducted by Harris & Jongserl (2018) which stated that the relationship between the likelihood of smoking and friendship with people who smoke has a stronger influence on a person's smoking behavior. People who have a more positive tendency to smoke will influence people who have a negative view of smoking in public places. In this case, a person who has naughty friends (that is, peers who smoke) may be tempted or pressured to smoke. Yet, at the same time, a person may be reluctant to do so due to a lack of general approval, or even selective criticism, from others who do not smoke [24].

b) Sanctions Implementation for Violating Indonesian Law no. 36, 2009

The sanctions implementation for Non Smoking Area violations is considered to be still very weak. Informants stated that the community was still within the limits of reprimand but it was difficult to prohibit not smoking because this habit had become a "hobby" for the community so that continuous efforts were needed and supported by public awareness regarding the implementation of Non Smoking Area. As the results of interviews conducted in:

"That's just that there is no legal umbrella for this Satpol PP to collect, for example, a fine of 50,000 rupiah for a smoking ban related to the KTR Regional Regulation, so it is only limited to reprimanding if there is no more sanction than" (2ndInformant)

2ndInforman said, It's hard for Satpol PP (Satuan Polisi Pamong Praja/ Civil Service Police Unit) to move, for example collect the fine 50,000 rupiah there was no legal law for this to collect, a smoking violation related to the Non Smoking Area Regional Regulation, so it's only limited to reprimanding if there hasn't been a sanction beyond that.

One of the weaknesses in the application of sanctions is the community's unpreparedness to accept these sanctions and whether the local government has the heart to impose such severe sanctions on the community, especially the middle to lower class.

With regard to this law, the majority of smokers, non-smokers and ex-smokers alike support the new restrictions and consider the Tobacco Control restrictions to be effective [25]. So far, the implementation of sanctions related to violations of the Non Smoking Areas in Sidrap Regency is still at the Verbal reprimand because it has become a habit so that people are still difficult to accept sanctions for these violations. Therefore some informants stated that it was necessary to emphasize sanctions:

Indonesia Law No. 36, 2009 states that "Everyone who deliberately violates the Non Smoking area as referred to in Article 115 shall be subject to a maximum fine of Rp.50,000,000.00 (fifty million rupiah)". The community considers that the sanctions given are very burdensome, especially for the poor and the smoker population in the Bugis Ethnic in Sidrap Regency is dominated by the lower to middle class. So it is necessary to conduct a review regarding the imposition of sanctions for Tobacco Control policy violations by considering the condition of the people of a region.

Previous research suggests that failure to define mechanisms for implementing laws and sanctions in laws will lead to delays in implementing and enforcing these laws as well as a number of compliance issues. For tobacco control laws to be effective, public health actors need to consider the place of enforcement responsibility and the sanctions available to law enforcement agencies [26].

Another interesting thing found in this research is local government, Sidrap Regency to implement Tobacco Control policy in its territory, Carawali Village is designed as a Pilot Project village that has implemented the Non Smoking Area in throughout the village and made village regulations related to the dangers of smoking, not smoking in the house, and which areas are that can not to smoke there. This is a form of the seriousness of the village government and the government of Sidrap Regency regarding the implementation of Non Smoking Area.

This received a positive response from the Bugis ethnic in Carawali village community, This is in based on the results of an in-depth interview with the Carawali village head.

"When Perdes came out, thank God, there were many positive responses from the community. Because every training, we cooperate with health promotion, health sanitarians, we cooperate there. So if there are counseling, we will raise it again. Not as easy as turning the palm of the hand" (3rdInformant)

The 3rdInformant said when Local Village Regulation (Peraturan Desa/ PERDES) came out, there were lots of positive responses from the community. It is happen because in every training, the Carawali Village Government cooperate with Health Promotion, Health Sanitarians, They cooperate in there. So if there are counseling, we will raise it again. He said it's not as easy as turning your palm.

This received a positive response from the Bugis ethnic in Carawali village community, because every activity carried out by the village government was not easy, they did not move alone but together with several other agencies such as the Health Sanitarian Health and Promotion Section. This is in accordance with the results of an in-dpth interview with the Carawali village head.

The results of this effort succeeded in getting a lot of community responses in Carwali village to stop smoking.

"....I speak from a health point of view, e... loved by the children, don't let the children get stunted, get cancer or so on, that's what my answer is, sir. It's clear what we call it, don't be angry. We have to be able to restrain our emotions, control our emotions, that's it sir.. The response was because it was proven that many people quit smoking" (3rdInformant)

According to 3rdInformant said, he Speak from a view of,health point, they must love their children, don't let the children get stunted, get cancer or so on, He said It's clear for him, to do not be angry.He and the others have to be able to restrain their emotions, control their emotions. The result of this hard working is the bugis community response has been proven that many people stop smoking.

So the Bugis community in Carawali village is able to fully implement the Tobacco Control Law. However, this good implementation has changed and cannot be followed up due to the Covid-19 Pandemic. Currently, after the decline in the Covid-19 rate, the village government is working hard to follow up and restart the implementation of the Non Smoking Area law in the Carawali village, Sidrap Regency.

c) Community Habits of the Bugis Ethnic regarding the Implementation of Tobacco Control

A person's smoking habit is influenced by many factors, both internal, such as biological and psychological factors, and external, such as the social environment, traditions and habit. One of the culture and habits that have been attached from the past until now to the Bugis tribe in weddings is the existence of a series of "Mapacci" activities.

Mapacci is a series of activities that aim to clean everything and purify oneself from all things that are not good, which symbolizes the purity of the heart of the bride and groom facing the wedding day, especially when entering a household life.

Mapacci procession is carried out the night before the day of the marriage ceremony. The essence of the Mapacci event is giving pacci or henna leaves to the bride and groom. This gift is made by a couple who comes from the closest family, relatives and people who have a good social position as a symbol so that someday sailing the ship of their household is like the people who give pacci leaves. The history of Mapacci appeared and was carried out for the first time by the kings of Bone who would carry out marriages in order to cleanse themselves and release the single period and until now have become customs in the Bugis Ethnic [27].

Mapacci's goal is very noble, namely that the two prospective bride and groom can rid themselves of bad traits so that the household they will live in can be harmonious and full of love [28].

As for the equipment needed in the Mapacci Ritual, the most important are henna leaves or pacci leaves as a symbol to purify oneself, and using candles as a symbol of lighting and devotion, Rice as a symbol of the meaning of growing well, Pillows which are symbols of honor, Sarongs as symbol of Mabbulo Sipepa or unity, Shoots of banana leaves as a symbol of life, Jackfruit leaves as a symbol of hope, Coconut which has a multi-purpose meaning [29].

Usually, after the process of giving pacci leaves to the bride and groom, in ancient times guests were presented with folded betel leaves. However, currently there are other alternatives to cigarettes when there are wedding series events, one of which is "Mappacci" where now people only serve candy and pastries instead of cigarettes, this is in accordance with the statement of an informant in Sidrap Regency:

"...But now I see there has been a shift in that there is almost no more party activities where cigarettes are served, leftover cakes are usually served or drinks such as tea, coffee, when cigarettes are no longer cigarettes, so those who smoke bring their cigarettes with them" (4thInformant)

4thInformant said there was a change, When when the wedding party was held, there is almost no more party serve cigarettes, they change it to usual cakes are served or drinks such as tea, coffee. If there is someone smoking at that time, the smoker bring their own cigarettes. "It's rare for us to find cigarettes served at our events, usually ji cookies" (4thFGD)

4thFGD, they also said it's rare for the people to find cigarettes served at events, usually only serve the cakes.

Based on the results of interviews and observations, it shows that the habits of the Bugis people, in Sidrap Regency, especially at big events, such as marriage, are rarely found people serving cigarettes. However, the Bugis Ethnic community are taking a cheaper alternative, such as providing candy, pastries and drinks as a substitute for cigarettes.

"This custom has existed for a long time. If there is Bugis custom, maybe that's the case, maybe it's different if there are other customs, like certain schools such as Muhammadiyah, like there's no noodle called Mapacci. It's just recitation, but sometimes I also see that there are substitute noodles with sugar noodles, if it's like reciting like that, you still get cigarettes." (2ndInformant)

2ndInformant also said if a culture like that has existed for a long time in Bugis Ethnic. The other ethnic or community maybe have a different culture, like Muhammadiyah community, there are no culture like Mapacci for them. Only reciting the Holy Qur'an, but sometimes the informant said he see that there is a substitute for giving candy or it's like a recitation, so you still have to served the cigarettes.

It's different situation in Carawali village, Sidrap Regency. The Mappacci Culture wedding event or party of the Bugis Ethnic, after giving a blessing to the bride and groom, as a form of appreciation to those who give the blessing, the host usually will present cigarettes. But in this village it has been replaced with a new habit. The culture has been initiation by the village head in Bugis ethnic community. The village government as a respected person will give plant seeds to the bride and groom with the aim of doing good. Meanwhile, those who give blessings to the bride and groom will be presented with something other than cigarettes.

"Furthermore, sir, in this village, if someone wants to get married, they are given 2 plants. So for example, if in Carawali the men are, the Carawali people are also women, meaning I will give 4. We will give 4

plants. With the goal, before marriage he must do good and those who give blessings we give useful gifts ". (3rdInformant)

The 3rdInformant said this village (Carawali Village), if someone wants to get married, they are given 2 plants. So for example, if the man's bride is from Carawali village, the woman's bride also from Carawali village so the villahead will give 4 seed plants. With this the main purpose is, before marriage they must do good things and those who give blessings we give other useful gifts.

The results of previous studies stated that there is a relationship between smoking behavior and the social environment where smokers admit that they smoke at work, at events/parties and often receive offers to smoke [30-33] Other research also states that research subjects, the active smokers, are influenced by the social environment and social situations that are always supportive of smoking activities where they, active smokers, have a goal of meeting the social needs brought on by smoking [34].

4. Conclusion and Recommendation

The implementation of Non Smoking Area in Bugis Ethnic, in Sidrap Regency, is mostly still obedient not to smoke, not to smoke in formal areas, such as in several offices that have no smoking signs posted, in schools and universities. But on the other hand, there are still many smokers who smoke in Non Smoking Area, especially in public places in informal areas such as parks, public transportation, markets and in parking lots/outside places of worship.

It is considered that the application of sanctions from Local Government Law for Non Smoking Area still needs to be maximized as one of the steps to protect the community and improve health status can be realized. Efforts made by various levels of government, starting from the Village level, Sub-District level to Regency level in implementing the Non Smoking Area rules still need to maximize all resources, increase socialization and more innovative programs so that by creating habits new behavior related to smoking in society is formed.

In the Sidrap Regency, one of the things that has changed is that the Bugis people generally no longer serve cigarettes at Mappacci events, and/or at weddings but replace them with other things such as candy, cakes. or others.

The thing that affects the implementation of Non Smoking Area, that as a whole is that part of the public's awareness is still low to create a Non Smoking Area and the implementation of sanctions is still weak and the public's knowledge about it regarding Non Smoking Area and the dangers of smoking. Therefore, socialization, promotion and

prevention need to be massively increased as an effort to increase public knowledge and awareness regarding the implementation and dangers of smoking from Sidrap Regency Government.

Furthermore, in the Carawali village, Sidrap Regency, which has implement The Tobacco Control Law or Non Smoking Area regulation implementation in the whole village. One of the habbit changes made was in the series of "Mappacci" activities in Carawali village, no longer serving cigarettes but instead giving plant seeds to the bride and groom. However, this good implementation has changed and cannot be followed up due to the Covid-19 Pandemic. At the moment. After the decline in the Covid-19 number, the village government is working hard to follow up and restart the implementation of Non Smoking Area in Carawali village.

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