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SOUTHEAST ASIA TOBACCO CONTROL ALLIANCE

The Collaborative Funding Program for
Southeast Asia Tobacco Control Research

SMOKING IN GIRLS AND YOUNG WOMEN IN INDONESIA

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Koalisi untuk Indonesia Sehat (KuIS)

Financial support from
The Rockefeller Foundation and
Thai Health Promotion Foundation

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Jakarta, Indonesia

Supported by
Southeast Asia Tobacco Control Alliance (SEATCA)
Under The Collaborative Funding Program for
Tobacco Control Research

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Thai Health Promotion Foundation (ThaiHealth)

December 2008

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ACKNOWLEDGEMENTS

This research Smoking in Girls and Young Women in Indonesia was supported by the Southeaast Asia Tobacco Control Alliance (SEATCA) with financial support from The Rockefeller Foundation and Thai Health Promotion Foundation (ThaiHealth).

The production of this report was coordinated by Koalisi untuk Indonesia Sehat (KuIS) research team of Sri Manganti Hadi, Ade Yuanita, Laksmita Anggraeni, Agnes, Nendah Awalia, Elva Yesi, Sp, and Arief Hilman Arda, SSos.

KuIS would like to acknowledge the assistance of Dr Foong Kin of Universiti Sains Malaysia (USM) and Ms Menchi G. Velasco of SEATCA who provided the overview, editing, and analysis review of the report. We would also like to thank Dr Widyastuti Soeroyo of the Indonesian Tobacco Control Support Center (ITCSC), the Indonesian Department of Education, the Education Office of DKI Jakarta Province, the Education Office of West Sumatra Province, and the Management of public and private Junior and Senior High Schools as well as the Management of public and private Universities and Colleges in DKI Jakarta and West Sumatra who participated in this research.

EXECUTIVE SUMMARY

This study focuses on the smoking behavior of girls and young women in Indonesia, their awareness of and support for tobacco control policies as well as their exposure to and perception of tobacco advertising, promotion, sponsorship and corporate social responsibility activities by the tobacco industry.

The data were gathered from a survey of 1,018 Junior and 1,012 Senior High school girls and 1,010 female college/university students in Jakarta (urban) and in West Sumatera (rural). The survey was conducted from October through November 2007, and was followed by 29 Focus Group Discussions (FGD) from February to March 2008.

Smoking Perception and Behavior

The study found that 24.3% of girls in the urban and 16.5% of girls in the rural area have ever smoked a cigarette. Of the total respondents, 79.7% were non-smokers and 20.3% have ever smoked a cigarette. Among the non-smokers 0.4% said that they would smoke if their best friend offered them a cigarette. About 0.7% of the female respondents reported that they would smoke a cigarette next year. Most girls have a negative opinion about female smokers. The majority of respondents also have a very negative opinion about smoking. Girls who smoke tend to have a more positive opinion about smoking. This study found a significant correlation (at the 95% level of confidence) between opinion of smoking and status of being a smoker or non-smoker.

Perception and Exposure of Girls to Anti-smoking Messages

Most of the girls said that they have notice anti-smoking messages on television (81.1% in the urban area and 97.6% in the rural area) as well as on posters (63.8% in the urban area and 58.2% in rural area). They believed that anti-smoking messages alone would not necessarily influence their intention to smoke. Moreover, only 23.7% of respondents in the rural area and 26.7% respondents in the urban areas said that printing pictorial health warnings would be “very effective”. The majority of respondents (85.6%) said that the government should implement pictorial health warnings on cigarette packs.

Exposure to Tobacco Advertising, Promotion and Sponsorship

Girls were likely to be exposed to tobacco products advertisements on television (92.9%) and posters (70.6%). They said that cigarette advertisements and promotions are more creative than other product advertisements. This study also revealed that 10.2% of girls aged 13-15 and 14.5% of girls aged 16-19 were being offered free sample of cigarettes.

Support for Tobacco Control Policies

The girls’ awareness of tobacco control policy and regulation was very low. Urban respondents were much more likely to have knowledge on tobacco control policy than rural respondents. Around 40% of respondents thought that the government’s effort in enforcing the ban of tobacco advertising, promotion and sponsorship in the country was ineffective. Currently, there is no ban on tobacco advertising in Indonesia except for a few restrictions such as ad ban on TV from 0.500-

21.30 hours and the prohibition of free sample of cigarettes or gifts that carry cigarette brand names. However, violations of these 2 regulations were observed. Meanwhile, only 39% of respondents in the rural area and 34.5% of respondents in the urban area stated that they strongly support the banning of sponsorship of sports and cultural activities by the tobacco industry. Most respondents were of the opinion that sporting or music events that were organized or sponsored by the tobacco companies were usually more attractive

Perception of Tobacco Industry's Youth Smoking Prevention (YSP) Program and Corporate Social Responsibility (CSR)

Most girls in the urban (89%) and rural areas (88%) said they would support the tobacco industry's philanthropic activities. However, 53.0% of girls in the rural and 44.3% in the urban areas did not know about the contribution of tobacco industry to the national economy. Furthermore, many respondents did not have any opinion about the effectiveness of the youth smoking prevention (YSP) program.

The results of this research provide evidence that strongly points to a need for the Government of Indonesia to legislate a total ban of all forms of tobacco promotion to protect young people from the danger of the influence of tobacco advertisement and promotion. In addition, the government should also impose the inclusion of graphic health warnings on cigarette packs to educate smokers, particularly the illiterate and young children who may not yet fully understand the danger of the diseases caused by smoking as described in the text warnings. Furthermore, the tax on all tobacco products should be increased to make them unaffordable to the youth.

ABSTRACT

A study of young women in Indonesia on tobacco indicates that 24.3% girls in the urban and 16.5% girls in the rural areas have ever smoked a cigarette. Most respondents either living in the urban or the rural areas were excessively exposed to tobacco/cigarette advertisements through various media, especially television and posters. The girls' awareness on tobacco control policy and regulation is very low. Urban respondents are much more likely to have knowledge on tobacco control policy compared to rural respondents.

Perception about the impact of health warnings (text or pictorial) in cigarette pack is uncertain. Although they seemed to know about the risks of smoking through the health warning, it would not necessarily influence their intention to smoke. Apart from their view about its effectiveness, the majority of respondents said that the government should implement pictorial health warnings on cigarette packs. These polarized perceptions point to the challenges faced by policymakers who attempt to implement tobacco control policies.

Objective: to examine the smoking behavior of girls and young women, their awareness of and support for tobacco control policies as well as their exposure to and perception of tobacco advertising, promotion, sponsorship and tobacco industry's youth smoking prevention program and corporate social responsibility activities.

Design: A cross-sectional survey of secondary school girls and female college/university students was conducted from October 2007 to March 2008.

Participants: 3,040 respondents completed the survey form and 174 girls participated in FGDs.

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BACKGROUND

Smoking prevalence among young women is increasing rapidly globally whereas for men it is in decline. Although current overall prevalence is about 4 times higher among men than women globally (48% versus 12%), this situation is quickly changing. Recent studies show that young girls are smoking in most countries nearly as much as young boys, and in some cases, their prevalence is already higher.

Between 1950 and 2000, about 10 million women died from tobacco use and the figure is expected to double in the next 30 years. According to Mackay and Amos, "the epidemic (of tobacco use) among women will not reach its peak until well into the 21st century. This will have enormous consequences not only for women's health and economic wellbeing but also for that of their families".

Increase in smoking among young women has been reported in ASEAN countries. In Thailand, smoking prevalence among female youth (15-24 years) has increased in recent years. The upward trend was first seen in a 1997 study which showed that almost 5% of female high school and vocational students were smokers, which was twice that of the national smoking rate for women. This increase might be related to the increased prominence of foreign brands, because nearly 70% of these young women preferred Marlboro.

Smoking among young adolescents in ASEAN countries is also an important concern. Findings from the Global Youth Tobacco Survey revealed the substantial difference in smoking prevalence among girls aged 13 to 15 years among countries in ASEAN. Malaysia, the Philippines and Singapore ranked the highest with a prevalence of 11.2%, 8.8% and 8.8%, respectively. Thailand and Myanmar reported a smoking prevalence of about 5%. Among the lowest reported prevalence were those in Indonesia (2.3%), Vietnam (1.9%), and Cambodia and Lao PDR with less than 1% prevalence.

Recent studies on smoking and women in selected ASEAN countries have identified smoking prevalence among young women (mainly college/university students) and the social, psychological and environmental factors associated with smoking[4]. The current study proposes to examine the smoking behavior of girls and young women, their awareness of and support for tobacco control policies as well as their exposure to and perception of tobacco advertising, promotion, sponsorship and the tobacco industry's youth smoking prevention program and corporate social responsibility activities. Findings from this study will contribute to the development of tobacco control policies that are gender-sensitive.

Smoking Among Youth and Girls in Indonesia

Smoking Prevalence by Age-Group and Gender

According to the National Socio-Economic Survey 1995 and 2001, there was an increase in smoking prevalence among all age groups in Indonesia between 1995 and 2001. The highest increase occurred among 20-24 year-olds (17.5 percentage points), 25-29 year-olds (12.7 percentage points), and 15-19 year-olds (10.5 percentage points).

Table 1. Smoking prevalence by age groups of 10 years or older according to gender 1995 and 2001[1]

Age Group	1995			2001		
	Males	Females	Average	Males	Females	Average
10-14	0.5	0.1	0.3	0.7	0.0	0.4
15-19	13.7	0.3	7.1	24.2	0.2	12.7
20-24	42.6	1.0	20.3	60.1	0.6	28.8
25-29	57.3	1.1	27.4	69.9	0.6	33.7

Indonesia currently consists of 33 provinces, 7 of which have been created since 2000 and 4 provinces have received special status. According to the National Socio-Economic Survey 1995 and 2001, female smoking prevalence is highest in Irian Jaya (3.7%), followed by Central Sulawesi (3.0%), West Kalimantan (2.9%), East Kalimantan (2.6%) and West Sumatra (2.5%). Meanwhile, in DKI Jakarta, the female smoking prevalence is 1.5%. The data shows that while smoking prevalence in Jakarta decreased from 1.8% in 1995 to 1.5% in 2001, the smoking prevalence in West Sumatra increased from 1.5% in 1995 to 2.5% in 2001. An increase is also seen in the provinces of West Java, Central Java, Bali, West Kalimantan, East Kalimantan, Central Sulawesi, South East Sulawesi, and Irian Jaya (West Papua)

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Table 2. Adult smoking prevalence by province and sex, 1995 and 2001[2]

PROVINCE	1995			2001		
	Male	Female	Average	Male	Female	Average
Aceh	52,80%	2,20%	26,90%			
North Sumatra	59,80%	2,50%	28,70%	59,70%	1,70%	30,30%
West Sumatra	54,20%	1,50%	27,60%	67,10%	2,50%	33,33%
Riau	58,60%	3,70%	31,00%	63,30%	2,10%	33,40%
Jambi	57,20%	1,70%	29,20%	57,40%	1,50%	30,10%
South Sumatera	61,30%	1,70%	31,60%	64,80%	1,70%	33,70%
Bengkulu	61,10%	2,40%	32,30%	66,70%	0,60%	34,80%
Lampung	42,60%	1,80%	22,10%	67,40%	1,60%	35,90%
Bangka Belitung				58,50%	1,30%	30,30%
DKI – Jakarta	58,30%	1,80%	29,80%	54,50%	1,50%	27,70%
West Java	52,40%	1,30%	26,10%	68,00%	1,70%	35,00%
Central Java	47,20%	0,50%	23,50%	61,50%	1,00%	30,80%
DI Yogya	55,70%	1,30%	27,20%	53,70%	0,20%	26,30%
East Java	33,10%	0,90%	16,90%	62,40%	0,80%	30,70%
Banten				66,30%	0,80%	33,60%
Bali	61,80%	0,50%	29,20%	45,70%	1,30%	23,30%
West Nusa Tenggara	38,20%	1,00%	18,80%	62,60%	0,40%	29,90%

[1] Processed from National Socio-Economic Survey 1995 and 2001, Aceh and Maluku provinces not included in 2001 due to security reasons

[2] Processed from National Socio-Economic Survey 1995 and 2001, Aceh and Maluku provinces not included in 2001

East Nusa Tenggara	**39,80%**	**0,90%**	**20,10%**	**56,60%**	**0,50%**	**27,60%**
East Timor	**53,90%**	**6,00%**	**30,20%**			
West Kalimantan	**54,70%**	**2,40%**	**28,70%**	**58,60%**	**2,90%**	**31,40%**
Central Kalimantan	**46,30%**	**2,30%**	**23,60%**	**60,20%**	**1,00%**	**31,80%**
South Kalimantan	**42,10%**	**1,90%**	**22,50%**	**57,80%**	**1,20%**	**26,60%**
East Kalimantan	**50,60%**	**0,90%**	**25,60%**	**55,30%**	**2,60%**	**29,20%**
North Sulawesi	**49,30%**	**3,30%**	**26,20%**	**61,20%**	**1,90%**	**31,70%**
Central Sulawesi	**48,70%**	**2,20%**	**23,70%**	**64,60%**	**3,00%**	**34,30%**
South Sulawesi	**51,10%**	**2,40%**	**26,10%**	**58,50%**	**1,20%**	**27,90%**
South East Sulawesi	**40,90%**	**1,00%**	**21,10%**	**58,70%**	**1,70%**	**29,90%**
Gorontalo				**69,00%**	**0,90%**	**35,20%**
Maluku	**41,70%**	**4,30%**	**23,10%**	**NA**	**NA**	**NA**
Irian	**55,00%**	**0,60%**	**27,30%**	**54,60%**	**3,70%**	**29,70%**
Average	**53,40%**	**1,70%**	**26,90%**	**62,20%**	**1,30%**	**31,50%**

In 2002, the National Institute of Health of the Ministry of Health Republic of Indonesia conducted a study on *Trends in Tobacco Use in Indonesia.* The study found that the prevalence of tobacco usage among female aged 15-19 years increased from 0.6% (1986) to 0.7% (1995) and 0.9% (2001). The study also found that the prevalence of tobacco smoking among young girls in Jakarta was high considering that it is traditionally a taboo for women to smoke in Indonesia.

Smoking Behavior

Based on the National Socio-Economic Survey in 2001, 0.35% of smokers 10 years or older started smoking between the ages of 5 to 9 years old. Meanwhile, the 2006 Global Youth Tobacco Survey (GYTS) in Indonesia found that, among youth aged 13-15 years, 37.3% reported that they had ever smoked a cigarette and 30.9% had smoked their first cigarette before the age of 10.

Table 3. Percent of students who had ever smoked cigarettes, percent of students who ever smoked their first cigarette before the age of 10[3]

Age Group 13-15	Ever smoked cigarette, even one or two puffs	Ever smokers who smoked their first cigarette before the age of 10
Total	**37.3 (32.3 - 42.5)**	**30.9 (26.8 - 35.4)**
Boy	**61.3 (52.8 - 69.2)**	**28.5 (25.0 - 32.3)**
Girl	**15.5 (12.0 - 19.8)**	**40.8 (28.7 - 54.3)**

Further, according to the GYTS 2006, among the 12.6% of students aged 13-15 years who were current smokers, 3.2% said that they feel like having a cigarette first thing in the morning. Meanwhile. 75.9% of current smokers reported that they desire to stop smoking and 85.5% tried to stop smoking during the past year.

[3] GYTS Indonesia, 2006

Table 4. Percent of students who were current smokers and percent of current smokers who reported feeling like smoking first thing in the morning[4]

Age Group 13-15	Current cigarette smoker	Current cigarette smokers who feel like having a cigarette first thing in the morning
Total	**12.6 (10.0 -15.7)**	**3.2 (1.5 -6.4)**
Boy	**24.5 (19.0 - 31.10)**	**3.5 (1.6 -7.3)**
Girl	**2.3 (1.7 -3.3)**	**1.6 (0.2 - 11.8)**

Table 5. Percent of current smokers who want to quit smoking, percent of smokers who tied to quit smoking in the past year[5]

Age Group 13-15	Current cigarette smokers who desire to stop smoking	Current smokers who tried to stop smoking during the past year
Total	**75.9 (69.6 - 81.2)**	**85.5 (76.9 - 91.2)**
Boy	**77.1 (69.8 - 83.1)**	**86.9 (77.6 - 92.7)**
Girl	**55.9 (36.0 -74.1)**	*

*<35 cases in the denominator

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Tobacco Control in Indonesia

Indonesia does not have a Tobacco Control Law. It also has not sign the UN Framework Convention on Tobacco Control (FCTC). The current Tobacco Control regulation is the Governmental Regulation No. 19/2003 (PP 19/2003). A PP is a bill that is signed by the president but does not require approval of the parliament. The PP 19/2003 contains aspects related to the size and types of text health warnings, time restrictions for tobacco advertisement in electronic media, provisions of smoke-free environments, and testing of tar and nicotine level. The PP 19/2003 has no Articles on price or tax regulations, regulation on duty-free sales, and tax rate. It also does not have regulation on information of misleading terms such as low tar, light, ultra-light, or mild. Moreover, the PP has no Articles on promotion of smoking cessation, restrictions on sales/distribution to minors, and restrictions on single cigarette sales/minimum package sizes.

Article 17 of the PP reads that the advertisement content must not: encourage or persuade people to smoke; describe or recommend people that smoking is beneficial to health; show cigarette packages; cigarettes or someone smoking; focus or have pictures and/or writings of children, teenagers or pregnant women; display brand that specifically says that the product is a cigarette; or conflict with social norms

According to the PP 19/2003, cigarette advertisements and promotions are allowed in the electronic, printed and outdoor media; this also applies to sponsorship of activities. Advertisements in the electronic media are restricted to a specific time between 21.30 -05.00 hours. The regulation,

[4] GYTS Indonesia 2006
[5] GYTS Indonesia 2006

in fact, is contradictory to the Broadcasting Law that does not restrict cigarette advertisements to a specific time. It only requires that cigarette advertisements must not show the form of a cigarette.

Regarding smoke-free environment, the PP 19/2003 requires that public places, medical facilities, workplace and places specifically used for the venue of teaching process, child activity area, worship place and public transportation be declared as non-smoking areas. It further says that regional governments are obliged to realize the non-smoking areas in their respective regions. Currently, only a few districts in Indonesia have a regulation on smoke-free area. In Jakarta, the capital city, regulation on smoke-free area exist (Governmental Regulation 75/2005) but implementation is poor due to lack of law-enforcement.

OBJECTIVES OF STUDY

1. To determine the extent of smoking and smoking behavior of these respondents.
2. To determine exposure to tobacco advertising, promotion and sponsorship among the respondents
3. To examine the girls' and young women's awareness of smoke-free places, ban on advertising, promotion and sponsorship and health warning on cigarette pack.
4. To examine respondents' support for tobacco control policies.
5. To examine respondents' perception of tobacco industry's youth smoking prevention program and corporate social responsibility activities.

RESEARCH DESIGN AND METHODS

Cross-sectional surveys of secondary school girls and female college/university students were conducted. A combined quantitative and qualitative method was used to investigate the above objectives. The first phase of the study involved cross-sectional sample surveys of female secondary and college students. Data were collected using a self-administered structured questionnaire. This was followed by a more in-depth examination of key findings obtained from the surveys using the focus group discussion method. The objective was to elicit better understanding and interpretation of survey results.

3.1. Sampling Design and Sample Size for Cross-sectional Surveys

The study selected girls in urban and rural secondary schools as well as urban and rural female college students. Young teenage girls aged 13-15 years and older female adolescents 16-19 years of age were sampled for the study. Young female adults aged 19-25 years were sampled among college or university students. The study obtained a total sample of 3,040 female secondary and college/university students in the category of 13-15, 16-19 and the 19-25 year olds. The breakdown in samples according to geographical location and age group is presented below:

	13-15 years old	16-19 years old	20-25 years old
Urban	**501**	**500**	**500**
Rural	**517**	**512**	**510**
Total	**1,018**	**1,012**	**1,010**

Respondents from urban areas were sampled from the urban capital city of Jakarta. The districts of Pariaman and Bukit Tinggi in the province of West Sumatra which typically represent all rural areas within Indonesia were selected for the study.

a. Sampling for School-based Survey.

Since the study focuses on students aged 13-15 and 16-19 years, the country research coordinator identified the grades in the educational system that corresponds to these ages. The survey sample frame was then created from the data base of schools. A list of schools from the urban capital city as well as from the selected rural district/province were drawn up.

The sample was drawn using a 2-stage cluster sampling design. The first sampling stage included simple random selections of predetermined number of schools in both the urban city and rural districts. We selected 12 schools from the urban area (Jakarta) and 10 schools from the rural area (West Sumatera).

For the second stage, in each selected school, one classroom was randomly selected for each grade. All female students in the selected classes were eligible to participate in the survey. A total of 1,001 students from the urban and another 1,029 for the rural category with totaling 2,030 students were sampled.

Sampling for school-based survey in Urban Area

JAKARTA Total respondents (N) = 1,001

Junior High School (13 – 15 years) Selected schools = 12 schools	
Total N = 501	
1. SMP 121	7. SMP 13
	8. SMP Purnama
2. SMP YAPPENDA	9. SMP Budi Waluyo
3. SMP 76	10 SMP 14
4. SMP 118	11. SMP Diponegoro
5. SMP 83	12. SMP 7
6. SMP Sumbangsih	

Senior High School (16 - 19 years) Selected schools = 12 schools	
Total N = 500	
1. SMA 114	7. SMA 70
	8. SMA 6
2. SMA Jaya Jakarta	9. SMA Jaya Wisata 3
3. SMA 27	10 SMA 58
4. SMA Yapermas	11. SMA 48
5. SMA 23	12. SMA Adiluhur
6. SMK Yadika 1	

Sampling for school-based survey in Rural Area

WEST SUMATERA Total respondents (N) = 1,029

Junior High School (13 – 15 years) Selected schools = 10 schools	
Total N = 517	
1. SMP 6 Bukittinggi	7. SMP 4 Pariaman
	8. SMP 2 Pariaman
2. SMP 8 Bukittinggi	9. SMP 1 Pariaman
3. SMP 2 Bukittinggi	10 SMP 3 Pariaman
4. SMP 1 Bukittinggi	
5. SMP 5 Bukittinggi	
6. SMP 3 Bukittinggi	

Senior High School (16 - 19 years) Selected schools = 10 schools	
Total N = 512	
1. SMEA 2 Bukittinggi	7. SMAN 2 Pariaman
	8. SMK 2 Pariaman
2. SMA 1 Bukittinggi	9. SMA 1 Pariaman
3. SMA 2 Bukittinggi	10 SMA 3 Pariaman
4. SMA 3 Bukittinggi	
5. SMA 5 Bukittinggi	
6. SMA 7Bukittinggi	

A total of 1,018 students from the 13-15 years old category and another 1,012 for the 16-19 years old category totaling 2,030 students was sampled.

b. Sampling of Female College/university/vocational Students

The study population was female students in tertiary institutions (ages between 20 – 25 years old). Colleges and universities provided a relatively convenient avenue for recruiting young women for this study. Similarly a two-stage clustered sampling with probability proportional to size was used to select a representative sample. The universities and colleges in the urban capital and the rural area were divided into private and public institutions of higher learning. A listing of all public and private tertiary institutions was developed and used as the sampling frame.

Six public and 5 private institutions were randomly selected. The departments within each institution were divided into 3 categories, i.e., sciences, arts and health-related disciplines. A random selection of one department from each institution was carried out. All female students in the selected departments were eligible to participate in the study.

A total of 1,010 female college/university students were sampled for the study. The sample composition was 500 people from the urban and 510 from the rural areas.

Sampling for survey with female college/university/vocational students in urban area

JAKARTA **Total respondents (N) = 500**	
Public College/University **Selected schools = 3**	
Total N = 250	
1. Universitas Negeri Jakarta (Arts) **2. Akademi Perawat UI (Health)**	**3. Poltekes Hang Jebat (Health)**
Private College/University **Selected schools = 3**	
Total N = 250	
1. Univesitas Mercubuana (Science) **2. ASMI (Science)**	**3 Universitas 17 Agustus (Science)**

Sampling for survey with female college/university/vocational students in rural area

WEST SUMATERA
Total respondents (N) = 510

Public College/University Selected schools = 3	
Total N = 260	
1. STAIN M. Djamil Djambek (Arts) 2. Universitas Negeri Padang (Scinece)	3. Politkenik Kesehatan DepKes (Health)

Private College/University Selected schools = 4	
Total N = 250	
1. Universitas Muhammadyah (Science) 2. Akademi Perawat PEMDA (Health)	3. STAIN Bina Nusantara (Arts) 4 Akademi Kebidanan Bina Nusantara (Health)

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3.2 Qualitative Study Using Focus Group Discussion (FGD) Method

A total of 29 FGDs were conducted as follows:

	13-15 years old	16-19 years old	20-25 years old
Urban (Jakarta)	**4 groups**	**4 groups**	**7 groups**
Rural (West Sumatra)	**4 groups**	**4 groups**	**6 groups**
Total	**8 groups**	**8 groups**	**12 groups**

The number of people participating in the FGD was 174 female students. Each FGD comprised of 6 persons and lasted about 2 hours. On the whole, 12 schools and 9 colleges were involved in the FGD.

The data collection process through FGDs was mainly based on the recording and transcript of participants' statements in response to the questions of the FGD guideline. The FGD guideline consisted of 7 parts (knowledge on tobacco-related policy, attitude towards smoking, exposure to anti-smoking message, exposure to tobacco ads, promotion and sponsorship, support to tobacco-related policy, opinion about policy effectiveness, recommendation) with relevant open questions and probe questions.

3.3 Survey Questions

The survey covered the following issues:

a. Awareness of and support for tobacco control policies and regulations such as smoking restrictions, ban on advertising, promotion and sponsorship, as well as warning labels on cigarette packs.
b. Exposures to tobacco advertising and promotion and anti-smoking activity.
c. Beliefs about the tobacco industry and perception of the tobacco industry's youth smoking prevention program and corporate social responsibility activities.
d. Smoking status and smoking history, including daily consumption, brand used, and age of onset.
e. Demographic characteristics (grade, age, gender, etc.)

A draft questionnaire is in Appendix 1.

3.4. Data Analysis

Survey data collected was processed and analyzed using SPSS. Cross-sectional comparisons of each category of respondent and between urban and rural areas were carried out. Analyses of relationships between awareness, beliefs and smoking status were explored.

b. Qualitative data collected from focus group discussions were coded and analyzed according to emerging themes. Data were reported in the form of narratives or frequency tables.

Quantitative data obtained from the survey of female respondents were analyzed using descriptive statistics. Frequencies, means, and standard deviations were calculated where appropriate for socio-demographic variables (such as gender, age, etc.); knowledge-attitudes-perception about tobacco and tobacco use; smoking behaviors; and environmental factors.

3.5 Research Instrument

The survey questionnaire consists of 68 items about smoking behavior; quitting smoking; exposure to tobacco advertising and promotion; exposure to anti-smoking tobacco campaigns; and knowledge, attitudes and beliefs about smoking, perception of tobacco control policies such as health warnings, smoking ban, ban on advertising, promotion and sponsorship, ban on purchase to minors. Questions were adapted from the International Tobacco Control Survey-Malaysia 2005 and the Global Youth Tobacco Survey (GYTS).

Measures of Smoking Behavior

Smoking status was assessed by asking "Have you ever smoked a cigarette, even just a few puffs?" and "How many cigarettes have you smoked in your life?" Respondent who had smoked at least one cigarette were asked: "Think about the last 30 days. How often did you smoke?" The

following criteria were used to define smoking status: Never Smokers (have never smoked a cigarette); Ever smokers (have tried cigarettes, even just a few puffs) and Current smokers (smoked in the past 30 days).

Age of initiation was measured by asking, "How old were you when you first smoked a whole cigarette?" Cigarette consumption among current smokers was assessed by asking, "During the past week, on the days you smoked, how many cigarettes did you smoke each day?" Current smokers were also asked the reasons for smoking, how often they smoke with friends and in the presence of their parents, their preferred brand, where they usually get their cigarettes, where they usually smoke, and expenditure on cigarettes in the last month.

In addition, current smokers were also asked to report the date of their last quit attempt, their intention to quit, and whether various things have made them think about quitting.

The survey included one measure of susceptibility: "If you are not smoking now, do you think you will smoke a cigarette in the near future?" Perception of the ease of quitting was assessed by asking, "Once someone has started smoking regularly, do you think it would be easy or hard for them to quit?"

Exposure to Advertising and Promotion

Exposure to cigarette advertising was assessed by asking respondents whether they have noticed cigarettes or tobacco products advertised in any of the following places: on posters, in magazines, at shops or stores, in discos/karaoke clubs, in lounges, etc., and on or around street vendors; and how often they have seen advertisements for cigarettes at sports events, fairs, concerts, or community events. Exposure to cigarette promotion was evaluated by two items: "In the last year, has anyone offered you a free sample of cigarettes, other than friends or family?"

Exposure to Anti-smoking Media Campaigns

Exposure to anti-smoking media campaigns was measured by asking respondents, "In the last six months, have you noticed advertisements or information that talk about the dangers of smoking, or encourages quitting, in any of the following places: television, radio, posters, billboards, newspapers or magazines, cinema, shops/stores, or on cigarette packs?" Respondents were also asked if they saw any advertisements from tobacco companies on the dangers of smoking.

Opinion on Tobacco Control Measures

Respondents were asked their opinion on health warning on cigarette packs, ban on tobacco advertising, promotion and sponsorship, ban on smoking scenes in movies and TV programs, ban on display of cigarette packs at point-of-purchase, tobacco industry and their corporate social responsibility activities of tobacco industry and the implementation of tobacco control measures such as smoke-free places.

Opinion on Smoke-free Areas

Respondents were asked their opinion on whether smoking should be allowed at various public

places (hospital, workplace, air-conditioned and non air-conditioned restaurants, public transport, place of worship, college).

Knowledge and Perception of Risks of Smoking

Knowledge and perception of the risks caused by smoking were assessed by asking if smoking causes various diseases, whether light or mild cigarettes are less harmful than regular cigarettes, whether cigarette smoking is harmful to smoker's health, and whether cigarette smoke is dangerous to non-smokers.

Beliefs and Attitudes Toward Smoking

Attitudes toward male and female smoking were measured using a 6 item scale and rated on a 4-point Likert scale ranging from "strongly agree" to "strongly disagree". Beliefs about smoking were assessed using an eight item scale ranging from "strongly agree" to "strongly disagree". Respondents were also asked about their overall opinion of smoking. Peer smoking was measured by asking respondents to indicate how many of their 5 closest friends smoke.

Socio-demographic Characteristics include age, nationality, ethnicity, year of study, field of specialization, mother's level of education, father's level of education, place of residence of parents, older brother smoking, older sister smoking, father smoking and mother smoking.

ETHICAL CONCERNS

Ethical clearance for the study was obtained.

Respondents were informed about the research objectives, methods, the involvement of the respondents and the length of time of involvement, and plan on the use of the research outcomes, including how these will be disseminated. Verbal consent was obtained from the respondent. Respondents were assured about the confidentiality of the information they provided and the presentation of the results of the research would be in the collective form

DISSEMINATION PLAN

Results of the study will be published in a peer-reviewed journal. Findings of the study will be forwarded to policymakers, governmental and non-governmental bodies who are involved in tobacco control efforts. Policy briefs summarizing salient research findings and recommendations will be prepared for presentation to policymakers.

RESULTS

6.1 Demographic Characteristics

Table 6. Distribution of respondents based on area

Area	Frequency
Urban	1501
Rural	1539
Total	3040

The urban area selected for this research was the Province of DKI Jakarta. In the urban area, respondents were selected from 5 districts namely North Jakarta, South Jakarta, Central Jakarta, West Jakarta, and East Jakarta. Meanwhile for the rural area, the research covered the districts of Bukit Tinggi and Pariaman in the province of West Sumatra.

Table 7. Distribution of respondents based on age

Age	Urban		Rural	
	Frequency	Percent	Frequency	Percent
13 – 15 years old	501	33.38	517	33.59
16 – 19 years old	500	33.31	512	33.27
20 – 25 years old	500	33.31	510	33.14
Total	1501	100.00	1539	100.00

Table 7 shows that the number of respondents is fairly evenly divided by age. For the urban area, 33.4% respondents were aged 13-15, and the percentage of respondents aged 16-19 and 20-25 was 33.3% each. In the rural area, 33.6% of the respondents were aged 13-15, while 33.3% the respondents were aged 16-19 and 33.1% of respondents were in the 20-25 year-old age group.

Table 8. Distribution of respondents based on level of education

Education	Urban		Rural	
	Frequency	Percent	Frequency	Percent
1st year at Junior High School	231	15.39	38	2.47
2nd year at Junior High School	270	17.99	225	14.62
3rd year at Junior High School	-	-	250	16.24
1st year at Senior High School	-	-	2	0.13
2nd year at Senior High Senior	369	24.58	316	20.53
3rd year at Senior High School	131	8.73	198	12.87
1st year at University (undergraduate)	-	-	72	4.68
2nd year at University (undergraduate)	202	13.46	163	10.59
3rd year at University (undergraduate)	213	14.19	232	15.07
4th year at University (undergraduate)	83	5.53	39	2.53
Master / Phd student	2	0.13	4	0.26
Total	1501	100.00	1539	100.00

Table 8 illustrates that in the urban area there were no respondents in the 3rd year of Junior High School, 1st year of Senior High School, and 1st year of University. For the rural area, most of the respondents were in their 2nd year of Senior High School.

Table 9. Distribution of respondents based on religion

Religion	Urban		Rural	
	Frequency	Percent	Frequency	Percent
Islam	1246	83.01	1512	98.25
Christianity	233	15.52	23	1.49
Hinduism	2	0.13	2	0.13
Buddhism	7	0.47	-	-
Catholic	13	0.87	2	0.13
Total	1501	100	1539	100

Table 10. Distribution of respondents based on those who have brothers who smoke

Brother who smoke	Urban		Rural	
	Frequency	Percent	Frequency	Percent
I don't have an older brother	509	33.91	482	31.32
Yes	485	32.31	711	46.20
No	471	31.38	281	18.26
I don't know if they smoke	36	2.40	65	4.22
Total	1501	100.00	1539	100.00

Most of respondents in the rural area have an older brother who smoked (46.2%). In the urban area, the number of respondents who have brothers who smoked was slightly higher (32.2%) than the number of respondents whose brothers don't smoke (31.4%) while respondents who don't have an older brother was 33.9%.

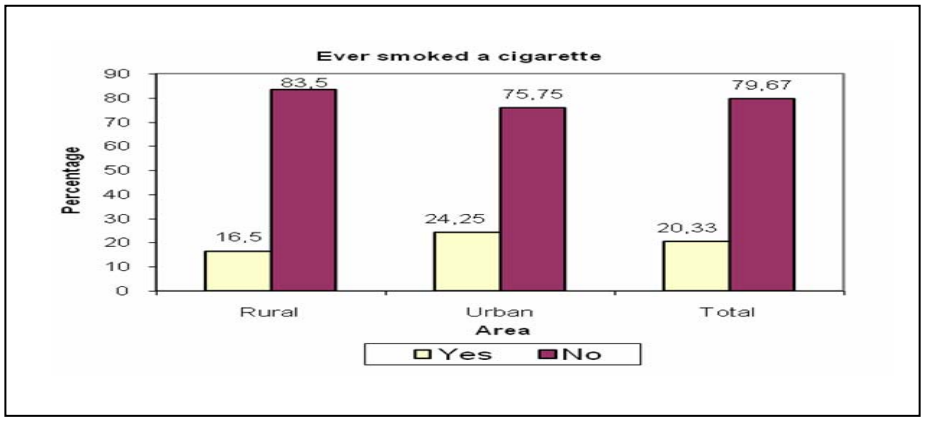
Table 11. Distribution of respondents based on those who have sisters who smoke

Sister who smoke	Urban		Rural	
	Frequency	Percent	Frequency	Percent
I don't have older sister	499	33.24	483	31.38
Yes	99	6.60	46	2.99
No	863	57.50	973	63.22
I don't know if they smoke	40	2.66	37	2.40
Total	1501	100.00	1539	100.00

The majority of the respondents both in the urban (57.5%) and rural (63.2%) areas said that their sisters do not smoke. 33.2% of the respondents in the urban area and 31.38% of the respondents in the rural area do not have an older sister.

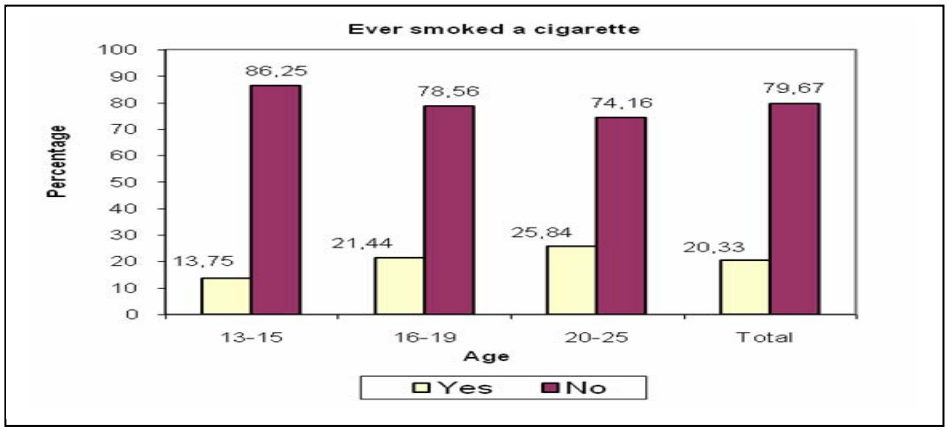
6.2 Smoking Behavior Based on Respondents Who are Current Smokers

According to this research, young girls and women who have ever smoked was more prevalent in the urban area than in the rural area. 24.2% of girls in the urban area and 16.5% of girls in the rural area reported that they have ever smoked a cigarette (Figure 1). There is a statistically significant relationship between area (urban/rural) and status of ever smoked a cigarette. The rate of ever smoking is significantly higher in urban areas compared to that in rural areas ($p<0.05$). Meanwhile, the percentage of girls who have ever smoked a cigarette increases with age. 13.8% of girls aged 13-15, 21.4% of girls aged 16-19, and 25.8% of girls aged 20-25 said that they have smoked a cigarette. The percentage of ever smoking increased significantly with age ($p<0.05$). (Figure 2).



χ^2 = 28.152; d.f.=1;p-value=<0.05

Figure 1. Distribution of respondents who has ever smoked a cigarette by area



χ^2 = 46,910; d.f.=2; p-value= $p<0.05$

Figure 2. Distribution of respondents who has ever smoked cigarette by age

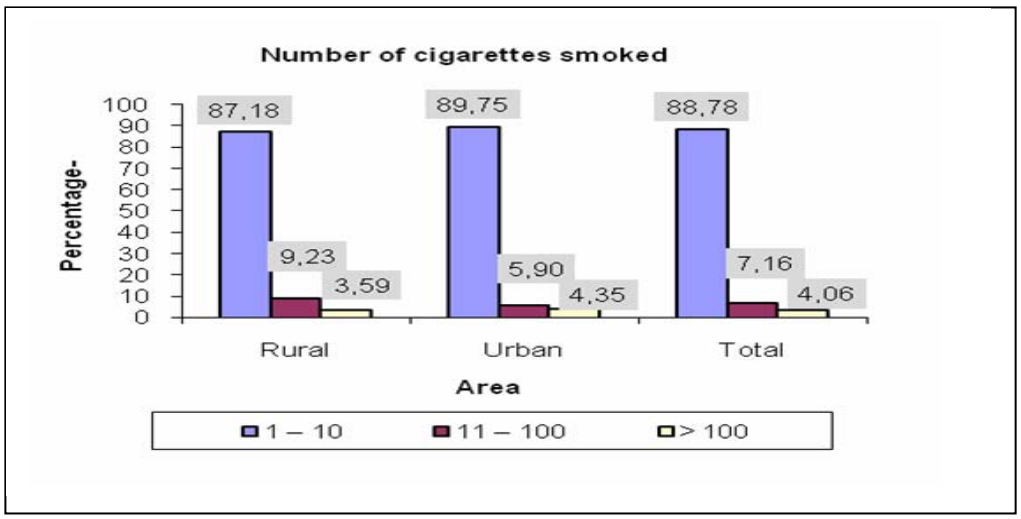


Figure 3. Distribution of the number of cigarettes smoked in life by area

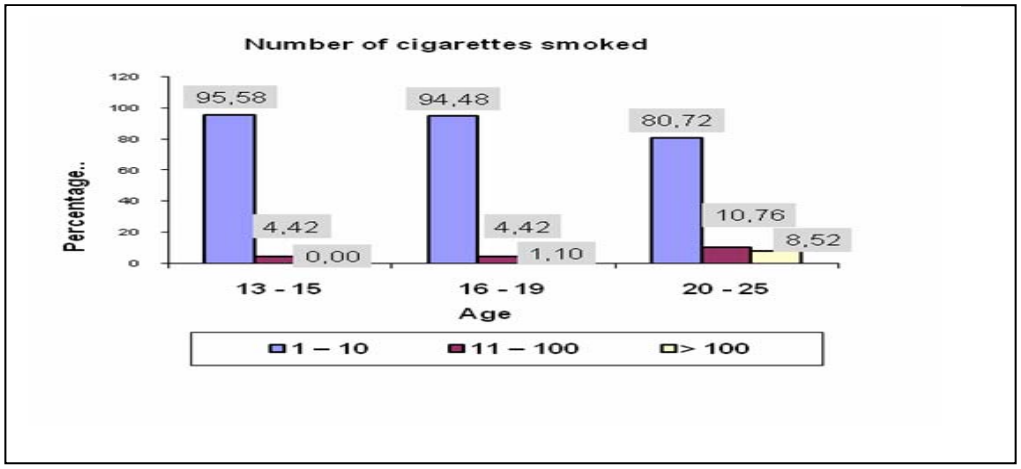


Figure 4. Distribution of the number of cigarettes smoked in life by age

In the rural area, among those who have ever experimented with tobacco, 87.2% said they have smoked 1 to 10 cigarettes in their life, 9.2% have smoked 11 to 100 cigarettes, and 3.6% have smoked more than 100 cigarettes. Whereas in the urban area, 89.7% have smoked 1 to 10 cigarettes, 5.9% have smoked 11 to 100 cigarettes, and 4.3% have smoked more than 100 cigarettes (Figure 3)**.** By age group, the majority of respondents in all age groups reported that they smoked 1-10 cigarettes. Meanwhile, respondents who said they have smoked more than 100 cigarettes in their life were those aged 16-19 (1.1%) and aged 20-25 years (8.5%). (Figure 4).

Table 12. Respondent's age when first tried a cigarette (by area)

Area	n	Age when first tried a cigarette					Total
		< 10	10 - 11	12 - 13	14 – 15	>= 16	
Rural	n	65	20	52	48	47	232
	%	28.02	8.62	22.41	20.69	20.26	100.00
Urban	n	34	21	71	110	107	343
	%	9.91	6.12	20.70	32.07	31.20	100.00
Total	n	99	41	123	158	154	575
	%	17.22	7.13	21.39	27.48	26.78	100.00

Table 13. Age when first tried a cigarette (by age)

Age	n	Age when first tried a cigarette					Total
		<10	10 - 11	12 - 13	14 - 15	>= 16	
13 - 15	n	19	14	52	32	6	123
	%	15.45	11.38	42.28	26.02	4.88	100.00
16 - 19	n	48	16	39	63	44	210
	%	22.86	7.62	18.57	30.00	20.95	100.00
20 - 25	n	32	11	32	63	104	242
	%	13.22	4.55	13.22	26.03	42.98	100.00
Total	n	99	41	123	158	154	575
	%	17.22	7.13	21.39	27.48	26.78	100.00

In the rural area, among girls who have ever smoked a cigarette, those who have tried their first cigarette before the age of 10 recorded the highest percentage (28%). Whereas in the urban area, the largest proportion of girls tried smoking when they were 14 years old (32%). (Table 12) Meanwhile, the research noted that 17.2% of all the girls started to experiment with smoking before the age of 10. However, the greatest proportion of girls tried their first cigarette when they were 14-15 years old (27.5%) (Table 13)**.**

Moreover, the qualitative research found that the average age of respondents who first tried smoking was 13-14 years old - during the time they entered Junior High School. Some of the respondents even tried their first cigarette as early as when they were just in Elementary School. When asked **"Have you ever tried smoking a cigarette? When and how did you first try smoking?"** ***some*** respondents described their experiences as:

- *"When I was in 1st grade Junior High School, but I no longer smoke (Junior High School student in the urban area)*
- *"I first tried smoking a cigarette when I was in 2nd grade Junior High School. A friend challenged me "try it .. try it". For girls, menthol is just right. It's not too heavy. Whereas most men would rather smoke something like Djarum Super." (Junior High School student in the urban area)*
- *"Yes, I tried smoking when I was in Elementary School" (Junior High School student in the rural area)*

- *"I first tried smoking when I was in 2nd grade Junior High because a friend asked me to" (Junior High School student in the rural area)*
- *"I was in 4th grade Elementary School, I saw my grandpa smoking and I got curious to try it myself" (Junior High School student in the rural area)*
- *"I did it when I was in 5th grade Elementary School because I saw my Dad smoking and I wanted to try it too. I did it behind his back. When I tried the cigarette, it first tasted sweet but then I began to cough … so I threw it away" (Junior High School student in the rural area)*
- *"I first tried smoking a cigarette because a friend offered me one. But I've never smoked since" (University student in the urban area)*
- *"Yes, in 1st grade High school. As a fresh High School student, I wanted to have new experiences and so I was easily influenced. I like hanging around with friends, and all my friends happen to be smokers. Being among them and not smoking was not cool. I also happened to have a problem at that time and when I smoked I felt relieved. My problems seemed to have been lifted." (University student in the urban area)*
- *"In 2nd grade High school. When I hung around with the others, they always provoked me to smoke. And if there's someone who didn't want to smoke … uh, you're pathetic! .. That's why I followed the others who smoked .. just for fun .. but not too often" (University student in the urban area)*
- *"Yes, when I was little. I saw my father smoking. I was curious to find out how it was. My father told me that it's not good for a girl to smoke and told me to try it … if you don't believe me, just try it … try … so you will learn your lesson. He deliberately wanted me to try so that I would eventually decide not to smoke … especially because I began to cough after I smoked." (Junior High School student in the urban area)*
- *"I tried a cigarette that a friend gave me when I was in 5th grade Elementary School. When I tried it ... it was terrible ... it tasted bitter ... and I felt short-winded." (Junior High School student in the urban area)*

The study noted a slight difference between girls in the urban and girls in the rural areas about the factors that have influenced them to smoke. In the urban area, girls tend to experiment with smoking at the age of 13-14 years old (1st-2nd grade Junior High School). Their most dominant factor for smoking is social bonding and exposure to peers who smoke. Meanwhile, in the rural area, girls tend to experiment with tobacco at a younger age, namely at the age of 9-10 years old (5th-6th grade Elementary School) mainly as an effect of parental smoking, especially the father or grandfather who smoke.

According to this study 7% of young females in Indonesia are current smokers. This conclusion is based on the number of respondents who reported that they have smoked in the past 30 days before the study was conducted. The percentage of current smokers increased with age (4.5% respondents aged 13-15, 5.9% respondents aged 16-19, and 11.1% respondents aged 20-25) (Table 13).

Table 14. Smoking status (by age)

Smoking Status	n	Age			Total	
		13 - 15	16 - 19	20 – 25		
Non-smoker	n	972	952	898	2822	93%
	%	95.5	94.1	88.9	93.0	
Current smoker	n	46	60	112	218	7%
	%	4.5	5.9	11.1	7.0	
Total	n	1018	1012	1010	3040	
	%	100.0	100.0	100.0	100.0	

χ^2 =80,519; d.f.=8 ;p-value=<0.05

Table 15. Number of days of smoking cigarettes during the past 30 days (by area)

Area	n	Number of days smoking cigarettes during past 30 days				Total
		1 or 2	Some days	Almost every day	Every day	
Rural	n	27	5	3	1	36
	%	75.00	13.89	8.33	2.78	100.00
Urban	n	106	37	19	20	182
	%	58.24	20.33	10.44	10.99	100.00
Total	n	133	42	22	21	218
	%	61.01	19.27	10.09	9.63	100.00

Table 16. Number of days of smoking cigarettes during the past 30 days (by age)

Age	N	Number of days smoking cigarettes during past 30 days				Total
		1 or 2	Some days	Almost every day	Every day	
13 - 15	N	42	4	0	0	46
	%	91.30	8.70	0.00	0.00	100.00
16 - 19	N	40	15	5	0	60
	%	66.67	25.00	8.33	0.00	100.00
20 - 25	N	51	23	17	21	112
	%	45.54	20.54	15.18	18.75	100.00
Total	N	133	42	22	21	218
	%	61.01	19.27	10.09	9.63	100.00

Among the girls who have smoked during the past 30 days, most have smoked 1 or 2 days (61%) (Table 15). Meanwhile, by age group, the majority of the respondents aged 13-15 said that they have smoked 1 or 2 days (91.3%). None of them smoked almost every day or every day. The frequency of smoking increased with age. As many as 8.3% of the respondents aged 16-19 smoked almost every day and none of them smoked every day. Meanwhile, 15.2% of the respondents aged

20-25 reported that they smoked almost every day and 18.75% said they smoked every day.(Table 16).

Table 17. Number of cigarettes smoked per day in the last 7 days (by age)

Age	n	Number of cigarettes smoked in last 7 days				Total
		less than 5	6 - 10	11- 20	> 20	
13 - 15	n	46	0	0	0	46
	%	100.00	0.00	0.00	0.00	100
16 - 19	n	54	4	2	0	60
	%	90.00	6.67	3.33	0.00	100
20 – 25	n	87	15	5	5	112
	%	77.68	13.39	4.46	4.46	100
Total	n	187	19	7	5	218
	%	85.78	8.72	3.21	2.29	100

The majority of respondents (85.8%) reported that they have smoked 5 or less cigarettes each day in the past week. All girls aged 13-15 have smoked less than 5 cigarettes per day in the past one week. The older the age, the more the number of cigarettes smoked. Among those aged 16-19, 6.7% said they have smoked 6-10 cigarettes and 3.3% have smoked 11-20 cigarettes. Meanwhile, as many as 13.4% of those in the 20-25 age group reported that they have smoked 6-10 cigarettes, 4.5% have smoked 11-20 sticks, and another 4.5% have smoked more than 20 cigarettes (Table 17) .

Table 18. Reasons for smoking (by age)

Age	n	Reasons for smoking					Total
		To release tension/stress	To do what the guys can do	To be accepted by group	To relax	Groups norm	
13 - 15	n	31	6	0	8	1	46
	%	67.39	13.04	0.00	17.39	2.17	100
16 - 19	n	40	11	0	8	1	60
	%	66.67	18.33	0.00	13.33	1.67	100
20 - 25	n	48	11	2	48	3	112
	%	42.86	9.82	1.79	42.86	2.68	100
Total	n	119	28	2	64	5	218
	%	54.59	12.84	0.92	29.36	2.29	100

The survey suggests that among current smokers, the reason for smoking was mainly associated with emotional distress. Smoking was identified as the respondents' coping mechanism when facing difficult life events. As many as 54.6% of the respondents said that they smoke to release tension/stress. Those respondents aged 20-25 years said another strong reason why they smoke was for relaxation (42.9%) (Table 18).

Table 19. Frequency of smoking with friends (by age)

Age	n	Smoking with friends			Total
		Never	Sometimes	Often	
13 - 15	n	7	39	0	46
	%	15.22	84.78	0.00	100
16 - 19	n	9	42	9	60
	%	15.00	70.00	15.00	100
20 - 25	n	18	56	38	112
	%	16.07	50.00	33.93	100
Total	n	34	137	47	218
	%	15.60	62.84	21.56	100

Although social bonding and peer influence was identified as one of the strongest factors influencing smoking, most respondents who were current smokers said that they smoke with their friends only occasionally (62.8%) However, the older the respondents, the higher the proportion of respondents who said they often smoke with friends. While no one from the 13-15 year-old group reported that they often smoked with their friends, 15% respondents aged 16-19 and 33.9% respondents aged 20-25 said that they often do so with their friends (Table 19).

Table 20. Frequency of smoking with parents (by age)

Age	n	Smoking with parents			Total
		Never	Sometimes	Often	
13 - 15	n	42	3	1	46
	%	91.30%	6.52%	2.17%	100
16 - 19	n	57	3	0	60
	%	95.00%	5.00%	0.00%	100
20 - 25	n	95	13	4	112
	%	84.82%	11.61%	3.57%	100
Total	n	194	19	5	218
	%	88.99%	8.72%	2.29%	100

Among current smokers, the majority of respondents (89%) said that they never smoke with their parents. Interestingly, among girls aged 13-15 years, 6.5% reported that they sometimes smoke with their parents, and 2.2% even said that they often smoke with their parents (Table 20).

Table 21. Brand of cigarettes usually smoked by respondent (by area)

Area	n	Brand of cigarettes usually smoked			Total
		Specific brand	No usual brand	Hand rolled cigarettes	
Rural	n	15	21	0	36
	%	41.67	58.33	0.00	100.00
Urban	n	119	56	7	182
	%	65.38	30.77	3.85	100.00
Total	n	134	77	7	218
	%	61.47	35.32	3.21	100.00

Table 22. Brand of cigarettes usually smoked by respondents (by age)

Age	n	Brand of cigarettes usually smoked			Total
		Specific brand	No usual brand	Hand rolled cigarettes	
13-15	n	26	18	2	46
	%	56.52	39.13	4.35	100.00
16-19	n	34	24	2	60
	%	56.67	40.00	3.33	100.00
20-25	n	74	35	3	112
	%	66.07	31.25	2.68	100.00
Total	n	134	77	7	218
	%	61.47	35.32	3.21	100.00

The survey found that in the rural area, most respondents do not have a specific cigarette brand preference (58.3%). Meanwhile, the majority of the respondents in the urban area smoke a specific brand (65.4%). According to this survey, only respondents in the urban area reported that they smoke hand-rolled cigarettes (3.8%) (Table 21). However, the percentage of girls who smoke a specific brand was above 50% in all age groups. The survey also suggests that preference for specific brands increases with age. (56.5% for respondents aged 13-15, 56.7% for respondents aged 16-19, and 66.1% for respondents aged 20-25) (Table 22).

Table 23. Cigarette brands smoked

Cigarette Brand	Total	Percentage
Sampoerna Mild	74	55.22
Gudang Garam Filter	4	2.99
Marlboro Menthol	5	3.73
Kansas	3	2.24
Gudang Garam Surya Professional	1	0.75
Djarum Super	7	5.22
Star Mild	15	11.19
Marlboro	6	4.48
Sampoerna Mild Menthol	4	2.99
LA Light	2	1.49
LA Light Menthol	2	1.49
Esse	6	4.48
Marlboro Light	3	2.24
Dunhill	1	0.75
Lucky Strike Menthol	1	0.75

Djie Sam Soe	**5**	**3.73**
Class Mild	**1**	**0.75**
Country	**1**	**0.75**
Star Mild Menthol	**1**	**0.75**
Raison	**1**	**0.75**

Among the girls who said they smoke a specific brand, Sampoerna Mild (55.2%) and Star Mild (11.2%) were the most popular brands. Each of the other specific brands was consumed by less than 6% of the respondents (Table 23).

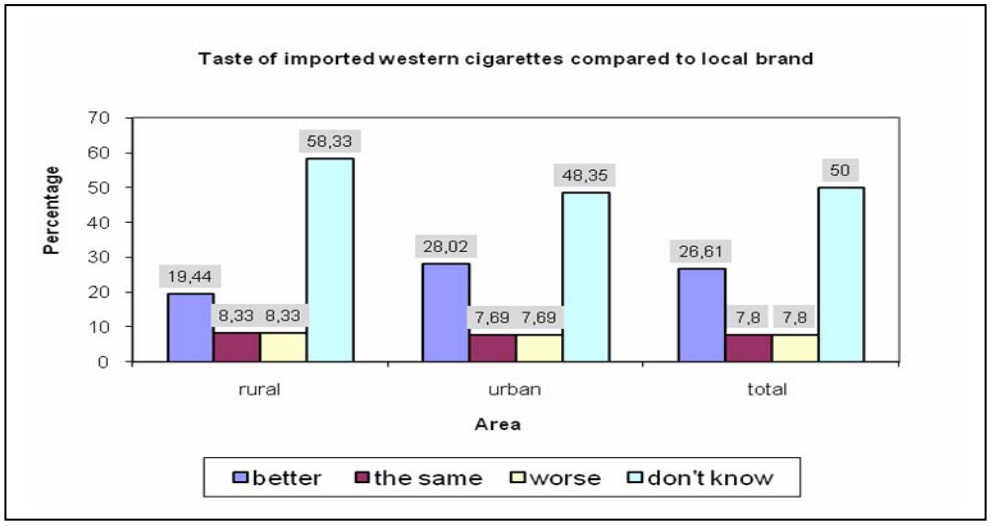


Figure 5. Distribution of respondent's opinion on taste of imported western cigarettes compared to local brand by area

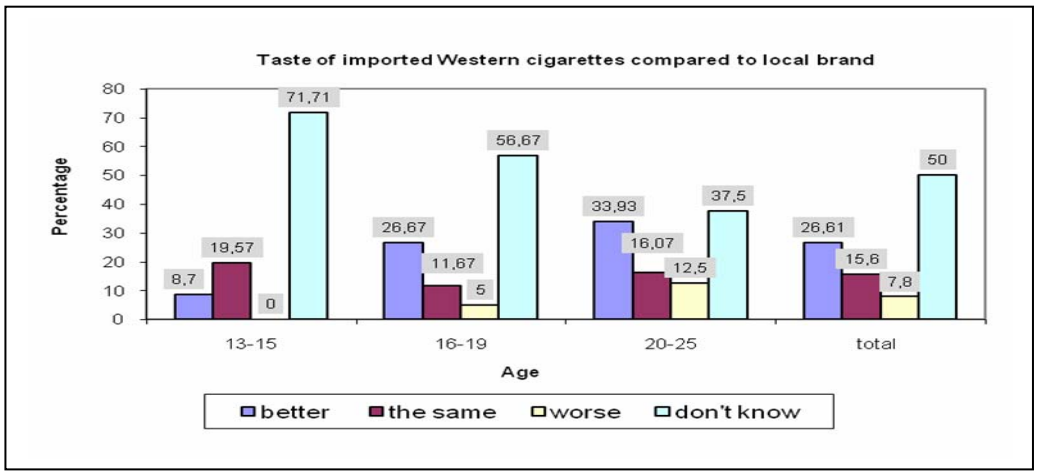


Figure 6. Distribution of respondent's opinion on taste of imported western cigarettes compared to local brand by age

When asked to compare the taste of imported Western cigarettes to local brands, in general, current smokers said that they do not know the difference (58.3% of rural respondents, 48.4% of urban

respondents). By age group, the majority of smokers aged 13-15 said that they do not know (71.7%). Although most of those in the older age group also claimed that they do not know the difference, the percentage of smokers who said that imported brands taste better than local brands increased. The percentage of smokers who said that imported Western cigarettes taste better was 8.7% in group aged 13-15, 26.7% in the 16-19 age group and 33.9% in group aged 20-25 (Figure 5 and 6).

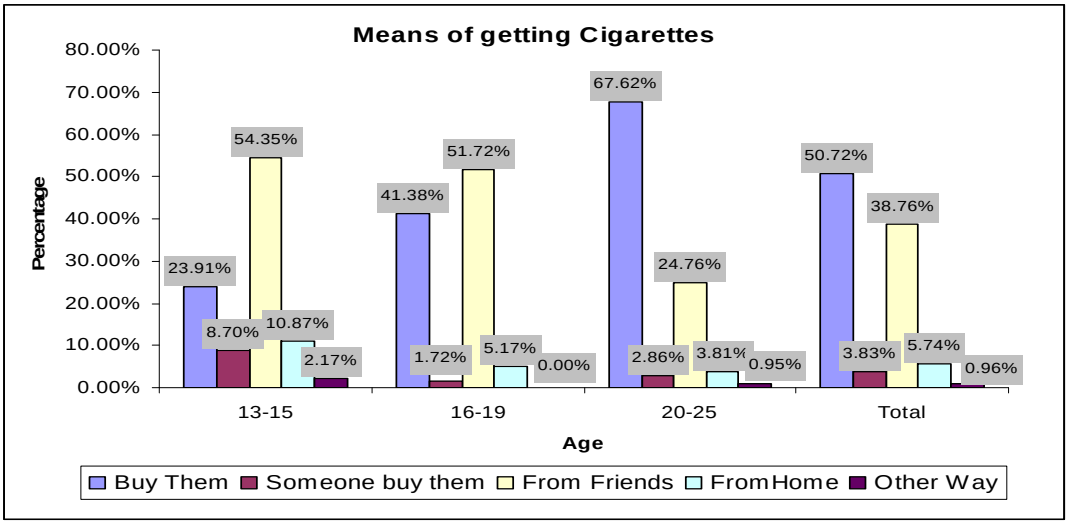


Figure 7. Distribution of means of getting a cigarette

Among current smokers, as many as 50.7% respondents said that they buy their own cigarettes. The majority of respondents aged 13-15 (54.4%) reported that they get cigarettes from friends. However, there were as many as 23.9% of respondents who said that they buy their own cigarettes while 10.9% said they get their cigarettes from home (Figure 7)

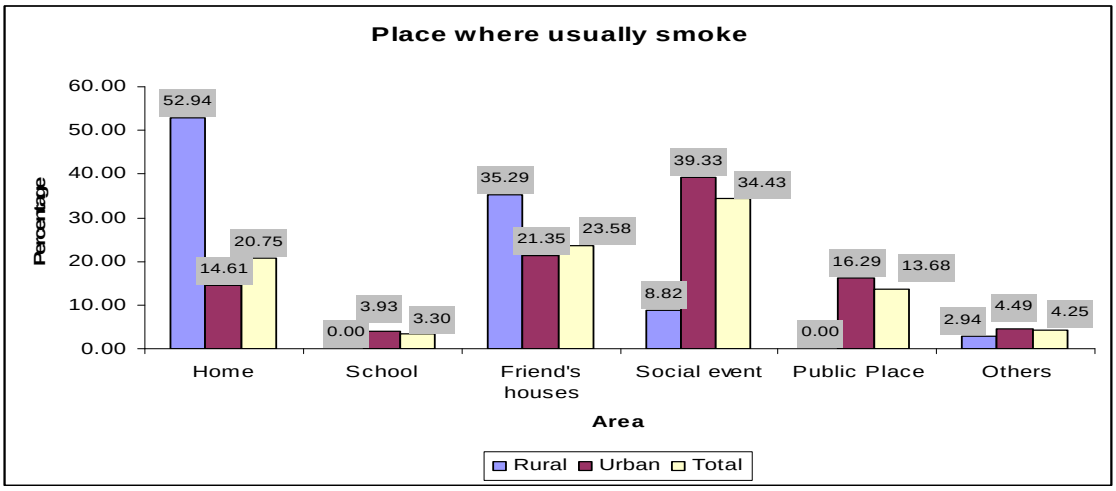


Figure 8. Distribution of place where usually smoke (by area)

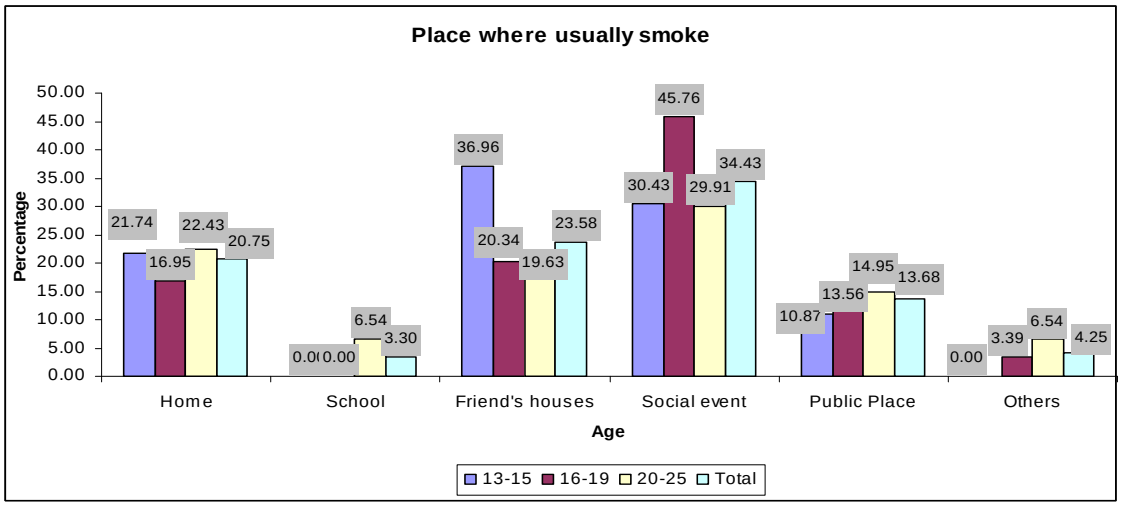


Figure 9. Distribution of degree of accessibility to cigarettes

The survey noted a difference in the trend between girls in the rural area and those in the urban area in terms of the places where they smoke. Respondents in the rural area usually smoke in private locations such as their homes (52.9%) or their friends' houses (35.3%). Meanwhile, the greatest proportion of respondents in the urban area said they smoke during social events (39.3%). This was followed by those who smoke at their friend's house (21.4%), and in public places, (16.3%) (Figure 8)**.** Meanwhile, by age groups, most of the respondents aged 13-15 said that they smoke at their friend's house (37%) followed by those who said they smoke during social events (30.4%). Among respondents aged 16-19, the proportion of those who smoke in social events (45.8%) was considerably higher than the proportion of those who said they smoke in other places such as at friend's house (20.3%), at home (16.95%), and in public places (13.6%).. Meanwhile, among respondents aged 20-25, the greatest proportion of girls smoke at social events (29.9%), followed by those who smoke at home (22.4%) (Figure 9).

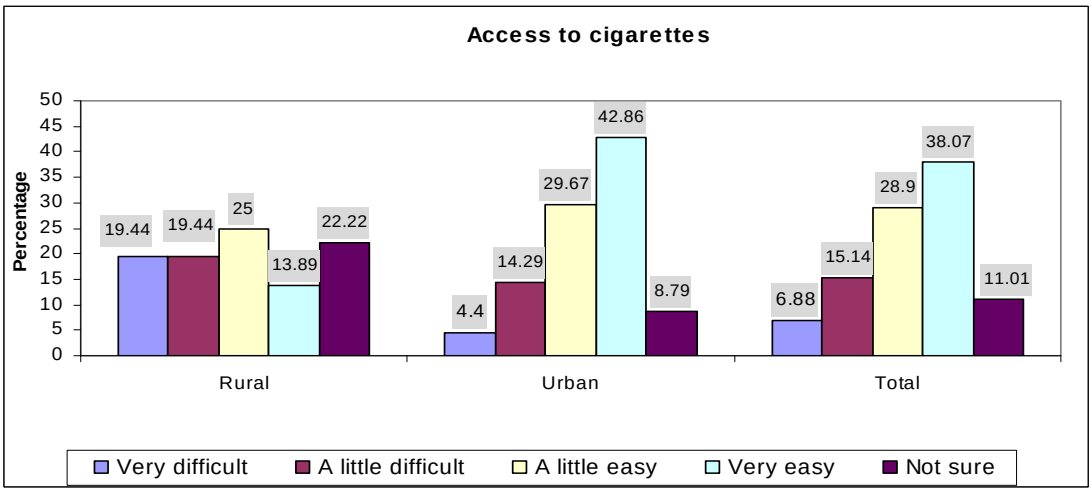


Figure 10. Distribution of degree of accessibility to cigarettes

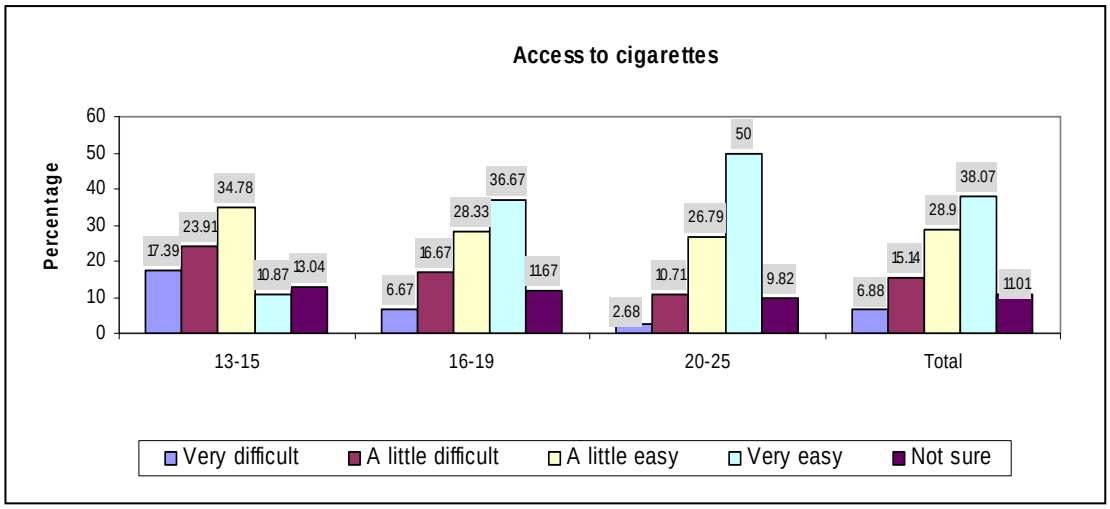


Figure 11. Distribution of degree of accessibility to cigarettes

By area, girls in the urban area were more likely to have easier access to cigarettes than girls in the rural area. About 42.9% of girls in the urban area stated that it was very easy to get cigarettes and 29.7% said that it was a little easy. The percentage of those who reported that it was a little difficult was 14.3% and only 4.4% reported that it was very difficult. In the rural area, the proportion of girls who said that it was very difficult and those who stated that it was a little difficult to get cigarettes was equal (19.4%). The greatest proportion of girls reported that it was a little easy (25%). Meanwhile, 13.9% said that it was very easy to get cigarettes. However, there were quite a number who were unsure whether it was difficult or easy (22.2%) (Figure 10). By age group, the older the group, the higher the proportion of respondents who said that it was very easy to get cigarettes. Interestingly, 34.8% of respondents aged 13-15 reported that it was "a little easy" for them to get cigarettes. This percentage is higher than the percentage of those who said that it was "very difficult" (17.4%) and "a little difficult" (23.9%) (Figure 11).

Table 24. Intention to quit smoking (by age)

Age	n	Intention to quit smoking				Total
		In next 30 days	Sometime in next 6 months	Beyond next 6 months	Do not plan to quit at all	
13 - 15	n	18	11	14	3	46
	%	39.13%	23.91%	30.43%	6.52%	100
16 - 19	n	30	5	14	11	60
	%	50.00%	8.33%	23.33%	18.33%	100
20 - 25	n	37	8	46	21	112
	%	33.04%	7.14%	41.07%	18.75%	100
Total	n	85	24	74	35	218
	%	38.99%	11.01%	33.94%	16.06%	100

The survey suggested that the largest proportion of current smokers (39%) intent to stop smoking in the next 30 days. However, there were as many as 6.5% respondents aged 13-15, 18.3% of respondents aged 16-19, and 18.8% of respondents aged 20-25 who do not plan to quit smoking at all. (Table 24).

6.3 Smoking Behavior Based on All Respondents

Table 25. Likeliness to smoke a cigarette if offered by a friend (by area)

Area	N	Smoking a cigarette if offered by friend				Total
		Definitely not	Probably not	Probably yes	Definitely yes	
Rural	N	1367	156	14	2	1539
	%	88.82	10.14	0.91	0.13	100
Urban	N	1138	262	78	23	1501
	%	75.82	17.46	5.2	1.53	100
Total	N	2505	418	92	25	3040
	%	82.4	13.75	3.03	0.82	100

By area, the percentage of respondents who said that they would probably smoke was higher among respondents in the urban area (5.2%) than among respondents in the rural area 0.9%. Likewise, the percentage of respondents who said that they definitely would smoke was also higher among respondents in the urban area (1.5%) than among respondents in the rural area (0.1%) (Table 25).

Table 26. Likeliness to smoke a cigarette if offered by a friend (by ever/never smoker)

Ever smoked	n	Smoking a cigarette if offered by friends				Total
		Definitely not	Probably not	Probably yes	Definitely yes	
Yes	n	356	154	84	24.00	618
	%	57.61	24.92	13.59	3.88	100.00
No	n	2149	264	8	1	2422
	%	88.73	10.90	0.33	0.04	100.00
Total	n	2505	418	92	25	3040
	%	82.40	13.75	3.03	0.82	100.00

On the respondent's likeliness to smoke a cigarette if offered by friends, 0.3% respondents who have never smoked said that they probably would and less than 0.1% of these respondents answered that they definitely would smoke it (Table 26).

Table 27. Respondent's likeliness to smoke a cigarette if offered by a friend (by age)

Age	n	Smoking a cigarette if offered by friend				Total
		Definitely not	Probably not	Probably yes	Definitely yes	
13-15	n	877	126	13	2	1018
	%	86.15	12.38	1.28	0.2	100
16-19	n	810	166	32	4	1012
	%	80.04	16.4	3.16	0.4	100
20-25	n	818	126	47	19	1010
	%	80.99	12.48	4.65	1.88	100
Total	n	2505	418	92	25	3040
	%	82.4	13.75	3.03	0.82	100

Peer influence appeared to be a strong factor to try smoking among the girls who have ever smoked. By age group, the percentage of respondents who said that they probably would smoke and the percentage of those who answered they definitely would smoke if given a cigarette increased with age. About 1.3% of respondents aged 13-15, 3.2% of respondents aged 16-19, and 4.6% of respondents aged 20-25 said that they probably would smoke when offered a cigarette. Meanwhile, 0.2% of respondents aged 13-15, 0.4% of respondents aged 16-19, and 1.9% of respondents aged 20-25 answered that they would definitely smoke (Table 27).

Table 28. Likeliness to smoke if friend offers a cigarette (among non-smoker)

Age	n	Smoke if friend offers a cigarette				Total
		Definitely not	Probably not	Probably yes	Definitely yes	
13 - 15	n	792	84	2	0	878
	%	90.21	9.57	0.23	0.00	100
16 - 19	n	684	106	4	1	795
	%	86.04	13.33	0.50	0.13	100
20 - 25	n	673	74	2	0	749
	%	89.85	9.88	0.27	0.00	100
Total	n	2149	264	8	1	2422
	%	88.73	10.90	0.33	0.04	100

Based on status of smoking, 0.3% of respondents who were non-smokers said that they probably would smoke a cigarette if offered by a friend. The highest percentage was seen among respondents aged 16-19. Meanwhile, less than 0.1% said that they definitely would smoke if offered (Table 28).

Table 29. Intention to smoke at any time during the next year (by area)

Area	n	Smoke a cigarette at any time during next year				Total
		Definitely not	Probably not	Probably yes	Definitely yes	
Rural	n	1293	228	18	0	1539
	%	84.02	14.81	1.17	0	100
Urban	n	1142	265	78	16	1501
	%	76.08	17.65	5.2	1.07	100
Total	n	2435	493	96	16	3040
	%	80.1	16.22	3.16	0.53	100

Table 30. Intention to smoke at any time during the next year (by age)

Age	n	Smoke a cigarette at any time during next year				Total
		Definitely not	Probably not	Probably yes	Definitely yes	
13-15	n	848	150	20	0	1018
	%	83.3	14.73	1.96	0	100
16-19	n	786	192	31	3	1012
	%	77.67	18.97	3.06	0.3	100
20-25	n	801	151	45	13	1010
	%	79.31	14.95	4.46	1.29	100
Total	n	2435	493	96	16	3040
	%	80.1	16.22	3.16	0.53	100

The proportion of girls who reported that they probably would smoke a cigarette at any time during the next year was higher among urban girls (5.2%) than among rural girls (1.2%). While no respondents in the rural area answered that they would definitely smoke at any time in the next year, 1.1% of those in the urban said that they would definitely smoke. (Table 29). By age group, the older the age the more the number of respondents who stated that they probably would smoke or that they would definitely smoke. About 2% of respondents aged 13-15, 3.1% of respondents aged 16-19, and 4.5% of respondents aged 20-25 answered that they probably would smoke in the next year. Meanwhile, none of the respondents aged 13-15, 0.3% of respondents aged 16-19, and 1.3% of respondents aged 20-25 confirmed that they definitely would smoke next year (Table 30)

Table 31. Intention to smoke at any time next year (among non-smoker)

Age	n	Intention to smoke next year				Total
		Definitely not	Probably not	Probably yes	Definitely yes	
13 - 15	n	764	107	7	0	878
	%	87.02	12.19	0.80	0.00	100
16 - 19	n	667	122	6	0	795
	%	83.90	15.35	0.75	0.00	100
20 - 25	n	651	95	3	0	749
	%	86.92	12.68	0.40	0.00	100.00
Total	n	2082	324	16	0	2422
	%	85.96	13.38	0.66	0.00	100

When observed by smoking status, 0.7% of respondents said that they probably would smoke at any time next year. The highest percentage was among respondents aged 13-15 (0.8%) than among respondents aged 16-19 (0.7%) and respondents aged 20-25 (0.4%) (Table 31).

6.4 Attitude and Belief Regarding Smoking

Table 32. Proportion of respondents who have ever heard of light or mild or flavored cigarettes

Area	n	Ever heard of light or mild or flavored cigarettes		Total
		Yes	No	
Urban	n	1222	279	1501
	%	81.41	18.59	100
Rural	n	1159	380	1539
	%	75.31	24.69	100

The majority of respondents in the urban (81.4%) and rural (75.3%) areas have heard of light or mild or flavored cigarettes (Table 32).

Table 33. Opinion on whether light or mild or flavored cigarettes are easier or harder to smoke for new smokers (by area)

Area	n	"Light" or "mild" or " flavored " cigarettes are easier / harder to smoke than regular cigarette for new smokers				Total
		Easier	Harder	No difference	Don't know	
Urban	N	426	255	463	357	1501
	%	28.38	16.99	30.85	23.78	100
Rural	n	285	323	480	451	1539
	%	18.52	20.99	31.19	29.30	100

When asked whether light or mild or flavored cigarettes were easier or harder to smoke for new smokers, respondents who said that there was no difference compared to regular cigarettes made up the highest percentage both in the rural area (31.2%) and the urban area (30.8%). Interestingly, in the rural area, respondents who answered that they do not know was 29.3% while the percentage of respondents who said that it was harder (21%) was higher than the number of respondents who said that it was easier (18.5%) (Table 33).

Table 34. Opinion on “Light" or "mild" or "flavored" cigarettes (by age)

Age	n	"Light" or "mild" or "flavored" cigarettes are easier / harder to smoke than regular cigarette for new smokers				Total
		Easier	Heavier	No difference	Don't know	
13 - 15	n	189	209	270	350	1018
	%	18.57	20.53	26.52	34.38	100
16 - 19	n	209	198	360	245	1012
	%	20.65	19.57	35.57	24.21	100
20 - 25	n	313	171	313	213	1010
	%	30.99	16.93	30.99	21.09	100
Total	n	711	578	943	808	3040
	%	23.39	19.01	31.02	26.58	100

By age group, the percentage of respondents who commented that "Light" or "mild" or "flavored" cigarettes were easier to smoke than regular cigarettes for new smokers increased with age (18.6% of respondents aged 13-15, 20.6% of respondents aged 16-19, and 31% of respondents aged 20-25) (Table 34).

Table 35. Opinion on Light" or "mild" or "flavored" cigarettes (by status of smoking)

Smoking Status	n	Are "light" and "mild" cigarettes easier or harder to smoke for new smoker				Total
		Easier	Harder	No Difference	Don't know	
Non smoker	n	603	541	890	788	2822
	%	21.37	19.17	31.54	27.92	100
Current smoker	n	108	37	53	20	218
	%	49.54	16.97	24.31	9.17	100
Total	n	711	578	943	808	3040
	%	23.39	19.01	31.02	26.58	100

Among current smokers, the majority of the respondents (49.5%) believed that “light” or “mild” cigarettes were easier to smoke (Table 35).

Table 36. Opinion on whether “light” or "mild" or "flavored” cigarettes are less harmful than regular cigarettes (by area)

Area	n	“Light” or "mild" or "flavored cigarettes " less harmful than regular cigarette			Total
		No, They are not	Yes, they are less harmful	Don’t know	
Urban	n	934	244	323	1501
	%	62.23	16.26	21.52	100
Rural	n	913	174	452	1539
	%	59.32	11.31	29.37	100

Table 37. Opinion on whether “light” or "mild" or "flavored” cigarettes are less harmful than regular cigarettes (by age)

Age		“Light” or "mild" or "flavored cigarettes " less harmful than regular cigarette			Total
		No, They are not	Yes, they are less harmful	Don’t know	
13-15	n	550	136	332	1018
	%	54.03	13.36	32,.61	100.00
16-19	n	645	132	235	1012
	%	63.74	13.04	23.22	100.00
20-25	n	652	150	208	1010
	%	64.55	14.85	20.59	100.00

The majority of respondents in the urban area (62.2%) and in rural area (59.3%) commented that “light” or "mild" or "flavored” cigarettes were not less harmful than regular cigarettes (Table 36). By age group, most of the respondents in all age groups also think that those kinds of cigarettes were not less harmful than regular cigarettes (Table 37).

Table 38. Opinion on whether “light” or "mild" or "flavored” cigarettes are less harmful than regular cigarette (by status ever/never smoker)

Ever smoked a cigarette	n	"Light" or "mild" or "flavored" cigarettes less harmful than regular cigarettes			Total
		No, they are not	Yes, they are less harmful	Don't know	
Yes	n	398	128	92	618
	%	64.40	20.71	14.89	100
No	n	1449	290	683	2422
	%	59.83	11.97	28.20	100
Total	n	1847	418	775	3040
	%	60.76	13.75	25.49	100

Based on the respondent's smoking status, the majority of respondents who have ever smoked a cigarette perceived that "light" and "mild" cigarettes were not less harmful than regular cigarettes (64.4%). Meanwhile, most of the respondents who have not smoked (59.8%) also think such cigarettes were not less harmful. (Table 38).

Table 39. Opinion on whether "light" or "mild" or "flavored" cigarettes are less harmful than regular cigarette (by status of smoking)

Smoking Status	n	"light" and "mild cigarette are less harmful than regular cigarettes			Total
		No, they are not	Yes, they are less harmful	Don't know	
Non smoker	n	1722	353	747	2822
	%	61.02	12.51	26.47	100
Current smoker	n	125	65	28	218
	%	57.34	29.82	12.84	100
Total	n	1847	418	775	3040
	%	60.76	13.75	25.49	100

Among current smoker, 29.8% of respondents believed that "light" or "mild" cigarettes were less harmful than regular cigarettes (Table 39).

Table 40. Awareness of health effects of smoking (by area)

	Urban		Rural	
Health effect of smoking	Frequency	%	Frequency	%
Lung cancer in smokers	1487	99.27	1518	98.89
Lung cancer in non-smokers from secondhand	1361	90.85	1408	91.73
Stained teeth in smokers	1449	96.73	1483	96.61
Premature ageing	1258	83.98	1325	86.32
Stroke (blood clots in the brains) in smokers	1290	86.11	1303	84.89
Impotence in male smokers	1427	95.26	1449	94.40
Pregnancy related complications in women smokers	1479	98.73	1513	98.57
Heart disease	1454	97.06	1501	97.79

Lung cancer in smokers is the most common health effect of smoking mentioned both by respondents in the urban area (99.3%) and those in the rural area (98.9%). Interestingly, pregnancy related complications in women smokers was the second most mentioned effect both in the urban (98.7%) and in the rural area (98.6%) (Table 40).

Table 41. Awareness of health effects of smoking (by status of ever/never smoker)

Health Effect	Ever smoker		Never smoker	
	Frequency	%	Frequency	%
Lung cancer in smokers	**607**	**98.2**	**2398**	**99.0**
Lung cancer in nonsmokers from secondhand	**565**	**91.4**	**2204**	**91.0**
Stained teeth in smokers	**595**	**96.3**	**2337**	**96.5**
Premature Ageing	**523**	**84.6**	**2060**	**85.1**
Stroke (blood clots in the brains) in smokers	**518**	**83.8**	**2075**	**85.7**
Impotence in male smokers	**570**	**92.2**	**2306**	**95.2**
Pregnancy related complications in women smokers	**599**	**96.9**	**2393**	**98.8**

When awareness of health effect of smoking was compared with respondent's status of ever smoked or not, those who have never smoked seemed to have a better awareness of the harmful effects of smoking than those who have ever smoked (Table 41).

Table 42. Awareness of health effects of smoking (by status of non/current smoker)

Health effect of smoking	Smoking status				Chi-Square test
	Non Smoker	%	Current smoker	%	
Lung cancer in smokers	**2794**	**99.0%**	**211**	**97%**	**18.404 (0.001)**
Lung cancer in nonsmokers from secondhand	**2578**	**91.4%**	**191**	**88%**	**5.885 (0.208)**
Stained teeth in smokers	**2729**	**96.7%**	**203**	**93%**	**15.322 (0.004)**
Premature aging	**2410**	**85.4%**	**173**	**79%**	**5.969 (0.201)**
Stroke (blood clots in the brains) in smokers	**2423**	**85.9%**	**170**	**78%**	**17.004 (0.002)**
Impotence in male smokers	**2680**	**95.0%**	**196**	**90%**	**17.918 (0.001)**
Pregnancy related complications in women smokers	**2783**	**98.60%**	**209**	**96%**	**47.037 (0.000)**
Heart disease	**2750**	**97.40%**	**205**	**94%**	**12.801 (0.012)**

In general, awareness on the health effects of smoking among current smokers was significantly lower compared to non-smokers (Table 42).

Table 43. Respondent's number of close friends who smoke (by area)

Area	n	Number of close friends who smoke						Total
		0	1	2	3	4	5	
Urban	N	683	193	194	112	65	254	1501
	%	45.50	12.86	12.92	7.46	4.33	16.92	100
Rural	n	1073	115	128	79	41	103	1539
	%	69.72	7.47	8.32	5.13	2.66	6.69	100

Table 44. Respondent's number of close friends who smoke (by age)

Age	n	Number of close friends who smoke						Total
		0	1	2	3	4	5	
13-15	n	703	53	76	48	30	108	1018
	%	69.06	5.21	7,.47	4.72	2.95	10.61	100.00
16-19	n	608	101	108	57	27	111	1012
	%	60.08	9.98	10.67	5.63	2.67	10.97	100.00
20-25	n	445	154	138	86	49	138	1010
	%	44.06	15.25	13.66	8.51	4.85	13.66	100.00

A larger percentage of respondents in urban areas stated that they have close friends who smoke compared to respondents from the rural areas (Table 43). A comparison between the age groups showed that the older respondents (20-25 years old) were more likely to have close friends who smoke (Table 44).

Table 45. Number of close friends who smoke (by status of ever/never smoker)

Ever smoked a cigarette	N	Number of close friends who smoke						Total
		0	1	2	3	4	5	
No	N	1550	220	234	120	58	240	2422
	%	64.00	9.08	9.66	4.95	2.39	9.91	100
Yes	N	206	88	88	71	48	117	618
	%	33.33	14.24	14.24	11.49	7.77	18.93	100
Total	N	1756	308	322	191	106	357	3040
	%	57.76	10.13	10.59	6.28	3.49	11.74	100

χ^2 = 211,153; d.f.=5; p-value= $p<0.05$

When comparison is made between ever and never smokers, the percentage of those having close friends who smoke was higher among respondents who have ever smoked than among respondents who have never smoked (Table 45).

Table 46. Overall opinion on smoking (by area)

Area	N	Overall opinion on smoking					Total
		Very Bad	Bad	Neither Good or Bad	Good	Very Good	
Urban	N	1004	317	166	6	8	1501
	%	66.89	21.12	11.06	0.40	0.53	100
Rural	N	1211	229	94	1	4	1539
	%	78.69	14.88	6.11	0.06	0.26	100

Table 47. Overall opinion on smoking (by age)

Age	n	Overall opinion on smoking					Total
		Very Bad	Bad	Neither Good or Bad	Good	Very Good	
13-15	n	813	133	69	1	2	1018
	%	79.86	13.06	6.78	0.10	0.20	100.00
16-19	n	726	186	90	4	6	1012
	%	71.74	18.38	8.89	0.40	0.59	100.00
20-25	n	676	227	101	2	4	1010
	%	66.93	22.48	10.00	0..20	0.40	100.00

The majority of respondents in both the urban and rural areas as well as respondents of all age groups combined consider smoking as very bad. There were more respondents in the rural area (78.7%) than in urban area (66.9%) who said that smoking is very bad (Table 46). By age group, the percentage of respondents who stated that smoking is very bad was higher in the younger age group (79.86% of respondents aged 13-15, 71.7% of respondents aged 16-19, and 66.9% of respondents aged 20-25). Interestingly, the number of respondents who said that smoking is good and who said that it is very good is slightly higher in age group 16-19 than in age group 20-25 (Table 47). These results suggest that respondents from the urban areas and those who are older are more likely to have a positive attitude towards smoking.

Table 48. Overall opinion on smoking (by status of non/current smoker)

Smoking Status	n	Overall opinion on smoking				Total
		Bad	Neither good nor bad	Good	Very Good	
Non smoker	n	2634	175	13	10	2822
	%	93.34	6.20	0.46	0.35	100
Current smoker	n	127	85	6	2	218
	%	58.26	38.99	2.75	0.92	100
Total	n	2761	260	19	12	3040
	%	90.82	8.55	0.63	0.39	100

χ^2 =451,990; d.f.=16; p-value = <0.05

Overall, current smokers tend to have a significantly more favorable opinion on smoking than non-smokers (p<0.05). (Table 48).

Table 49. Attitude and belief regarding smoking (percentage agreeing with each statement)

No	Statement	n	13 - 15	16 - 19	20 - 25	Total	Chi-Square Test
a)	Smoking helps to control body weight.	n	487	583	547	1617	20.024* (0.000)
		%	47.84	57.61	54.16	53.19	
b)	Smoking is a sign of being modern.	n	111	122	115	348	0.670 (0.719)
		%	10.90	12.06	11.39	11.45	
c)	Smoking made people look cool or fit.	n	87	99	86	272	1.300 (0.522)
		%	8.55	9.78	8.51	8.95	
d)	Most of the women my age smoke.	n	142	210	239	591	32.213* (0.000)
		%	13.95	20.75	23.66	19.44	
e)	It is acceptable for young men (aged 15 to 25) to smoke.	n	171	227	252	650	21.041* (0.000)
		%	16.80	22.43	24.95	21.38	
f)	It is acceptable for young women (aged 15 to 25) to smoke.	n	80	95	115	290	7.352* (0.025)
		%	7.86	9.39	11.39	9.54	
g)	Smoking is disgusting.	n	669	686	598	1953	17.642* (0.000)
		%	65.72	67.79	59.21	64.24	
h)	Smoking makes young people look more mature.	n	106	119	127	352	2.362 (0.307)
		%	10.41	11.76	12.57	11.58	

i)	It is safe to smoke for a year or two.	n	72	83	115	270	12.523* (0.002)
		%	7.07	8.20	11.39	8.88	
j)	Smokers have a harder time in sports.	n	479	648	604	1731	64.719* (0.000)
		%	47.05	64.03	59.80	56.94	
k)	People who smoke have more friends.	n	117	163	136	416	9.207* (0.010)
		%	11.49	16.01	13.47	13.68	
l)	The society disapproves of smoking.	n	641	660	675	1976	3.361 (0.186)
		%	62.97	65.22	66.83	65.00	

As many as 53.2% respondents believed that smoking helps to control body weight. A larger percentage of respondents aged 16-19 agreed (57.6%) with the statement compared to 47.8% of respondents aged 13-15 and 54.2% of respondents aged 20-25. A small minority of respondents agreed that smoking is a sign of being modern (11.5%) and make smokers look cool (9%).About a fifth (19%) of total respondents perceived that most girls and young women their age smoke. Meanwhile, as many as 7.9% of respondents aged 13-15, 9.4% of respondents aged 16-19, and 11.4% of respondents aged 20-25 agreed with the statement that it is acceptable for young women aged 15-10 to smoke. Furthermore, 11.5% of respondents aged 13-15, 16% of respondents aged 16-19 and 13.47% of respondents aged 20-25 believed in the statement that people who smoke have more friends. (Table 49).

Table 50. Attitude and belief regarding smoking (percentage agreeing with each statement)

Opinion about smoking	Smoking status				Chi-square Test
	Non smokers	%	Current smokers	%	
Smoking helps to control body weight	1516	53.7%	101	46.33%	6,416 (0.170)
Smoking is a sign of being modern	284	10.1%	64	29.36%	101.088 (0.000)
Smoking makes people look cool or fit	226	8.0%	46	21.10%	66.560 (0.000)
Smoking makes young people look more mature	291	10.3%	61	27.98%	70.598 (0.000)
People who smoke have more friends	363	12.9%	53	24.31%	35.611 (0.000)
Smoking is disgusting	1882	66.7%	71	32.57%	120.017 (0.000)
Smokers have a harder time in sports	1600	56.7%	131	60.09%	8.253 (0.083)
Indonesian society disapproves of smoking	1866	66.1%	110	50.46%	24.093 (0.000)
Most of the girls/women my age smoke	471	16.7%	120	55.05%	210.637 (0.000)
It is acceptable for young men (aged 15 to 25) to smoke	534	18.9%	116	53.21%	159.151 (0.000)
It is acceptable for young women (aged 15 to 25) to smoke	119	4.2%	91	41.74%	304.142 (0.000)

Overall current smokers have more pro-tobacco attitudes compared to non-smokers. Current smokers were more likely to believe that smoking is a sign of being modern, and that smoking make people look cool and more mature. A significantly larger percentage of smokers also perceived that most girls or women their age smoke and that it is accetable for young girls and women to smoke. (Table 50).

6.5 Awareness of Tobacco Control Policies

a. Health Warnings on Cigarette Packs

Table 51. Awareness of any health warnings on cigarette packs (by area)

Area	n	Awareness of any health warnings on cigarette packs			Total
		Yes	No	Don't know	
Rural	n	1454	28	57	1539
	%	94.48	1.82	3.7	100
Urban	n	1379	45	77	1501
	%	91.87	3	5.13	100
Total	n	2833	73	134	3040
	%	93.19	2.4	4.41	100

Table 52. Awareness of any health warnings on cigarette packs (by age)

Age	N	Awareness of any health warnings on cigarette packs			Total
		Yes	No	Don't know	
13-15	N	936	21	61	1018
	%	91.94	2.06	5.99	100
16-19	N	946	18	48	1012
	%	93.48	1.78	4.74	100
20-25	N	951	34	25	1010
	%	94.16	3.37	2.48	100
Total	N	2833	73	134	3040
	%	93.19	2.4	4.41	100

The majority of girls in rural (94.5%) and in urban area (91.9%) as well as girls of all age groups combined (93.2%) were aware of any health warnings on cigarette packages (Tables 51 and 52). By age group, the awareness of health warnings on cigarette packs increased with age (91.94% of respondents aged 13-15, 93.5% of respondents aged 16-19, and 94.2% of respondents aged 20-25) (Table 52).

Table 53. Frequency of noticing health warnings on cigarette packs in the last month (by area)

Area	n	Frequency of noticing health warnings on cigarette packs in the last month				Total
		Never	Once in a while	Often	Very Often	
Rural	n	238	787	324	190	1539
	%	15,46	51,14	21,05	12,35	100
Urban	n	319	691	315	176	1501
	%	21,25	46,04	20,99	11,73	100
Total	n	557	1478	639	366	3040
	%	18,32	48,62	21,02	12,04	100

Table 54. Respondent's frequency of noticing of health warnings on cigarette packs in the last month (by age)

Age	n	Frequency of noticing health warnings on cigarette packs in the last month				Total
		Never	Once in a while	Often	Very often	
13-15	n	168	519	215	116	1018
	%	16,5	50,98	21,12	11,39	100
16-19	n	185	476	220	131	1012
	%	18,28	47,04	21,74	12,94	100
20-25	n	204	483	204	119	1010
	%	20,2	47,82	20,2	11,78	100
Total	n	557	1478	639	366	3040
	%	18,32	48,62	21,02	12,04	100

The majority of respondents in the rural (51.1%) and the in urban (46%) areas reported that they noticed health warnings on cigarette packs once a while in the last month. In the rural area, as many as 21% of respondents stated that they often notice health warnings on cigarette packs and 12.3% respondents said they very often notice those warnings. Meanwhile, in the urban area, 21% of respondents said often and 11.7% said they very often noticed the warnings (Table 53). According to age group, the majority of respondents in all age groups indicated that they once in a while noticed health warnings on cigarette packs. (51% of respondents aged 13-15, 47% of respondents aged 16-19, and 47.8% respondents aged 20-25) (Table 54).

Meanwhile, almost all FGD participants were aware of the health warnings on cigarette packs. **When FGD participants were asked "What are the messages that you have seen on cigarette packs?", some mentioned:**

- "*Smoking can cause cancer, heart attack, impotence, and complication to pregnancy and the fetus" (High School student in the rural area)*
- *"On the packs it reads … smoking causes cancer, heart disease, lung disease ... fetus ... hypertension ... pregnancy" (Junior High School student in the urban area)*

- *"I've seen them on cigarette packs ... Gudang Garam .. smoking can cause cancer" (Junior High School student in the urban area)*

Table 55. Opinion on extent of effect of health warnings on cigarette package (by area)

Area	n	Health warnings makes me think of health risks of smoking				Total
		Not at all	A little	A lot	Not seen any warning labels	
Rural	n	119	277	1091	52	1539
	%	7,73	18	70,89	3,38	100
Urban	n	127	334	966	74	1501
	%	8,46	22,25	64,36	4,93	100
Total	n	246	611	2057	126	3040
	%	8,09	20,1	67,66	4,14	100

When asked about the extent of the effect the of health warnings on cigarettes packages, the proportion of respondents who answered that the health warnings made them think a lot about the health risks of smoking was higher among girls in the rural area (70.9%) than among girls in the urban area (64.4%) (Table 55).

Table 56. Opinion on extent of effect of health warnings on cigarette package (by age)

Age	N	Health warnings makes me think of health risks of smoking				Total
		Not at all	A little	A lot	Not seen any warning labels	
13-15	n	63	161	737	57	1018
	%	6.19	15.82	72.4	5.6	100
16-19	n	79	182	706	45	1012
	%	7.81	17.98	69.76	4.45	100
20-25	n	104	268	614	24	1010
	%	10.3	26.53	60.79	2.38	100
Total	n	246	611	2057	126	3040
	%	8.09	20.1	67.66	4.14	100

χ^2 =7.277; d.f.=6 ;p-value = <0.05

By age group, the majority of the respondents (67.7%) commented that the health warnings made them think a lot about the health risks of smoking. Only 8.1% said that the health warnings do not at all make them think about the health risks. There is no significant relationship between age groups and thought of risk from health warnings (Table 56).

Meanwhile, when participants of the FGD where asked, ***"Do you think that the current health warnings on cigarette packs have an impact?,*** the respondents answered:

- *"They (the warnings) do have an effect because women think about their future ... like about having kids" (High School student in the urban area)*

- *"Maybe it will have an impact on women who are pregnant but it doesn't seem to have any effect on teenage girls" (University/College student in the urban area)*
- *"I'm afraid of warnings like that. Especially because it says that it can complicate pregnancy and the fetus. The warnings on the cigarette packs make me not want to smoke" (University/College student in the rural area)*
- *"It's possible. For some people, tobacco ads will strongly encourage them to smoke… and it's also possible that for some other people, health warnings on cigarette packs make them not want to smoke because they realize that there are dangerous substances in a cigarette that can harm their body" (High School student in the rural area)*

Meanwhile, there were also some negative responses, such as:

- "*In my views, health warnings on cigarette packs will have no impact because, as we know, people who are addicted to smoking won't care about all kinds of warnings" (High school student in the rural area)*
- *"No… it's all about self-awareness. Everything must come from one's self. If one day the person comes to his senses … then he will (stop smoking)" (University/College student in the urban area)*
- *"It doesn't seem to have any impact at all. In Malaysia, usually there's something written on those white cigarette sticks ... and there's a picture of someone with a heart attack. But it (cigarette) is still sells. The reason … it may decrease the country's foreign exchange (if cigarette are not allowed). Actually, we have a lot of other sectors. Maybe it's because we're driven by those multinational companies" (Junior High School student in the urban area)*
- *"Nobody will take notice. You see it (the warnings) ... and that's it... no effect" (Junior High School student in the urban area)*
- *"In my opinion ... well ... for girls my age ... it has no impact" (High School student in the urban area)*

Table 57. Preference for content of health information on cigarette packages (by area)

Area	N	Content of health information on cigarette packages				Total
		Less health information	About the same	More health information	Can't say	
Rural	N	60	111	1167	201	1539
	%	3.9	7.21	75.83	13.06	100
Urban	N	74	141	1010	276	1501
	%	4.93	9.39	67.29	18.39	100
Total	N	134	252	2177	477	3040
	%	4.41	8.29	71.61	15.69	100

χ^2 =27.678; d.f.=3 ;p-value = <0.05

The majority of the respondents (71.6%) in both the rural and urban areas combined commented that they require more health information on cigarette packages. However, the percentage of those who require more information was significantly higher among girls in the rural area (75.8%) than

among girls in the urban area (67.3%) ($p<0.05$). The proportion of those who require less health information in the areas combined was less than 5% (Table 57).

Table 58. Respondent's preference for content of health information on cigarette packages (by age)

Age	N	Content of health information on cigarette packages				Total
		Less health information	About the same	More health information	Can't say	
13-15	N	70	85	666	197	1018
	%	6.88	8.35	65.42	19.35	100
16-19	N	24	70	741	177	1012
	%	2.37	6.92	73.22	17.49	100
20-25	N	40	97	770	103	1010
	%	3.96	9.6	76.24	10.2	100
Total	n	134	252	2177	477	3040
	%	4.41	8.29	71.61	15.69	100

χ^2 =67.493; d.f.=6 ;p-value=<0.05

There is a statistically significant relationship between age groups and requirement on content of health information on cigarette packs ($p<0.05$). The survey found that the older the age group, the higher the proportion of girls who require more health information on cigarette packages: 65.4% of respondents aged 13-15, 73.2% of respondents aged 16-19, and 76.2% of respondents aged 20-25. (Table 58).

Table 59. Opinion on effect of printed pictorial health warnings about harmful effects of smoking on cigarette packs on reducing smoking among young people (by area)

Area	n	Effect of printing pictorial health warnings about harmful effects of smoking on cigarette packs on reducing smoking among young people			Total
		Effective	Neither effective nor ineffective	Ineffective	
Rural	n	787	286	466	1539
	%	51.14	18.58	30.28	100
Urban	n	798	299	404	1501
	%	53.17	19.92	26.91	100
Total	n	1585	585	870	3040
	%	52.13	19.24	28.62	100

Table 60. Respondent's opinion on effect of printing pictorial health warnings about harmful effects of smoking on cigarette packs on reducing smoking among young people (by age)

Age	n	Effect of printing pictorial health warnings about harmful effects of smoking on cigarette packs on reducing smoking among young people			Total
		Effective	Neither effective nor ineffective	Ineffective	
13-15	n	549	229	240	1018
	%	53.93	22.5	23.57	100
16-19	n	492	198	322	1012
	%	48.62	19.57	31.82	100
20-25	n	544	158	308	1010
	%	53.86	15.64	30.5	100
Total	n	1585	585	870	3040
	%	52.13	19.24	28.62	100

The percentage of respondents in both the rural and urban areas combined who commented that pictorial health warnings about the harmful effects of smoking on cigarette packs was effective in reducing smoking among young people was higher (52.1 %) than the percentage of those who said that it was ineffective (28.6%). (Table 59). By age, the proportion of respondents in all age groups who said that the graphic health warnings were effective recorded the highest percentage. The percentage of respondents who regarded graphic health warnings as effective was higher among respondents aged 13-15 (53.9%) and aged 20-25 (53.9%) than among respondents aged 16-19 (48.9%) (Table 60).

Meanwhile, according to the FGD, most of the respondents who smoke said that pictorial health warnings will have little impact on them. However, those who do not smoke said that pictorial health warnings will discourage them from smoking. When asked ***"What do you think of the scary pictorial health warnings on cigarette packs? Do you think they are effective?,*** the respondents answered:

- *"If a person is already addicted, it would not have any impact" (Junior High School student in the rural area)*
- *"It's useless … there's no effect. I'm afraid the cigarette (packs) would only be considered a display... like a collection. Nowadays there are some people who like things like that" (University/College student in the urban area)*
- *"Children will probably just ignore such ideas" (Junior High School student in the rural area)*
- *"No impact ... I only will get scared when I'm seeing the pictures but after that ... I don't care" (University/College student in the urban area)*
- *"Yes, I'll get scared ... but, I don't think like that. I'd rather smoke than be a passive smoker" (University/College student in the urban area)*
- *"I'll turn over the picture"(University student in urban area)*
- *"Yes, they are effective because females will definitely get scared if they can get sick like that" (University/College student in the urban area)*

- *"To some people … something like that would be useful. The examples of the danger of smoking will motivate people to smoke less " (High School student in the rural area)*
- *"Depends on the picture ... because there are already some scary pictures that the public find usual … it would not be effective if people think the pictures are usual" (Junior High School student in the rural area)*
- *"It's necessary, only with those pictures someone will know how her lungs would be like when she smokes … it would not be effective if it contains text warnings only"(Junior High School student in the rural area)*

Table 61. Opinion on the need for government to implement pictorial health warnings on cigarette packs in the country (by area)

Area	n	Government should implement pictorial health warnings on cigarette packs in the country			Total
		Yes	No	Unsure	
Rural	n	1344	91	104	1539
	%	87.33	5.91	6.76	100
Urban	n	1259	98	144	1501
	%	83.88	6.53	9.59	100
Total	N	2603	189	248	3040
	%	85.63	6.22	8.16	100

Table 62. Opinion on the need for Government to implement pictorial health warnings on cigarette packs in the country (by age)

Age	n	Government should implement pictorial health warnings on cigarette packs in the country			Total
		Yes	No	Unsure	
13-15	N	869	61	88	1018
	%	85.36	5.99	8.64	100
16-19	N	868	46	98	1012
	%	85.77	4.55	9.68	100
20-25	N	866	82	62	1010
	%	85.74	8.12	6.14	100
Total	N	2603	189	248	3040
	%	85.63	6.22	8.16	100

Apart from respondents' opinion about the effectiveness of pictorial health warnings, the survey indicates that the majority of respondents in both the rural and urban areas combined (85.6%) as well as respondents by all age groups (85.6%) believe that the government should implement pictorial health warnings on cigarette packs in the country (Tables 61 and 62).

The FGD found that the respondents who do not smoke support the inclusion of pictorial health warnings on cigarette packs. When asked ***"What do you think of policies to include scary pictorial health warnings on cigarette packs?",*** the responses were:

- *"It's necessary …because it can scare smokers about the consequences at the end of the day… and those pictures can serve as real evidence. And it's not only just words that most smokers don't fully understand." (High School student in the rural area)*
- *"I support it. Maybe people like us have not understood it (the health warnings) yet. Smoking is an experiment and those who experiment are usually children … and when they see those pictures, they would definitely get scared. Prevention should be from the earliest age" (University/College student in the urban area)*
- *"I support it but it seems to be useless" (University/College student in the urban area)*
- *"Yes, it's necessary… pictorial health warnings to encourage people to stay away from smoking" (University/College student in the rural area).*

b . Tobacco Advertisement and Promotion

i. Exposure to Tobacco Advertising

Table 63. Place where respondents noticed cigarettes or tobacco products advertised in the last 30 days (by area)

Area	N	Place of noticing cigarettes or tobacco products advertising in the last 30 days											
		Television	Chi-Square Test	Radio	Chi-Square Test	Posters	Chi-Square Test	Billboards	Chi-Square Test	Newspaper or magazines	Chi-Square Test	Shops or stores	Chi-Square Test
Rural	N	1410	7.276 (0.007)	574	0.461 (0.497)	1070	1.816 (0.178)	495	152.687 (0.000)	848	7.968 (0.005)	942	44.565 (0.000)
	%	91.62		37.3		69.53		32.16		55.1		61.21	
Urban	N	1413		542		1077		816		903		738	
	%	94.14		36.11		71.75		54.36		60.16		49.17	
Total	N	2823		1116		2147		1311		1751		1680	
	%	92.86		36.71		70.63		43.13		57.6		55.26	

Television was the most mentioned media where respondents in both rural area (91.6%) and urban area (94.1%) have noticed cigarettes or tobacco products advertised. Meanwhile, the second most mentioned media in both areas was posters (Table 62). Billboards and newspapers were more common tobacco advertising channels in the urban areas, while in the rural areas shops and stores were more frequently reported.

Table 64. Places where respondents noticed cigarettes or tobacco products advertising in the last 30 days (by age)

Age	N	Place of noticing cigarettes or tobacco products advertising in the last 30 days											
		TV	Chi-Square Test	Radio	Chi-Square Test	Posters	Chi-Square Test	Billboards	Chi-Square Test	Newspaper or magazines	Chi-Square Test	Shops or stores	Chi-Square Test
13-15	N	944	7.275 (0.026)	327	23.650 (0.000)	679	11.582 (0.003)	356	57.089 (0.000)	577	9.663 (0.008)	596	13.188 (0.001)
	%	92.73		32.12		66.7		34.97		56.68		58.55	
16-19	N	956		361		730		434		554		514	
	%	94.47		35.67		72.13		42.89		54.74		50.79	
20-25	N	923		428		738		521		620		570	
	%	91.39		42.38		73.07		51.58		61.39		56.44	
Total	N	2823		1116		2147		1311		1751		1680	
	%	92.86		36.71		70.63		43.13		57.6		55.26	

By age group, television was the most mentioned media where respondents of all age groups combined notice a cigarette or tobacco product advertisement (92.9%). Interestingly, the proportion of respondents who said that they find cigarettes or tobacco advertisement in shops or stores was higher in age group 13-15 (58.5%) than in age group 16-19 (50.8%) and in age group 20-25 (56.4%) (Table 64). There is a statistically significant relationship between age groups and place of noticing cigarettes or tobacco products advertisement.

Meanwhile, all respondents in the FGD admitted that they very often see a tobacco ad or promotion both through electronic media (TV, radio, internet) and printed media (newspaper, banner, billboards and others). The qualitative research in both the urban and rural areas also found that TV was the most mentioned media where tobacco ads were seen.

When asked "Where have you seen a cigarette ad?", the respondents answered:

- *"TV, pamphlets, billboards ..." (Junior High school student in the urban area))*
- *"TV… almost 50% of its content are cigarette ads. The ads on TV are almost all cigarette ads." (University student in the urban area)*
- *"On TV, music events, pamphlets ..." (University student in the urban area)*
- *"On clothing, shops, food stalls, TV, newspaper, radio..." (High School student in the rural area)*
- *"TV, Newspaper, magazines, banners on streets... "(High School student in the rural area)*

When further asked "How often do you see a cigarette promotion The respondents gave the following descriptions:

- *"Very often ... everyday ...there are even promotions in events … such as sporting events. A tobacco ad also won best ad and most favorite ad in an award program." (Junior High School in the rural area)*
- *"Almost every day." (Junior High School student in the rural area)*
- *"Very often … especially on TV. Even all music and sport events are sponsored by the tobacco industry" (High School Student in the rural area)*

- *"Often … on electronic media ... printed media ... also on the streets, markets, and stores." (High School student in the rural area)*
- *"Often, such as at music events at school … and recently one in Rawang that was sponsored by Rokok Rawit." (High School student in the rural area)*
- *"Every day ... on TV ." (High School Student in the rural area)*
- *"There are promotions that let people try cigarettes in shopping malls."(Junior High School student in the urban area)*

Almost all respondents in the FGD said that tobacco ads that are either broadcasted through electronic media (TV, radio) or published through printed media (newspaper, magazine, billboard, etc) are very attractive in terms of storyline and creativity so that they are considered as one of the ads that deserve an award. When asked ***"What do you think of tobacco ads?",*** the respondents gave the following opinion:

- *"Very creative!" (High School student in the urban area)*
- *"The storyline is good, as if showing someone inhaling tobacco." (High School student in the urban area)*
- *"Such as on Lebaran (Islamic holiday after fasting month). New Year ... that's when they don't mind spending a lot of money … like Gudang Garam … the New Year one, the ad is the coolest!" (University/College student in the urban area)*
- *"Yes, Djarum ... like on Lebaran Idul Fitri ... New Year ... those ones are very good. In my view, it's very Indonesian ... the one with the bedug (large drum suspended horizontally at mosque to summon prayer) is very good …very Indonesian ... very creative… cool ... but it's wrong that it was made by a tobacco industry" (University/College student in the urban area)*
- *"Just ordinary."(Junior High School student in the rural area)*
- *"Tobacco ads are more creative than other ads." (High School student in the rural area)*
- *"They're good. In terms of the ad, it has many positive effects. It enhances creativity. But the cigarette ... that one has many negative effects." (High School student in the rural area)*

The FGD further explored respondents' perception on tobacco companies' public service ads on special events. Some of the participants assumed that the ads could have an impact on people to try smoking. However, participants did not indicate whether the ads have an impact on themselves. When asked ***"What do you think of public service ads sponsored by tobacco companies?",*** the responses were:

- *"There's a negative image and a positive image. In terms of the ad, the image is more positive. But in terms of the industry, the image is both positive and negative." (High School student in the rural area)*
- *"Messages like that will not have a positive effect towards the negative image that is already embedded in the community. If cigarette companies want to improve their image in the community, they need to improve it by doing positive things. Such as helping the community in times of disasters. But if it's only words … that alone would not improve their image in the community." (School student in the rural area)*
- *"Nothing special … because they just want to wish people something. It's not to influence anyone. And it's only showed at the end (of the ad).. Djarum. That's different from their ad where they completely advertise their cigarette." (High School Student in the urban area).*
- *"Djarum Super is the best. It (the ad) is like a story. I saw their New Year's ad on TransTV (private-run TV station). There are also some with wishes for Christmas and New Year, and*

there are some with models too … Happy New Year. The ad was very cool." (University/College student in the urban area)

- *"For the community, ads such as wishes for the holidays … those are funny and unique. They can give a positive image of the cigarette company. The more people who get interested to see the ad, the more people will try the cigarette" (University/College student in the urban area).*
- *"It can change (the tobacco company's) image because it shows participation in religious matters." (University/College student in the rural area)*
- *"Among the community, the image of cigarette companies is actually not so bad. Although smoking causes harm to health, they (cigarette companies) remain honest to the community about the consequences of smoking. Thus, the people who consume it are guilty too … although they know that it's dangerous, they still smoke." (University/College student in the rural area)*

Based on several responses in the FGD, cigarette ads have little effect on teenage girls. There is no difference among the age groups. For those who have not smoked, the ads quite attract them to try to smoke. However, the effect is limited to a curiosity to try smoking. Eventually, many of them would not smoke. For those who have smoked, their interest to smoke a certain cigarette brand is not because of the effect of the ad but because of the influence of the people in their environment who offer them the cigarette. In fact, these female smokers said that they would only smoke a certain cigarette brand and a certain cigarette taste. They commented that they would rather not smoke if the cigarette is of a different brand or type. They said that their tongue would taste bitter or they would begin to cough if they smoke a certain cigarette brand or type that is different from what they usually smoke.

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When asked ***"Do cigarette ads have an effect on young girls and women?",*** the participants said:

- *"Yes ... it's possible; because the sponsorship or ad would never want to taint their product ... hence, they make them appealing to attract us to smoke" (Junior High School student in the urban area)*
- *"Yes, when I see boys smoking I get interested and curious about it .. but it depends on one's individual faith" (Junior High School student in the rural area)*
- *"More or less, yes. Maybe not all females are not interested in smoking. But, there must be a few who got affected by the ads" (Junior High School student in the rural area)*
- *"There is an effect. .. there might be some who don't smoke but then they want to experiment with smoking .. what does it taste like? …" (High School student in the urban area)*
- *"In my view, tobacco ads have no effects on teenage girls because they're targeting boys. Just see for example the ads that demonstrate daring things. Boys usually like those kinds of ad very much … it's a man's world. Very rarely that these kinds of ad will affect females. But if there's an ad that has a female touch ... that one could encourage females to smoke" (High School student in the rural area)*
- *"Most ads don't have an effect. But usually, to increase consumer's interest, they (cigarette companies) do mobile promotion … such as by a salesperson ... that is very impactful." (Junior High School student in the urban area)*
- *"Yes, there are some effects." (High School student in the rural area)*
- *"No, because all cigarettes are different .. I smoke Marlboro .. sorry, that I mentioned Marlboro … and when I see an A-Mild ad or others … they don't attract me … nothing special … it depends on our environment … what we tried the first time … for example … Marlboro .. then it's always going to be Marlboro" (University student in the urban area)*

- *"If the ad is good … I feel like trying it … to find out what it taste like … but usually I will try something that my friends tell me … try this brand .. it's this and that" (University student in the urban area)*
- *"No, when I see those ads … they don't attract me. The ads are all good, but I don't have any intention to try them" (University student in the rural area)*

When asked whether the tobacco industry targets girls and women, the participants' responses were quite diverse. There were some who said that the tobacco industry and their ads target mostly men than women by portraying masculine figures and acts. But in the rural area, there were those who said that some tobacco ads target females by featuring actors/actresses idolized by most teenage girls.

When participants were asked ***"Do you think young girls and women have become a target of the tobacco industry?",*** their responses were as follows:

- *"Yes, because most of the smokers are men … so they want to expand their consumer target." (High School student in the rural area)*
- *"More likely to men … they focus on men because women can better control themselves ... for example when they are pregnant … what's going to happen to my pregnancy ... besides, mothers are more likely to think about their children ... but men tend not to care ... they think more about their home. They're doing this and that and they tend to get stressed more easily." (High School student in the urban area)*
- *"Females are not a direct target ... they're (the ads) more targeted towards males." (University/College student)*
- *"Those salespersons are more likely to target males; not females." (University/College student)*
- *"Yes, but not directly ... by involving teenage girls' favorite actors. The teenager then would follow what these actors do." (Junior High School student in the rural area)*

Table 65. Frequency of seeing cigarette advertisements when going to sports events, school fairs, concerts, or community events (by area)

Area	N	Frequency of seeing advertisements for cigarettes when attending sports events, school fairs, concerts, or community events				Total
		Never	Sometimes	A lot	Hardly ever attend community events	
Rural	N	228	715	366	230	1539
	%	14.81	46.46	23.78	14.94	100
Urban	N	244	719	428	110	1501
	%	16.26	47.9	28.51	7.33	100
Total	n	472	1434	794	340	3040
	%	15.53	47.17	26.12	11.18	100

Table 66. Frequency of seeing cigarette advertisements when going to sports events, school fairs, concerts, or community events (by age)

Age	n	Frequency of seeing advertisements for cigarettes when go to sports events, school fairs, concerts, or community events				Total
		Never	Sometimes	A lot	Hardly ever attend community events	
13-15	n	219	489	143	167	1018
	%	21.51	48.04	14.05	16.4	100
16-19	n	142	513	255	102	1012
	%	14.03	50.69	25.2	10.08	100
20-25	n	111	432	396	71	1010
	%	10.99	42.77	39.21	7.03	100
Total	n	472	1434	794	340	3040
	%	15.53	47.17	26.12	11.18	100

χ^2 = 210,179; d.f.=6; p-value = <0.05

The greatest proportion of girls in the rural and urban area combined (47.2%) and respondents of all age groups combined (47.2%) reported that they sometimes see cigarette advertisements when they go to sports events, school fairs, concerts, or community events (Tables 65 and 66). A significantly larger (39.2%) percentage of respondents aged 20-25 mentioned that they see a lot of cigarette advertisement when they go to sports events, school fairs, concerts, or community events compared to the younger groups (Table 68).

The qualitative research found that respondents often see events or activities that are sponsored by the tobacco industry. The FGD found a positive attitude towards tobacco sponsorship among the girls. Almost all respondents are of the opinion that the activities or events would turn out more festive and successful if they are sponsored by the tobacco industry. There were opinions that the amount of the sponsorship by a tobacco company is usually greater than that by non-tobacco companies. According to respondents, the activities or events sponsored by the tobacco industry that they often find are school alumni gatherings or events, as well as music, sports, fairs and fundraising events.

When asked ***"What events sponsored by tobacco companies have you seen?,*** the participants answered:

- *"Band concerts … they do auditions … for the A Mild Light music. They are the ones who are organizing the events" (High School student in the urban area)*
- *"It seems to be very useful for music events" (University/College student in tbe urban area)*
- *"Cigarette companies are even the main sponsors of sporting activities" (University/College student in the urban area)*
- *"The health session and healthy heart event just recently conducted here were sponsored by a cigarette company." (University/College student in the rural area)*
- *"Along the streets there are lots of banners of sporting and music events sponsored by cigarette companies." (Junior High School student in the rural area)*

- *"Mostly music events … music concerts that present famous bands .. they're mostly sponsored by A-Mild" (Junior High School student in the rural area)*
- *"There is also a tree-planting program for a re-greening project that is sponsored by a cigarette company." (Junior High School student in the rural area)*
- *"When we want to do an event, cigarette companies are very loyal … we asked for this much and they give us more … all is entirely from them" (High School student in the urban area)*
- *"Huge concerts" (High school student in the urban area).*

When participants were further asked ***"How often do you see an event that is sponsored by a cigarette company?,*** their responses were***:***

- *"Very often. There are music concerts, sporting events and others" (High School student in the rural area)*
- *"Often ... very often ... music events …usually they're the sponsors" (University/College student in the urban area)*

Generally, the girls in the FGD do not associate tobacco sponsorships with factors that influence tobacco consumption. When asked about the influence of the events that are sponsored by a cigarette company, respondents generally stated that the events would not make young girls want to smoke.

- *"It's only a sponsorship. It doesn't always mean that people who watch the events are smokers." (University/College student in the rural area)*
- *"Logically, events that are sponsored by a cigarette company are by nature a promotion ... such as a music festival, for example ... but the young girls who watch it would only enjoy the music, not the sponsors." (High School student in the rural area)*
- *"Actually we don't blame such sponsors …we are the one who asked for it ... cigarette companies are not doing anything wrong ... they're just giving away sponsorship and funds " (High School student in the urban area)*

Table 67. Respondent's support to the banning of sponsorship of sports and cultural activities by tobacco industry in the country (by area)

Area	n	Support the banning of sponsorship of sports and cultural activities by tobacco industry in the country			Total
		Not at all	A little/somewhat	A lot	
Rural	n	442	497	600	1539
	%	28.72	32.29	38.99	100
Urban	n	439	544	518	1501
	%	29.25	36.24	34.51	100
Total	n	881	1041	1118	3040
	%	28.98	34.24	36.78	100

Table 68. Support for the banning of sponsorship of sports and cultural activities by tobacco industry in the country (by age)

Age	n	Support the banning of sponsorship of sports and cultural activities by tobacco industry in the country			Total
		Not at all	A little/somewhat	A lot	
13-15	n	296	312	410	1018
	%	29.08	30.65	40.28	100
16-19	n	270	361	381	1012
	%	26.68	35.67	37.65	100
20-25	n	315	368	327	1010
	%	31.19	36.44	32.38	100
Total	n	881	1041	1118	3040
	%	28.98	34.24	36.78	100

Only 39% of respondents in the rural area and 34.5% of respondents in the urban area stated that they strongly support the banning of sponsorship of sports and cultural activities by tobacco industry in the country. There were as many as 28.7% girls in the rural area and 29.2% girls in the urban area who commented that they totally do not support such banning. The rest of the girls said they support a little or somewhat (Table 67).Meanwhile, by age group, the proportion of girls who said they very much support the banning was higher among girls aged 13-15 (40.3%) than among girls aged 16-19 (37.6%) and aged 20-25 (32.3%). However, the proportion of girls who commented that they do not support the banning was higher among girls aged 13-15 (29.1%) than among girls aged 16-19 (26.7%). Meanwhile, 31.2% of girls aged 20-25 do not support the banning which was only slightly lower than the percentage of those in this age group who very much support the banning (32.4%). As many as 34.2% of girls by all age groups combined support a little or somewhat a ban on tobacco sponsorships. (Table 68).

Generally, the FGD found that both in the urban and rural area there were less support for policies to control sponsorship by tobacco companies. The study suggests a high dependency on and gratitude to tobacco industry's funding of events. Most girls were of the opinion that sporting or music events that are organized or sponsored by the tobacco companies are usually more attractive than those that are not. When asked ***"How much do you support tobacco control policies such as policies on tobacco companies' advertisement and sponsorship?,*** the participants responded:

- *"But that's impossible ... if it's prohibited then there will no longer be any football games … most football games are funded by cigarette companies, right?" (Junior High School student in the urban area)*
- *"Depends on what band they sponsor... if it's Ungu (a well-known Indonesian music band), than that's (the sponsorship) ok." (Junior High School student in the rural area)*
- *"When we organize an event we usually ask for sponsorships … sport ads are mostly sponsored by cigarette companies" (High school student in the urban area)*
- *"Don't… it's ok to prohibit smoking ... but don't ever prohibit cigarette companies' funding … because then we would not have promotions (of their events) ... events would not happen without sponsorship … we have limited funding …. and sponsorships by cigarette companies are usually huge" (University/College student in the urban area)*

- *"If not sponsored by cigarette companies it (event) won't be fun." (High School student in the rural area)*
- *"In my opinion, if banning of advertising and sponsorship is implemented, that would have a negative impact on the nation's economy. If a company is not allowed to advertise or to sponsor, then automatically people will not know about their product and the company could go bankrupt ... and that would decrease income for the country." (High School student in the rural area)*

However, there were also few responses that support the banning of tobacco control sponsorships:

- *"I support it ... because it will have a great impact. There are many music events that are sponsored by cigarette companies. And I observe that there are many children still in Junior High or Elementary School who already smoke. By coincidence … or maybe it has already become a doctrine that music without smoking is not cool … that's why they're sponsored by cigarette companies" (University/College student in the urban area)*

Table 69. Availability of anyone, other than friends or family, offering a free sample of cigarettes to respondent in the last year (by area)

Area	N	Anyone, other than friends or family, offered a free sample of cigarettes in the last year		Total
		Yes	No	
Rural	n	149	1390	1539
	%	9.68	90.32	100
Urban	n	312	1189	1501
	%	20.79	79.21	100
Total	n	461	2579	3040
	%	15.16	84.84	100

χ^2 =71.975; d.f.=1 ;p-value = <0.05

There is a statistically significant relationship between area and status of being offered a free sample of cigarettes.

The percentage of girls who mentioned that they have been offered a free sample of cigarettes by anyone other than their friends or family was significantly higher among girls in the urban area (20.8%) than among girls in the rural area (9.7%) (Table 69).

Table 70. Availability of anyone, other than friends or family, offering a free sample of cigarettes to respondent in the last year (by age)

Age	n	Anyone, other than friends or family, offered a free sample of cigarettes in the last year		Total
		Yes	No	
13-15	n	104	914	1018
	%	10.22	89.78	100
16-19	n	147	865	1012
	%	14.53	85.47	100
20-25	n	210	800	1010
	%	20.79	79.21	100
Total	n	461	2579	3040
	%	15.16	84.84	100

χ^2 =44.561; d.f.=2 ;p-value = <0.05

The survey found that there were, in fact, respondents aged 13-15 (10.2%) and aged 16-19 (14.5%) who reported that they have been offered a free sample of cigarettes by someone other than their friends or family (Table 70). The proportion of respondents who were offered free sample of cigarettes was significantly higher among the older respondents. ($p<0.05$).

Table 71. Noticed competitions or prizes associated with cigarettes in the last year (by area)

Area	N	Noticing competitions or prizes associated with cigarettes in the last year		Total
		Yes	No	
Rural	N	507	1032	1539
	%	32.94	67.06	100
Urban	N	395	1106	1501
	%	26.32	73.68	100
Total	n	902	2138	3040
	%	29.67	70.33	100

χ^2 =15.68; d.f.=1 ;p-value = <0.05

Table 72. Noticed competitions or prizes associated with cigarettes in the last year (by age)

Age	n	Noticing competitions or prizes associated with cigarettes in the last year		Total
		Yes	No	
13-15	n	196	822	1018
	%	19.25	80.75	100
16-19	n	308	704	1012
	%	30.43	69.57	100
20-25	n	398	612	1010
	%	39.41	60.59	100
Total	n	902	2138	3040
	%	29.67	70.33	100

χ^2 = 99.06; d.f.=2 ; p-value = <0.05

There is a statistically significant relationship between area and status of noticing competitions or prizes associated with cigarettes. Significantly more respondents in the rural area (32.9%) than in the urban area (26.3%) said that they have noticed competitions or prizes associated with cigarettes in the last year ($p<0.05$) (Table 71). Similarly, the older respondents were more likely to have noticed competitions or prizes associated with cigarettes in the last year compared to the younger groups (19.2% of girls aged 13-15, 30.4% of girls aged 16-19, and 39.4% of girls aged 20-25). The difference is statistically significant ($p<0.05$) (Table 72).

Table 73. Possession of merchandise with a cigarette brand name or logo on it (by area)

Area	n	Owned merchandise with a cigarette brand name or logo on it		Total
		Yes	No	
Rural	n	151	1388	1539
	%	9.81	90.19	100
Urban	n	171	1330	1501
	%	11.39	88.61	100
Total	n	322	2718	3040
	%	10.59	89.41	100

Table 74. Possession of merchandise with a cigarette brand name or logo on it (by age)

Age	n	Owned merchandise with a cigarette brand name or logo on it		Total
		Yes	No	
13-15	n	88	930	1018
	%	8.64	91.36	100
16-19	n	87	925	1012
	%	8.6	91.4	100
20-25	n	147	863	1010
	%	14.55	85.45	100
Total	n	322	2718	3040
	%	10.59	89.41	100

χ^2 = 3.37; d.f.=1 ; p-value = <0.05

By area combined, as many as 10.6% of respondents reported that they have a hat or t-shirt or any other clothing with a cigarette brand name or logo on it (Table 73). By age group, 8.6% of respondents aged 13-15, 8.6% of respondents aged 16-19, and 14.5% of respondents aged 20-25 said that they have a hat or t-shirt or any other clothing with a cigarette brand name or logo on it (Table 74). There is no statistically significant relationship between age and status of having promo items with cigarette brand logo on it.

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Table 75. Intention to use or wear merchandise with cigarette name or logo on it (by area)

Area	n	Will use or wear something that has a cigarette name or logo on it, like a t-shirt or hat			Total
		No	Yes	Don't know	
Rural	n	1042	171	326	1539
	%	67.71	11.11	21.18	100
Urban	n	905	267	329	1501
	%	60.29	17.79	21.92	100
Total	n	1947	438	655	3040
	%	64.04	14.41	21.55	100

χ^2 =30.225; d.f.=1 ;p-value = <0.05

Table 76. Intention to use or wear merchandise with cigarette name or logo (by age)

Age	n	Will use or wear something that has a cigarette name or logo on it, like a t-shirt or hat			Total
		No	Yes	Don't know	
13 - 15	n	683	78	257	1018
	%	67.09	7.66	25.25	100
16 - 19	n	655	157	200	1012
	%	64.72	15.51	19.76	100
20 - 25	n	609	203	198	1010
	%	60.30	20.10	19.60	100
Total	n	1947	438	655	3040
	%	64.05	14.41	21.55	100

χ^2 =69.208; d.f.=4 ;p-value = <0.05

About 14.4% of respondents by all area combined said that they would definitely use or wear something that has a cigarette name or logo on it. The proportion of those who replied that they would use such items was significantly higher ($p<0.05$) among respondents in the urban area (17.8%) than among respondents in the rural area (11.1%) (Table 75). There is a statistically significant relationship between age and willingness to use promo items with cigarette brand logo on it.

By age group, the proportion of those who said that they would use such promo items increased with age (7.7% respondents aged 13-15, 15.5% respondents aged 16-19, and 20.1% respondents aged 20-25) (Table 76).

Table 77. Frequency of seeing actors smoking when watching TV, videos, or movies (by area)

Area	n	Frequency of seeing actors smoking when watching TV, videos, or movies				Total
		Never	Sometimes	A Lot	Hardly ever watch TV, videos, or movies	
Rural	n	34	657	844	4	1539
	%	2.21	42.69	54.84	0.26	100
Urban	n	88	563	848	2	1501
	%	5.86	37.51	56.5	0.13	100
Total	n	122	1220	1692	6	3040
	%	4.01	40.13	55.66	0.2	100

Table 78. Frequency of seeing actors smoking when watching TV, videos, or movies (by age)

Age	n	Frequency of seeing actors smoking when watching TV, videos, or movies				Total
		Never	Sometimes	A Lot	Hardly ever watch TV, videos, or movies	
13-15	n	34	452	527	5	1018
	%	3.34	44.4	51.77	0.49	100
16-19	n	43	379	589	1	1012
	%	4.25	37.45	58.2	0.1	100
20-25	n	45	389	576	0	1010
	%	4.46	38.51	57.03	0	100
Total	n	122	1220	1692	6	3040
	%	4.01	40.13	55.66	0.2	100

Tables 77 and 78 indicates that more than 50% respondents in urban and rural as well as respondents of all age groups stated that they have seen actors smoking on TV, videos, or movies a lot.

Table 79. Frequency of seeing actors smoking when watching TV, videos, or movies (by status of non/current smoker)

Smoking Status	n	Watching actors who smoked on TV, videos or movies				Total
		Never	Sometimes	Often	Hardly watch TV, videos or movies	
Non smoker	n	116	1142	1560	4	2822
	%	4.11	40.47	55.28	0.14	100
Current smoker	n	6	78	132	2	218
	%	2.75	35.78	60.55	0.92	100
Total	n	122	1220	1692	6	3040
	%	4.01	40.13	55.66	0.20	100

About 60.5% of current smokers said that they often watch actors smoking on TV, videos, or movies (Table 79).

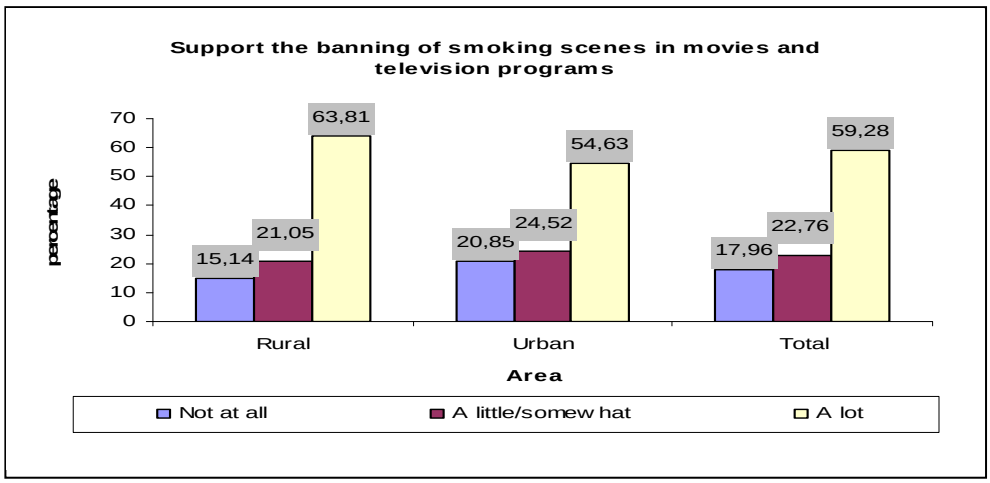
Table 80. Number of respondent's favorite actors who smoke (by area)

Area	n	Number of respondent's favorite actors who smoke					Total
		None	Some	Most or all	Don't have any favorite actors	Don't know	
Rural	n	128	401	538	138	334	1539
	%	8.32	26.06	34.96	8.97	21.7	100
Urban	n	130	477	563	50	281	1501
	%	8.66	31.78	37.51	3.33	18.72	100
Total	n	258	878	1101	188	615	3040
	%	8.49	28.88	36.22	6.18	20.23	100

Table 81. Number of respondent's favorite actors who smoke (by age)

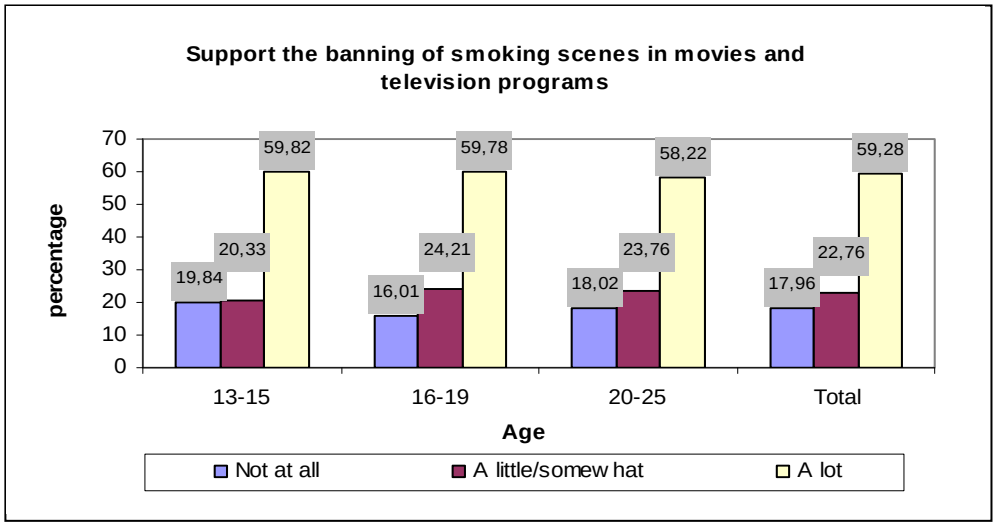
Age	n	Number of respondent's favorite actors smoke					Total
		None	Some	Most or all	Don't have any favorite actors	Don't know	
13-15	n	93	313	311	33	268	1018
	%	9.14	30.75	30.55	3.24	26.33	100
16-19	n	92	275	408	52	185	1012
	%	9.09	27.17	40.32	5.14	18.28	100
20-25	n	73	290	382	103	162	1010
	%	7.23	28.71	37.82	10.2	16.04	100
Total	n	258	878	1101	188	615	3040
	%	8.49	28.88	36.22	6.18	20.23	100

The survey indicates that the proportion of respondents who said that most or all of their favorite actors smoke takes the highest percentage, both in the rural area (35%) and in the urban area (37.5%) (Table 80). Meanwhile by age group, respondents who said that most or all of their favorite actors smoke also accounted for the highest percentage (36.2%). The proportion of respondents who said that most or all of their favorite actors smoke was higher among girls aged 16-19 (40.3%) than among girls aged 13-15 (30.5%) and girls aged 20-25 (37.8%) (Table 81).



χ^2 = 28.613; d.f.=2; p-value= p<0.05

Figure 12. Distribution of number of respondents who support banning smoking in movies and television programs



χ^2 = 8.456; d.f.=4; p-value= p<0.05

Figure 13. Distribution of number of respondents who support banning smoking in movies and television programs

In the rural area, most girls (63.8%) stated that they strongly support the banning of smoking scenes in movies and television programs compared to 54.6% among those from the urban areas. The percentage of respondents who said that they do not support at all the banning was higher among urban girls (20.8%) than among rural girls (15.1%) (Figure 12). By age group, 19.8% respondents aged 13-15 do not at all support the banning. This percentage is slightly higher than the percentage of girls in age group 16-19 (16%) and in age group 20-25 (18.%) who also said they do not support the banning (Figure 13).

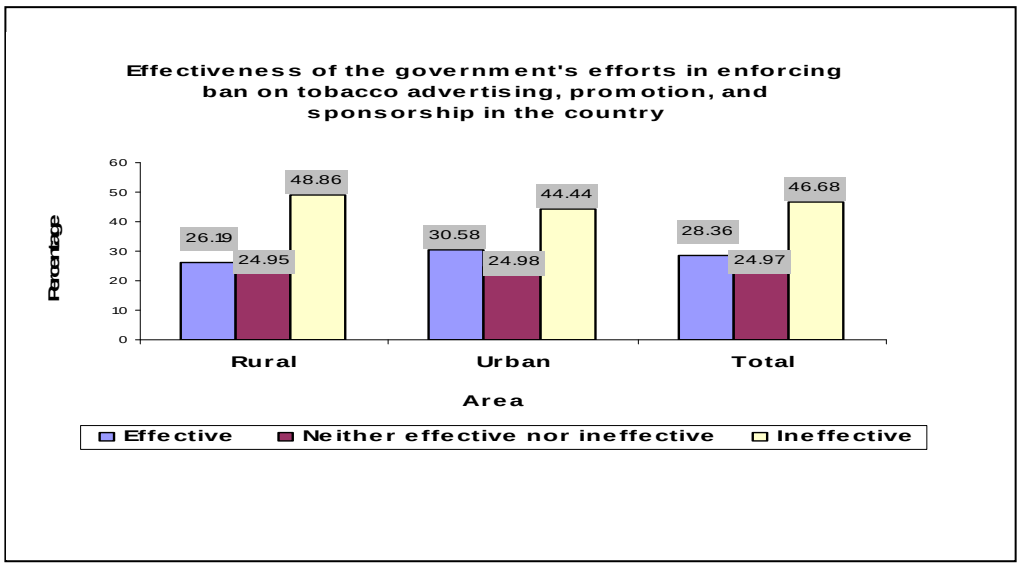


Figure 14. Distribution of number of respondents' opinion on effectiveness of government's effort in enforcing ban on tobacco advertising promotion and sponsorship in the country by area

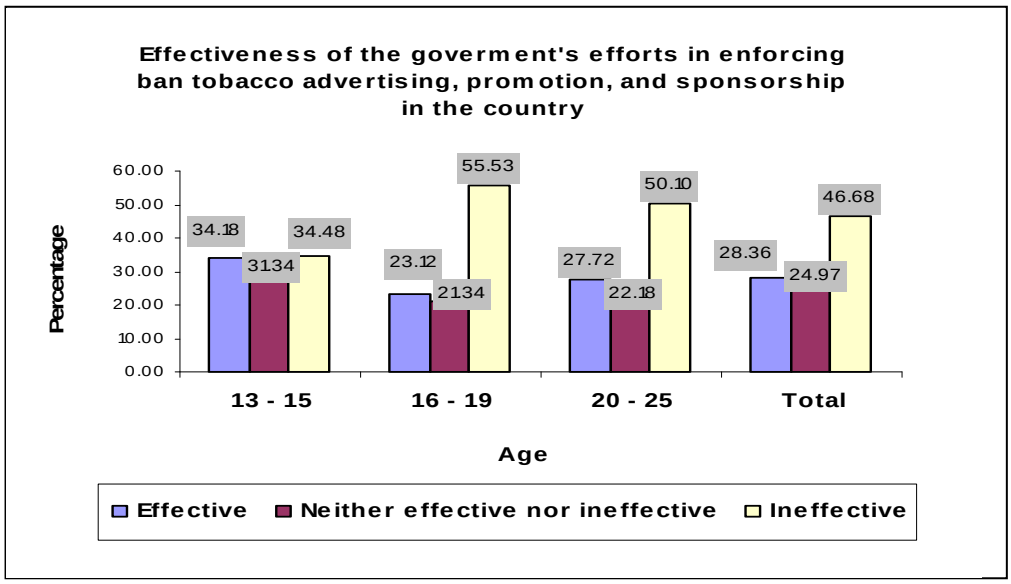


Figure 15. Distribution of number of respondents' opinion on effectiveness of government's effort in enforcing ban on tobacco advertising, promotion and sponsorship in the country by age

According to the Governmental Regulation No. 19/2003 on Protection Against Health Effects of Smoking, cigarette advertisements and promotions are allowed in the electronic, printed and outdoor media; this also applies to activities. The advertisement content must not: encourage or persuade people to smoke; describe or recommend people that smoking is beneficial to health; show cigarette packages; cigarettes or someone smoking; focus or have pictures and/or writings of children, teenagers or pregnant women; display brand that specifically says that the product is a cigarette; or conflict with social norms. According to this study, the greatest proportion of

respondents in the rural area (48.9%) and respondents in the urban area (44.4%) commented that the government effort in enforcing ban on tobacco advertising, promotion and sponsorship in the country was ineffective (Figure 14). The percentage of respondents who said that the government effort in enforcing a ban on tobacco advertising, promotion and sponsorship in the country was ineffective was higher among girls aged 16-19 (55.5%) than among girls aged 13-15 (34.5%) and girls aged 20-25 (50.1%) (Figure 15).

Table 82. Opinion on sanction on tobacco companies that violate ban on advertising, promotion and sponsorship (by area)

Area	n	Sanction on tobacco companies that violate ban on advertising, promotion and sponsorship				Total
		Heavy penalty placed on tobacco industry	Withdraw license to operate	Relevant government agencies should be held responsible	Others	
Rural	n	1211	1159	1257	14	3641
	%	78.69	75.31	81.68	0.91	236.59
Urban	n	1181	1063	1315	1	3560
	%	78.68	70.82	87.61	0.07	237.18
Total	n	2392	2222	2572	15	7201
	%	78.68	73.09	84.61	0.49	236.87

Table 83. Opinion on sanction on tobacco companies that violate ban on advertising, promotion and sponsorship (by age)

Age	n	Sanction on tobacco companies that violate ban on advertising, promotion and sponsorship				Total
		Heavy penalty placed on tobacco industry	Withdraw license to operate	Relevant government agencies should be held responsible	Others	
13-15	n	796	714	814	10	2334
	%	78.19	70.14	79.96	0.98	229.27
16-19	n	784	738	872	3	2397
	%	77.47	72.92	86.17	0.3	236.86
20-25	n	812	770	886	2	2470
	%	80.4	76.24	87.72	0.2	244.56
Total	n	2392	2222	2572	15	7201
	%	78.68	73.09	84.61	0.49	236.87

Although by all area combined, 78% respondents think that heavy penalty should be placed on tobacco industry, there were more respondents (84.6%) who suggested that relevant government agencies be held responsible (Table 82). By age group, the percentage of respondents who said that tobacco industry license to operate should be withdrawn and who said that relevant government agencies should be held responsible increased with age (Table 83).

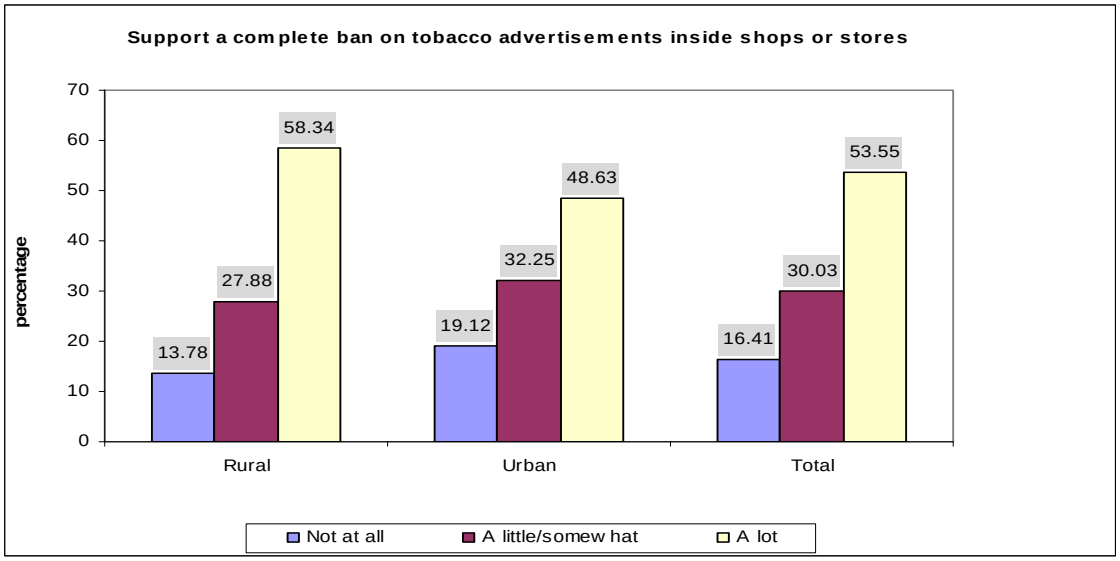


Figure16. Distribution of respondent's support for a complete ban on tobacco advertisements inside shops or stores by area

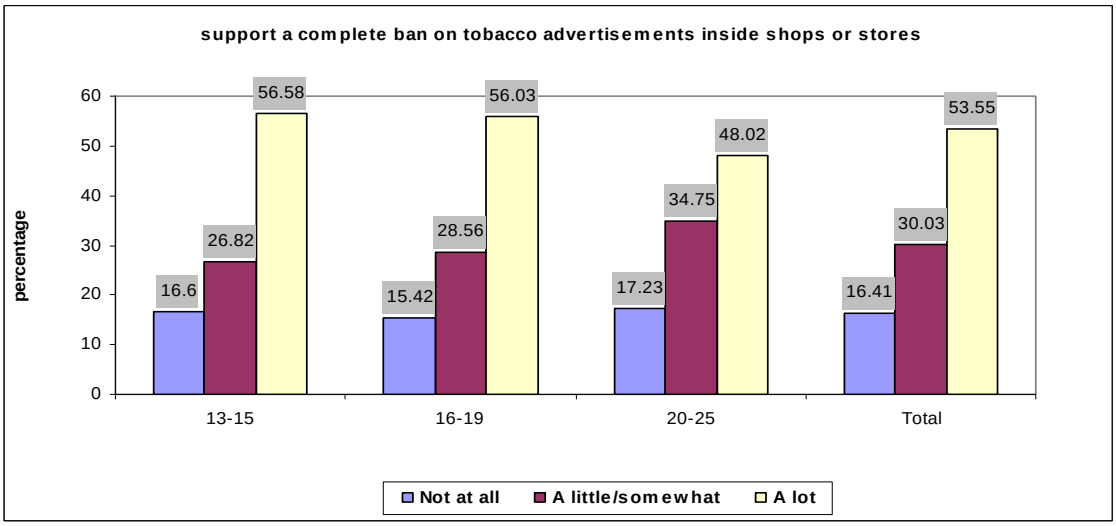


Figure 17. Distribution of respondent's support to a complete ban on tobacco advertisements inside shops or stores by age

By all age groups combined, the percentage of respondents who strongly supported a complete ban on displays of cigarettes inside shops or stores was above 50%. About 13.8% of respondents in the rural area and 19.1% of respondents in the urban area did not at all support the complete ban (Figure 16). By age groups, the percentage of respondents who did not support at all the complete

ban was higher among girls aged 20-25 (17.23%) than among girls aged 13-15 (16.6%) and those aged 16-19 (15.4%) (Figure17).

ii. Multivariate Analysis of Factors Related to Current Smoking

Material and Methods

Bivariate analyses were computed to determine the relationship between female smoking, and personal (knowledge of smoking-related diseases, attitudes and beliefs about smoking) and socio-cultural factors (such as exposure to cigarette advertising, peer smoking, parent smoking, offered free cigarette). Thirteen variables were found to be significantly associated with current smoking status. The list of predictor variables and coding are shown in Table 84a. A binary logistic regression analysis was carried out to determine which variables significantly predicted smoking among the girls and young women. All variables were entered into the logistic regression model. The logistic regression coefficients were used to estimate odds ratios for each of the independent variables in the model.

Table 84a: Coding of predictor variables

Predictor variable	Coding (dichotomy)
Personal factors	
1. Knowledge of smoking-related diseases	**High = 0; Low/moderate = 1**
2. Overall opinion on smoking	**Bad = 0; Good or neutral = 1**
3. Perception about image of smoking	**Negative image = 0; Positive image = 1**
4. Acceptable for young men to smoke	**Disagree = 0; Agree =1**
5. Acceptable for young women to smoke	**Disagree = 0; Agree =1**
6. Most girls my age smoke	**Disagree = 0; Agree =1**
7. Indonesian society approves of smoking	**Disagree=0; Agree=1**
7. Age	**13-19= 0; 20-25= 1**
Socio-cultural factors	
8. At least one member of family smokes	**No =0; Yes =1**
9. Number of closest friends who smoke	**0 friends =0; 1-5 friends = 1**
10. Noticed things that encourage smoking	**No =0; Yes =1**
11. Exposure to cigarette ads at sports and cultural events	**No =0; Yes =1**
12. Offered free cigarette samples	**No =0; Yes =1**
13. Owned merchandise with cigarette brand name	**No =0; Yes =1**

Of the 3,040 female students, we had full information on 3,040, which were available for analysis using stepwise logistic regression. Of these, 218 were current smokers.

Table 84b presents the predictors of smoking from the logistic regression model. Four of the 8 personal factors and 3 of the 5 socio-cultural factors significantly predicted smoking. Girls and young women with an overall opinion that smoking is good or neither bad nor good were 3.8 times more likely to smoke. Females perceived that it is acceptable for females of smoke were 2.7 times more likely to smoke. Those who perceived that most girls of their age smoked were 2.3 times more likely to smoke. The young women were 1.7 times more likely to smoke compared to teenage girls. Other personal factors have no effect on smoking.

Among the significant socio-cultural predictors, peer smoking is a strong predictor of female smoking. Girls and young women who have one or more close friend who smoked were about 8 times more likely to smoke. Females who were exposed to cigarette advertising at sport and community events were 1.8 times more likely to smoke. Females who were offered free cigarettes in the last year 2 times more likely to smoke. Noticing things that encourage smoking and owning a merchandise with a cigarette brand name have no significant effect on smoking. The Nagelkerke R^2 is 0.402 indicating that 40% of the variation in predicting current smoking is explained by the predictors of this logistic regression model.

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Table 84b. Predictors of current smoking among females

Variable	Odds Ratio	95% Confidence Interval (CI)		p-value
Personal factors				
1. Knowledge smoking-related diseases (High[1]) Low/moderate	**0.577**	**.375**	**.889**	**.013***
2. Overall opinion on smoking (Bad[1]) Good/neutral	**3.805**	**2.559**	**5.658**	**.000***
3. Perception about image of smoking (Negative[1]) Positive	**1.371**	**.906**	**2.076**	**.136**
4. Acceptable for young men to smoke (Not-acceptable[1]) Acceptable	**1.433**	**.970**	**2.119**	**.071**
5. Acceptable for young women to smoke (Not-acceptable[1]) Acceptable	**2.771**	**1.802**	**4.261**	**.000***
6. Most girls my age smoke (Disagree[1]) Agree	**2.332**	**1.644**	**3.309**	**.000***
7. Indonesian society approves of smoking	**1.429**	**1.020**	**2.003**	**.038***
8. Age (13-15 years old[1]) 16 -25	**1.717**	**1.221**	**2.414**	**.002***
Socio-cultural factors				
9. Number of closest friends who smoke	**7.721**	**4.730**	**12.605**	**.000***

(None[1] 1-5				
10.Noticed things that encourage smoking (Never[1]) Once in a while/often	**1.222**	**.796**	**1.875**	**.360**
11. Exposure to cigarette ads at sports and community events (Never[1]) Sometimes/a lot	**1.842**	**1.135**	**2.990**	**.013***
12. Offered free cigarette samples (No[1]) Yes	**2.028**	**1.426**	**2.884**	**.000***
13. Owned merchandise with cigarette brand name (No[1]) Yes	**0.666**	**.403**	**1.101**	**.113**

[1] Reference category * Statistically significant

c. Ban on Tobacco Sales to Minors

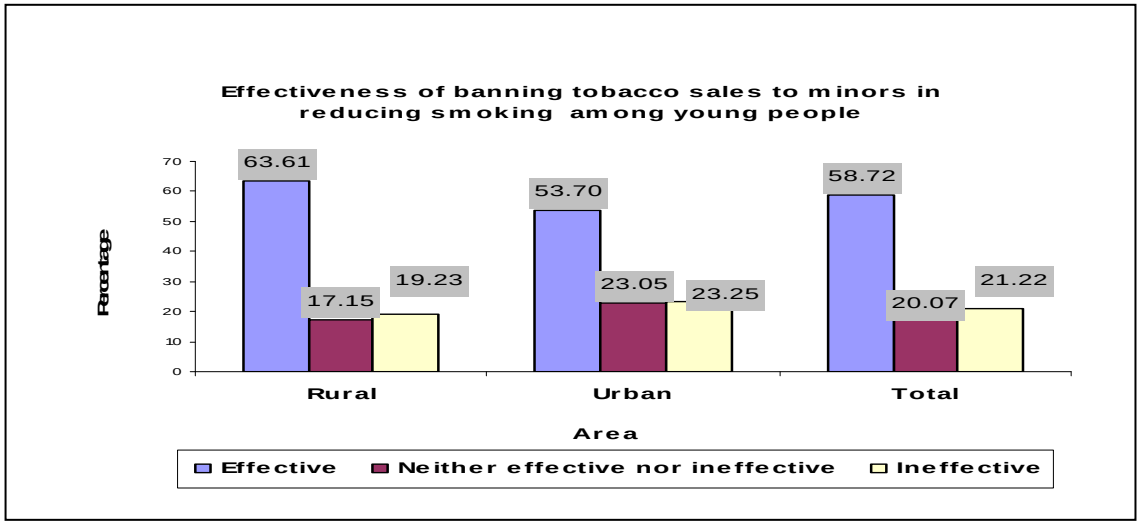

Figure 18. Distribution of number of respondents' opinion on effectiveness of enforcing ban on tobacco sales to minors in reducing smoking among young people (by area)

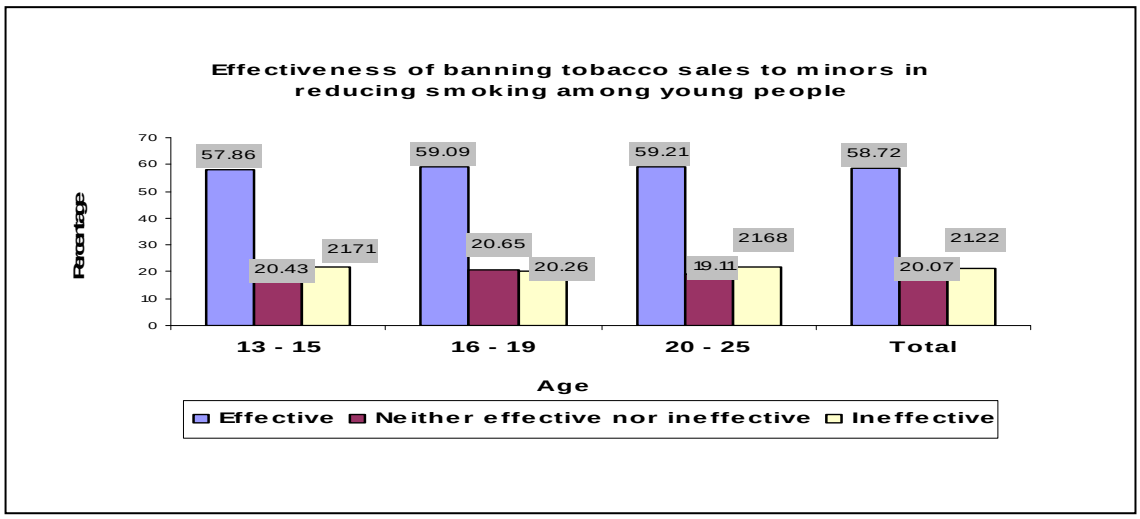

Figure 19. Distribution of number of respondents' opinion on effectiveness of enforcing ban on tobacco sales to minors in reducing smoking among young people (by age)

When respondents were asked whether they think that banning tobacco sales to minors would be effective in reducing smoking among young people, the majority of respondents in the rural (63.6%) and in the urban (53.7%) areas commented that it would be effective (Figure 18). By age, as many as 58% of respondents aged 13-15, 59.1% of respondents aged 16-19, and 59.2% of respondents aged 20-25 said banning would be effective (Figure 19).

d. Smoking Ban in Public Places

More than 50% of respondents in both the rural and the urban areas said that smoking should not be allowed at all in all indoors public places. However, in the urban area only 43% of respondents said that smoking should not be allowed at all in indoor areas of workplace while 55.8% of respondents said that smoking should be allowed in some indoor areas in their workplace. About 56.4% of respondents in the rural area and 51.2% of respondents in the urban area stated that smoking should be allowed in all indoor areas such as bars, pubs and discos (Table 85).

Table 85. Opinion on smoking ban in designated areas (by area)

Area	Smoking should not be allowed at all		Smoking is allowed in some indoors area		Smoking allowed in all indoors area	
	Urban	Rural	Urban	Rural	Urban	Rural
Hospital	79.8%	90.1%	19.8%	9.2%	0.4%	0.6%
Workplace	43.0%	50.4%	55.8%	47.4%	1.2%	2.1%
Religious Place indoor	88.3%	93.6%	10.4%	4.4%	1.3%	2.1%
Religious Place outdoor	64.8%	64.1%	27.6%	24.3%	7.6%	11.6%
Campus/school	63.0%	76.2%	32.8%	21.4%	4.2%	2.4%
Air-conditioned restaurants and other places	69.0%	78.9%	29.2%	15.9%	1.9%	5.1%

Non AC restaurants and other places	**31.8%**	**46.9%**	**49.8%**	**34.4%**	**18.4%**	**18.7%**
Public transportation	**64.4%**	**64.4%**	**13.9%**	**10.5%**	**21.8%**	**25.1%**
Bar, pub, disco	**16.5%**	**22.4%**	**32.4%**	**21.2%**	**51.2%**	**56.4%**

Table 86. Opinion on the effectiveness of enforcement of smoking bans in public areas by the government (by age)

Age	n	Effectiveness of enforcement of smoking bans in public area by the government					Total
		Very Effective	Effective	Neither effective nor ineffective	Ineffective	Very ineffective	
13 - 15	n	210	196	470	107	35	1018
	%	20.63	19.25	46.17	10.51	3.44	100
16 - 19	n	184	213	446	137	32	1012
	%	18.18	21.05	44.07	13.54	3.16	100
20 - 25	n	188	277	312	192	41	1010
	%	18.61	27.43	30.89	19.01	4.06	100
Total	n	582	686	1228	436	108	3040
	%	19.14	22.57	40.39	14.34	3.55	100

By all age groups combined, the majority of respondents said that the government's enforcement of smoking bans in public places was neither effective nor ineffective (40.4%). As many as 14.3% of respondents said that it was ineffective. The percentage of respondents who said that it was ineffective increased with age. Meanwhile, as many as 3.5% respondents said that it was very ineffective (Table 86).

Table 87. Opinion on factors that have prevented the implementation of smoking ban in public places in Indonesia (by area)

Factor	Urban		Rural		Total	
	Frequency	Percent	Frequency	Percent	Frequency	Percent
Lack enforcement	1428	95.14	1398	90.84	2826	92.96
Public awareness is inadequate	1306	87.01	1348	87.59	2654	87.30
Lack of concern of non-smokers about passive smoking	1351	90.01	1316	85.51	2667	87.73
High social acceptability of smoking	1282	85.41	1168	75.89	2450	80.59

Lack of enforcement was the most named factor that has prevented the implementation of the smoking ban in public places in Indonesia both by respondent in the urban (95.1%) and in the rural areas (90.8%). Interestingly, compared to respondents in the urban area (85.4%), there were fewer respondents in the rural area (75.9%) who mentioned high acceptability of smoking as a factor (Table 87).

Table 88. Opinion on factors that have prevented the implementation of smoking ban in public places in Indonesia (by age)

Age	n	Factors that have prevented the implementation of smoking ban in public places in Indonesia				Total
		Lack enforcement	Public awareness is inadequate	Lack of concern of non-smokers about passive smoking	High social acceptability of smoking	
13 - 15	n	902	883	853	787	3425
	%	26.34	25.78	24.91	22.98	100
16 - 19	n	969	876	887	827	3559
	%	27.23	24.61	24.92	23.24	100
20 - 25	N	955	895	927	836	3613
	%	26.43	24.77	25.66	23.14	100
Total	N	2826	2654	2667	2450	10597
	%	26.67	25.04	25.17	23.12	100

Meanwhile by age groups, the percentage of respondents who said lack of enforcement as a factor was higher in age group 16-19 (27.2%) then in age group 13-15 (26.3%) and age group 20-25 (26.4%) (Table 88).

Table 89. Opinion on how implementation of smoking ban in public places can be improved (by area)

Improvement approach	Urban		Rural		Total	
	Frequency	Percent	Frequency	Percent	Frequency	Percent
Increase enforcement	1444	96.2	1485	96.49	2929	96.35
Increase public awareness of smoking bans	1457	97.07	1503	97.66	2960	97.37
Educate public about the harms of passive smoking	1460	97.27	1497	97.27	2957	97.27

In the rural area, the most suggested initiative to improve the implementation of smoking ban in public places was increase public awareness of smoking bans (97.6%). While in the urban area the most suggested recommendation was to educate the public about the harms of passive smoking (97.3%) (Table 89). All these efforts were rated as highly important.

Table 90. Opinion on how implementation of smoking ban in public places can be improved (by age)

Age	n	How implementation of smoking ban in public places can be improved			Total
		Increase enforcement	Increase public awareness of smoking bans	Educate public about the harms of passive smoking	
13 - 15	n	958	980	976	2914
	%	32.88	33.63	33.49	100
16 - 19	n	988	990	993	2971
	%	33.25	33.32	33.42	100
20 - 25	n	983	990	988	2961
	%	33.20	33.43	33.37	100
Total	n	2929	2960	2957	8846
	%	33.11	33.46	33.43	100

Table 91. Opinion on the need for government to regulate a smoking ban in public places (by area)

Agreement	Urban		Rural	
	Frequency	Percent	Frequency	Percent
Yes	1359	90.54	1267	82.33
No	142	9.46	272	17.67
Total	1501	100	1539	100

The majority of respondents in the urban area (90.5%) and in rural area (82.3%) think that the government should regulate policy on smoking ban in public places if there is yet a policy on it (Table 91).

Table 92. Opinion on the need for government to regulate a smoking ban in public places (by age)

Age	n	Need for government to regulate a smoking ban in public place		Total
		Yes	No	
13 – 15	n	829	189	1018
	%	81.43	18.57	100
16 – 19	n	891	121	1012
	%	88.04	11.96	100
20 – 25	n	906	104	1010
	%	89.70	10.30	100
Total	n	2626	414	3040
	%	86.38	13.62	100

By age group, the percentage of respondents that commented that the government needs to regulate a smoking ban in public places increased with age (81.4% of respondents aged 13-15, 88.1% of respondents aged 16-19, and 89.7% of respondents aged 20-25) (Table 92).

The FGD found that the awareness of the students, both in Junior High School and High School as well as in the University or College, about tobacco control policy and regulation was still low. In general, respondents were aware of policies but could not recall them. However, when prompted, they said that they know. When informed of policies such as smoking ban, sales to minors, and tobacco advertisement and promotion, respondents said that they have heard of it. By and large, their knowledge about tobacco control policy was limited to smoke-free policy in public places and indoor facilities. They also knew about the imposition of sanction in case of violation. The FGD found that respondents in Junior High School (aged 13-15) in Jakarta generally have better knowledge about the government's policy on tobacco control because they attended a class (PLKJ or Pendidikan Lingkungan Kehidupan Jakarta/ Education on Jakarta's life and environment) that addresses issues about smoking. According to the respondents, most people have not yet fully complied with the policies and regulations. Almost all respondents said that they still often see

people smoking in smoke-free areas. Several respondents were of the opinion that the main factor behind this condition was the lack of law enforcement by the government especially in giving warnings and sanctions to people who violate the law, as well as providing good example to the public. According to the respondents, they still see law-enforcers who smoke in public areas. When asked ***"Do you know any tobacco control policy or law?",*** the participants said:

- *"Yes, from books .. the PLKJ book, Law 400… " (Junior High School student in the urban area)*
- *"(No smoking) in the workplace … "(Junior High School student in the urban area)*
- *"Smoking is not allowed in public places and in public transportation" (Junior High School student in the urban area)*
- *"Smoking is not allowed anywhere we feel like it … we cannot smoke in the streets, otherwise we can get fined" (Junior High School student in the urban area)*
- *"I know from TV … and the news " (Junior High School student in the urban area)*
- *"If I'm not mistaken, there was something on TV about a regulation that smoking can only be done in special places" (Junior High School student in the urban area)*
- *"There's also a regulation that below-aged students are not allowed to smoke. Pregnant women are not allowed to smoke as well" (Junior High School student in the urban area)*
- *"Yes, about smoking area ... smoking is not allowed in whatever place we want … there's a special place for that" (High School student in the urban area)*
- *"It's not allowed to smoke in indoor places"(High School student in the urban area)*
- *"Only by word of mouth that tobacco is not allowed on campus" (University/College student in the urban area)*
- *"I've never heard of that ... never seen one either" (University/College student in the urban area)*
- *"I've heard once, but I don't know what the regulation says" (University/College student in urban area)*
- *"Smoking in public places will get you fined 50 million rupiah or 3 months jail" (University/College student in the urban area)*
- *"I've heard once" (Junior high School student in the urban area)*
- *"Sutiyoso (Former Jakarta Governor) ... he commented on smoking in air-conditioned room … so you can't smoke everywhere you feel like it .. there's a special place for that" (High School student in the urban area)*
- *"Yes, once on TV ... I think it was by the government. The person said that there'll be a law about smoking in public transportation. There's already a law about it... I was happy ... but it turns out it's not implemented. If I'm not mistaken, there was an ad about it once only … when the law was first introduced" (High School student in the urban area)*
- *"I've heard once that those smoking in public places will be fined" (University/College student in the urban area)*

Unlike respondents in the urban area, only a few respondents in the rural area knew about tobacco control regulations or policies.

- *"No, I haven't heard about it." (University/College student in the rural area)*
- *"Yes, I've heard. But not formally" (High School student in the rural area)*

- *"I've once heard about a regulation on restriction on smoking in public places. For example, in hospitals. But the regulation is still violated anyway. People still smoke in places where it's clearly not allowed" (University/College student in the rural area)*
- *"Oh, if I'm not mistaken there is a regulation that prohibits smoking in public places ... in Jakarta, right? I don't know if it's also implemented in other locations" (University/College student in the rural area)*
- *"I've heard about it but I don't understand it" (High School student in the rural area)*
- *"In Pariaman (city in West Sumatra) there's no regulation about it. Even in hospitals there are people who smoke ... not to mention in the angkot (public minibus). The average male smokes. They don't seem to care where they smoke" (University/College student in the rural area)*
- *"I don't know" (Junior High School student in the rural area)*

Respondents of all age groups generally support policies on tobacco control. However, respondents in universities/colleges considered that the policies have little impact on those who smoke. When asked ***"To what extent do you think are the regulations being adhered to?",*** the participants described their opinion as follows:

Respondents:

- *"It depends on the young people individually. If the teenager is a smoker ... no matter how many regulations there are… they would not have any effect on them. But for people who don't smoke, it might have an effect. Maybe because they've read the regulation … they would get encouraged not to smoke" (University/College student in the rural area)*
- *"About smoking in public places ... that's not effective. What can be done? If someone smokes and then you tell that person not to ... I'm afraid that they'll get mad. But if in air-conditioned rooms or in malls ... there are special rooms for smokers" (University/college student in the urban area)*
- *"Nowadays who would care. There are lots of people who smoke in the streets. Even police officers smoke, don't they? They smoke while controlling the traffic.. . they can get away with it ... they think … I'm a police, who's going to fine me!" (University/College student in the urban area)*
- *"If the government has passed an anti-smoking Law... the law-enforcers should also stop smoking .. but we still see police officers smoke in the streets" (High School student in the urban area)*
- *"There's an impact. But it's useless because the socialization is not intensive" (High School student in the urban area)*
- *"People who smoke won't take notice of such regulations" (Junior High School student in the urban area)*
- *"I know about the sanction … but I don't' think they really work ... they're not implemented" (University/College student in the urban area)*
- *"Here in Bukittinggi (city in West Sumatra) most people smok .. so even though there's a ban … people find it a common thing (to do)" (High School student in the rural area)*

In general, the FGD participants support the government's policy on tobacco control, especially about smoking in public places, smoking in indoor places, and the selling of cigarettes to children under 17 years old. But there are also some respondents who think that despite the tobacco control

regulations, people still do not heed the regulations. When respondents were asked ***"To what extent do you support the regulations?,*** they commented as follows:

- *"I support them... personally I support it... but among the public... not all Indonesian support them" (Junior High School student in the urban)*
- *"I think it's necessary ... through a campaign, together we can make Pariaman (city in West Sumatra) free from smoking" (University/College student in the rural area)*
- *"I very support it" (Junior High School student in the rural area)*
- *"I very much support it because I think it's a danger to the environment" (High School student in the rural area)*
- *"I strongly agree, we all are anti-smoking" (Junior High School student in the rural area)*
- *"I very much support it. I think it would be good if such ban is implemented in West Sumatra … in order to create clean air that is free from smoke" (University/College student in the rural area)*
- *"In my opinion, smoking should be banned ... because people would not heed them anyway. My Dad, for example, when my Mom told him not to smoke, he said … better not eat than not smoke" (Junior High School student in the rural area)*

Regulations and policies on smoking in public places received positive support both from the urban and rural participants in the FGD. When asked ***"Do you support regulations or policies on smoking in public places?",*** the participants said:

- *"Yes, I support it … because it (smoking) disturbs other people ... but not all places have special rooms .. such as in stations .. there are none there yet" (Junior High School student in the urban area)*
- *"I think such policies are quite good because people who smoke in public places annoy other people around them. Another example is smoking in the workplace … that would disturb the concentration of the workers around them" (High school student in the rural area))*
- *"I support it ...because I think smoking disturbs other people … such as at stations or anywhere else … if there's someone who smokes … that could harm other people. Thus, I support it ... so people won't smoke anywhere they feel like it" (Junior High School student in the urban area)*
- *"If such a regulation is implemented, it's going to be useless. In Jakarta, for example, there's a regulation but it's violated anyway. It had better not be made because people and statesmen would violate it anyway and cigarettes would still be distributed" (High School student in the rural area)*
- *"I strongly agree... first to reduce the number of smokers and second to protect passive smokers … and to reduce cigarette smoke" (High School student in the urban area)*

Almost all participants in the FGD support the banning of cigarette selling to minors. When they were asked ***"What about banning of cigarette selling to minors? Do you support it?,*** these were their responses:

- *"I agree... children are the future of the country, we're not the only generation... if their generation is damaged because of smoking... they would be shattered... it's such a pity" (High School student in the urban area)*
- *"I support it... because if children under age smoke... that would jeopardize their education and performance in school" (Junior High School student in the urban area)*

- *"I support it…they're still young children, they don't know anything ... but it's sold to them ... and they don't know about the danger it brings in the future .. they would probably not bother now as long as it tastes good" (High school student in the urban area)*
- *"I very much support it.. it's not appropriate .. children should not know about smoking .. and now they're already contaminated by tobacco poison .. our nations need a healthy generation .. who can run the nation in the future" (University/College student in the urban area)*
- *"Yes .. I feel sorry for the new generation .. it's a shame that children in Elementary School are already smoking" (University/College student in the urban area)*
- *"I support it .. but it's difficult to implement. There should be a regulation such as a sanction or fine on people who sell cigarettes to children. If there's a sanction, nobody would dare to violate it" (University/College student in the urban area)*
- *"In Indomaret (a shop) .. cigarettes are for people above 17 years old" (High School student in the urban area)*
- *"I once saw on the streets .. selling cigarettes to people under 17 years old is forbidden .. but in the implementation .. our government is not strict.. when they see producers selling cigarettes, they keep silent .. because they need those themselves" (High School student in the urban area)*

When asked about the steps to be taken to prevent cigarettes being sold to minors, some respondents answered that the cigarette price should be increased so that children would not afford them and selling single cigarette sticks should be banned because children could still afford to buy a single stick.

Further, when asked whether anti-smoking policies were effective in preventing smoking among young girls and young women, most respondents said that they were still not effective yet as many people still violate the regulations. Below are some selected responses from the participants of the FGDs.

- *"It's effective .. depends on individual's consciousness" (High School student in the rural area)*
- *"It's effective and not effective .. there are people who see the messages and they don't care" (University/College student in the urban area)*
- *"Effective. Now they don't feel the impact but maybe later they will" (University/College student in the urban area)*
- *"It seems to be effective enough if law-enforces do their job" (Junior High School student in the rural area)*
- *"It's not effective yet ... because there are still people who violate them .. and there's lack of facilities .. such as smoking rooms" (Junior High School student in the urban area)*
- *"I don't think it's effective ... it's a waste of money. Such as the big socialization at the Bunderan HI (a strategic place in the main road of Jakarta), it was effective only during that day" (University/College student in the urban area)*
- *"It's not effective. As long as there is a cigarette company, everything is ineffective" (University/College student in the urban area)*
- *"It's not very effective, although it's forbidden, many still smoke in public places" (Junior High school student in the rural area)*
- *"There are still many who smoke in public places despite there being warnings that smoking is not allowed" (University/College student in the urban area)*
- *"There was once, but it didn't work (University/College student in the urban area)*

Participants who answered that policies were ineffective further explained that the ineffectiveness was due to lack of enforcement by the government. When asked ***"Why do you think the policies are ineffective?"*** the participants gave the following replies:

- *"Lack of enforcement by the government" (University/College student in the urban area)*
- *"There were big promises in the beginning .. but now they're being ignored" (University/College student in the urban area)*
- *"Even the apparatus smoke"(High School student in the urban area)*
- *"The regulations should truly be implemented … don't just be a theory. The regulations should be strict"(High School student in the urban area)*
- *"Indonesia needs to be more strict.. if the government could only realize how many foreign companies come to Indonesia to take over our sectors. One of the cigarette companies is owned by a foreigner. This means Indonesia is being slaved by foreigners" (Junior High School student in the rural area)*
- *"They're afraid that labor workers would stage a demonstration .. but if the whole nation decides to ban smoking, nobody would ever dare to stage a demo" (Junior High school student in the urban area)*
- *"The governments perspective is not broad enough .. they never directly tell the smokers .. only through their socializations"(Junior High School student in the urban area)*

The FGD found a variety of responses about the actions that the government should take to prevent smoking uptake and smoking increase among youth in the country. The participants' suggestions are categorized as follows:

Need for a cigarette price increase:

- *"Just increase the price.. then less people would smoke. If now a single cigarette costs Rp 1.000,- increase the price to Rp 4.000,- People will get hesitant .. better buy something else" (Junior High School student in the urban area)*
- *"Increase the price.." (University/College student in the urban area)*

Need for anti-smoking campaigns and socialization:

- *"Socialization in schools by the government and direct socialization to the community about the harm of smoking and other issues" (University/College student in the urban area)*
- *"Anti-smoking organization .. women against tobacco, for example .. and involve celebrities .. usually when we see celebrities we'll get encouraged to follow them" (University/College student in the urban area)*
- *"If we want to do a campaign, we need to begin with the highest level, namely, the government officers. Not just the community" (High School student in the rural area)*
- *"Socialization about the harmful effects, negative effects on women and pregnancy .. maybe then they will come to their senses" (Junior Hugh School student in the urban area)*
- *"Do special news for female smokers where examples can be shown on TV. Especially a printed media that tells about the danger of smoking. Readers will definitely be interested" (Junior Hugh School student in the urban area)*
- *"It would be even better if the government picks students from schools to receive counseling and then help the schools to conduct counseling" (Junior High School student in the urban area)*

Need to implement regulations with strict sanctions

- *"Implement anti-smoking law with strict sanctions" (Junior High School student in the rural area)*
- *"Sanctions" (University/College student in the urban area)*
- *"Enforce the sanctions .. school sanctions should not only apply to students but also to the teachers .. they should become role-models" (Junior High School student in the urban area)*
- *"Do a raid .. if a teenage girl has a cigarette, bring her to the police station" (High School student in the rural area)*
- *"It seems that sanctions in the form of fines will not do it because for people with money it's not a problem" ((University/College student in the urban area)*
- *"Disciplinary actions on media who publishes cigarette ads" (High School students in the rural area)*

Need to ban cigarette companies:

- *"Just close down the cigarette companies" (University/College student in the urban area)*
- *"Don't produce cigarettes"(University/College student in the urban area)*
- *"There's only one best solution: close down cigarette companies. But we do not yet have an alternative on what company we should establish to replace the fiscal income we get from cigarette tax. Or we could try another solution such as how to erase addiction by replacing cigarettes with candies"(High School student in the rural area)*
- *"Don't sell cigarettes to the public and eliminate cigarette companies" (University/College in rural area)*
- *"The government should appeal to reduce the number of cigarette companies so that they will not continue to develop" (Junior Hugh School student in the urban area)*
- *"Don't only consider custom .. but also think about health .. Indonesia should move forward" (University/College student in the urban area)*

When asked for their opinion regarding actions that the participants think would be effective to influence young girls not to smoke, the participants' responses ranged from need for socialization and counseling to enforcement of anti-smoking law as described below.

- *"Give them counseling .. such as to the girls in the boarding schools .. education about the harm of smoking .. but sometimes it's difficult if self-awareness is low" (University/College student in the rural area)*
- *"Socialization about everything about smoking. And don't only do that in the big cities but also in villages because many women smoke because of tradition .. and better focus more on teenage girls" (High School student in the rural area)*
- *"Establish an anti-smoking law … or create a rehab center for smoking addicts" (University student in the urban area)*
- *"I think there should be a smoking ban on teenagers … but the ban really needs to be implemented" (University/college student in the urban area)*
- *"Censor scenes of smoking in movies" (High School student in the urban area)*
- *"The most effective way is to stay away from smoking environments .. that way maybe she will eventually stop smoking" (University/College student in the rural area)*
- *"Smoking control should better start from the closest circle namely the family .. by observing their children's behavior both at home and outside home. Or take disciplinary actions against the media who publish cigarette ads" (High School student in the rural area)*

Table 93. Rule on smoking at respondent's home (by area)

Rule	Urban		Rural	
	Frequency	Percent	Frequency	Percent
Smoking is ALLOWED EVERYWHERE in your home	275	18.32	459	29.82
Smoking is allowed in some places or at some times	666	44.37	707	45.94
Smoking is NEVER allowed ANYWHERE in your home	560	37.31	373	24.24
Total	1501	100	1539	100

Table 94. Rule on smoking at respondent's home (by age)

Age	n	Smoking is ALLOWED EVERYWHERE in your home	Smoking is allowed in some places or at some times	Smoking is NEVER allowed ANYWHERE in your home	Total
13 -15	n	213	480	325	1018
	%	20,92%	47,15%	31,93%	100.00
16 – 19	n	252	451	309	1012
	%	24,90%	44,57%	30,53%	100.00
20 -25	n	269	442	299	1010
	%	26,63%	43,76%	29,60%	100.00

About 37.3% of respondents in the urban area and 24.2% in the rural area stated that smoking was never allowed anywhere in their home (Table 93). Meanwhile, 31.9% of respondents aged 13-15 and 30.5% of respondents aged 16-19 said that smoking was never allowed in their home (Table 94).

Table 95. Frequency of people who smoked inside respondent's home while respondent was present in the past seven days (by area)

Frequency	Urban		Rural	
	Frequency	Percent	Frequency	Percent
Never	483	32.18	289	18.78
Sometimes	701	46.70	799	51.92
Often	317	21.12	451	29.30
Total	1501	100.00	1539	100.00

Table 96. Frequency of people who smoked inside respondent's home while respondent was present in past 7 days (by age)

Age	n	Never	Sometimes	Often	Total
13-15	n	226	526	266	1018
	%	22.20	51.67	26.13	100.00
16-19	n	273	464	275	1012
	%	26.98	45.85	27.17	100.00
20-25	n	273	510	227	1010
	%	27.03	50.50	22.48	100.00

About half of respondents in the urban area (46.7%) and 51.9% of respondents in the rural area stated that sometimes they found a person smoking in their home while the respondent was there (Table 95). Meanwhile, by age group, 26,1% of respondents aged 13-15 said they often had people smoking inside their home while the respondent was present, and 51.7% of respondents said this happened only sometimes (Table 96).

6.6 Opinions on Tobacco Industry

Table 97. Opinion on the contribution of tobacco industry to the national economy (by area)

Contribution to economy	Urban		Rural		Total	
	Frequency	Percent	Frequency	Percent	Frequency	Percent
Contribute nothing	133	8.86	68	4.42	201	6.61
Contribute very little	92	6.13	47	3.05	139	4.57
Contribute somewhat	310	20.65	299	19.43	609	20.03
Contribute a lot	301	20.05	309	20.08	610	20.07
No Idea	665	44.3	816	53.02	1481	48.72
Total	1501	100	1539	100	3040	100.00

Most of the respondents in the rural area (53%) and in the urban area (44.3%) have no idea about the contribution of the tobacco industry to the national economy. In the rural area, 20% of respondents believed that the tobacco industry contributes a lot to the national economy. The percentage of respondents who said that the industry contributes nothing was lower among girls in the rural area (4.4%) than among girls in the urban area (8.9%) (Table 97).

Table 98. Opinion on tobacco industry (by area)

Preference	Urban		Rural		Total	
	Frequency	Percent	Frequency	Percent	Frequency	Percent
I like them a lot	45	3	17	1.1	62	2.04
I like them somewhat	165	10.99	140	9.1	305	10.03
Neither like or dislike	322	21.45	260	16.89	582	19.14
I don't like them somewhat	585	38.97	612	39.77	1197	39.38
I don't like them at all	384	25.58	510	33.14	894	29.41
Total	1501	100	1539	100	3040	100.00

Table 99. Opinion on the tobacco industry (by age)

Age	n	Opinion on tobacco industry					Total
		I like them a lot	I like them somewhat	Neither like or dislike	I don't like them somewhat	I don't like them at all	
13 – 15	n	8	57	153	418	382	1018
	%	0.79	5.60	15.03	41.06	37.52	100
16 - 19	n	13	101	229	367	302	1012
	%	1.28	9.98	22.63	36.26	29.84	100
20 - 25	n	41	147	200	412	210	1010
	%	4.06	14.55	19.80	40.79	20.79	100
Total	n	62	305	582	1197	894	3040
	%	2.04	10.03	19.14	39.38	29.41	100

Most of the respondents in both the rural (39.8%) and the urban areas (39%) said that they do not like the cigarette company somewhat. There were more respondents in the rural area (33.1%) than in urban area (25.6%) who commented that they do not like the cigarette company at all (Table 98).

By age groups, the proportion of respondents who said that they do not like the tobacco industry at all was higher among respondents aged 13-15 (37.5%) than among respondents aged 16-19 (29.8%) and those aged 20-25 (20.8%) (Table 99).

Table 100. Opinion on effectiveness of the tobacco industry's Youth Smoking Prevention Program (YSP) in reducing smoking among young people (by area)

Area	n	Effectiveness of the tobacco industry's Youth Smoking Prevention Program (YSP) in reducing smoking among young people						Total
		Very effective	Effective	Neither effective nor ineffective	Ineffective	Very ineffective	Never heard of YSP	
Rural	n	193	251	341	194	65	495	1539
	%	12.54	16.31	22.16	12.61	4.22	32.16	100
Urban	n	174	299	347	250	55	376	1501
	%	11.59	19.92	23.12	16.66	3.66	25.05	100
Total	n	367	550	688	444	120	871	3040
	%	12.07	18.09	22.63	14.61	3.95	28.65	100

Table 101. Effectiveness of the tobacco industry's Youth Smoking Prevention Program (YSP) in reducing smoking among young people (by age)

Age	n	Effectiveness of the tobacco industry's Youth Smoking Prevention Program (YSP) in reducing smoking among young people						Total
		Very effective	Effective	Neither effective nor ineffective	Ineffective	Very ineffective	Never heard of YSP	
13-15	n	164	178	226	109	37	304	1018
	%	16.11	17.49	22.2	10.71	3.63	29.86	100
16-19	n	83	160	243	137	42	347	1012
	%	8.2	15.81	24.01	13.54	4.15	34.29	100
20-25	n	120	212	219	198	41	220	1010
	%	11.88	20.99	21.68	19.6	4.06	21.78	100
Total	n	367	550	688	444	120	871	3040
	%	12.07	18.09	22.63	14.61	3.95	28.65	100

The greatest proportion of girls in the rural area (36.2%) and girls in the urban area (25%) said that they have never heard of the YSP program. While the second highest percentage by all area combined is the percentage of respondents who said that the program was neither effective nor ineffective (22.6%) (Table 100). By age group, the greatest proportion of respondents said that they have never heard of the YSP (28.6%) and 22.6% found it neither effective nor ineffective. The proportion of girls who have never heard of YSP was higher among girls aged 16-19 (34.3%) than among girls aged 13-15 (29.9%) and among girls aged 20-25 (21.8%). The percentage of girls who thought that the YSP was ineffective increases with age (10.7% of girls aged 13-15, 13.54% of girls aged 16-19, and 19.6% of girls aged 20-25.) (Table 101).

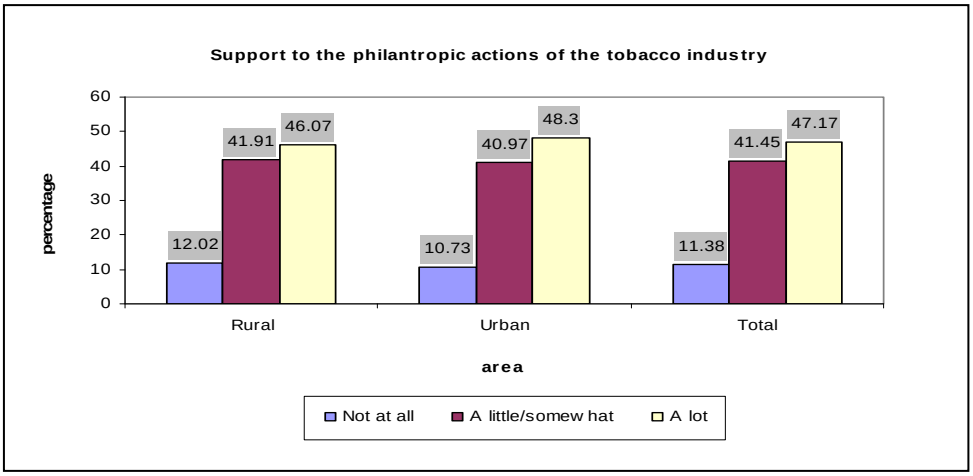

Figure 20. Distribution of number of respondents who support the philanthropic actions of the tobacco industry by area.

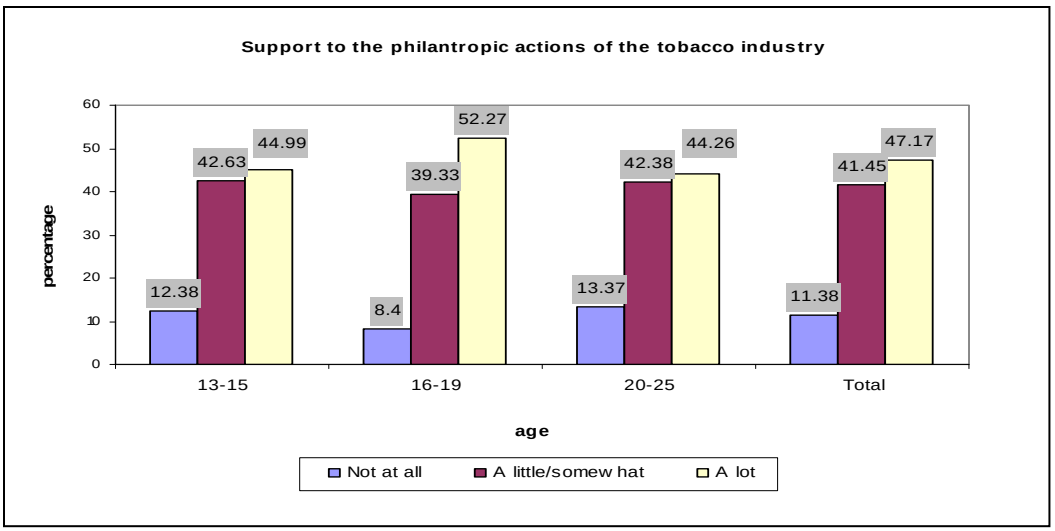

Figure 21. Distribution of number of respondents who support the philanthropic actions of the tobacco industry by age.

By area , the percentage of respondents who very much support the philanthropic actions of the tobacco industry was slightly higher in the urban area (48.3%) than in the rural area (46.1%) (Figure 20). The percentage of respondents that very much support the philanthropic actions of the tobacco industry was higher among girls aged 16-19 (52.3%) than among girls aged 13-15 (45%) and those aged 20-25 (44.3%). The proportion of girls who do not support the philanthropic actions at all was slightly lower among girls aged 13-15 (12.4%) than among girls aged 20-25 (13.4%) (Figure 21)

Table 102. Respondent's opinion on tobacco industry

No	Statement	n	13 - 15		16 - 19		20 - 25		Total		Chi-Square Test
			Agree	Disagree	Agree	Disagree	Agree	Disagree	Agree	Disagree	
A	Cigarette companies lie about the danger of smoking.	n	434	584	534	478	585	425	1553	1487	49.138 (0.000)
		%	42.63	57.37	52.77	47.23	57.92	42.08	51.09	48.91	
B	Cigarette companies try to get people my age to smoke.	n	419	599	555	457	623	387	1597	1443	88.889 (0.000)
		%	41.16	58.84	54.84	45.16	61.68	38.32	52.53	47.47	
C	I would like to see cigarette companies go out of business.	n	602	416	570	442	567	443	1739	1301	2.340 (0.310)
		%	59.14	40.86	56.32	43.68	56.14	43.86	57.20	42.80	
D	Young women are used by tobacco industry to promote their product.	n	225	793	341	671	410	600	976	2064	81.294 (0.000)
		%	22.10	77.90	33.70	66.30	40.59	59.41	32.11	67.89	
E	Tobacco companies do good things for the community.	n	263	755	324	688	370	640	957	2083	27.610 (0.000)
		%	25.83	74.17	32.02	67.98	36.63	63.37	31.48	68.52	

The percentage of respondents who agreed with the statement that cigarette companies lie about the danger of smoking increased with age (42.6% of respondent aged 13-15, 52.8% of respondents aged 16-17, and 57.9% of respondents aged 20-25). The older the age group the greater the percentage of respondents who agreed that cigarette companies try to target people their age and that tobacco companies do good things for the community. By all age groups combined, as many as 57.2% respondents said that they would like to see cigarette companies go out of business (Table 102).

6.7. Exposure to Anti-smoking Messages

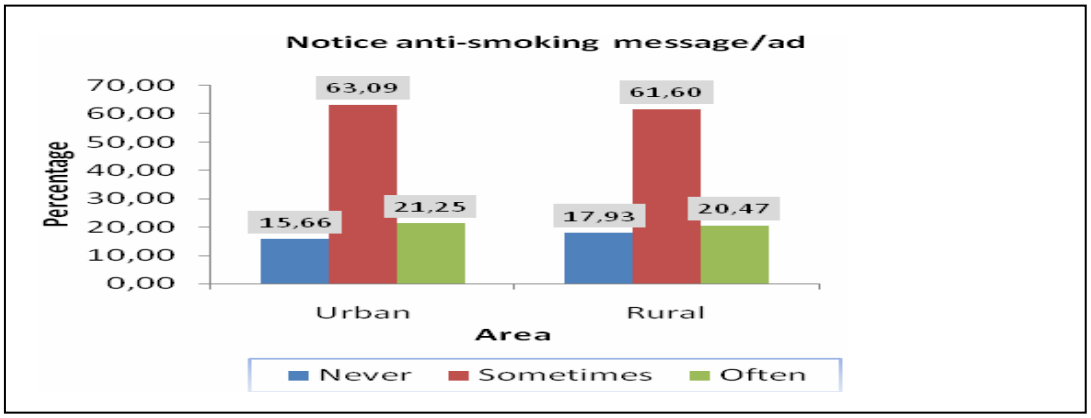

Figure 22. Distribution of number of respondents who noticed anti-smoking message/ad in past 6 mos by area

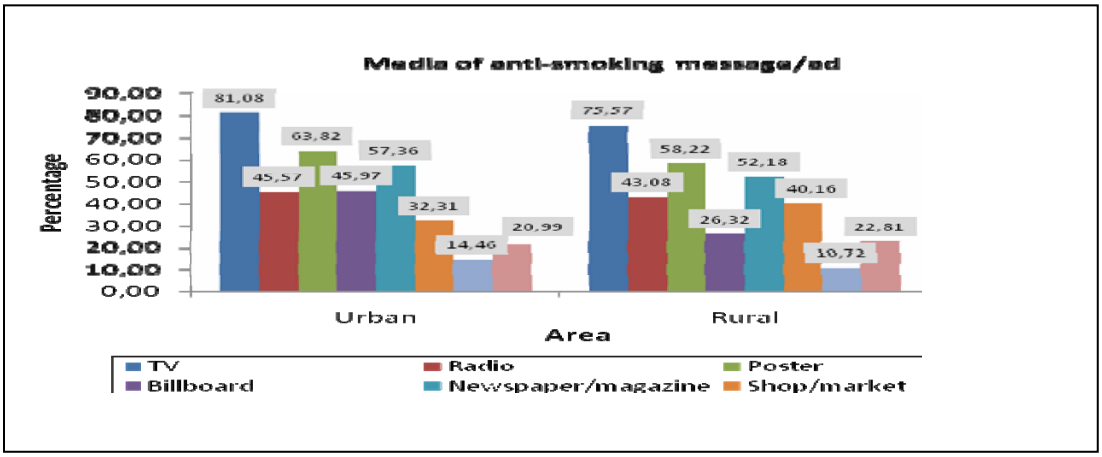

Figure 23. Type of media where respondents noticed anti-smoking message/ad in past 6 months by area

Most respondents in the urban area (63.1%) and in the rural area (61.6%) said that they sometimes notice an anti-smoking message during the past six months (Figure 22). When asked about which media did they see the message, television was the most mentioned media both in the urban (81.1%) and in the rural areas (75.6%), while poster was the second most mentioned both in urban area (63.8%) and in rural area (58.2%) (Figure 23).

Meanwhile, according to the qualitative research, quite a number of respondents have seen or heard or were aware of anti-smoking messages or ads. A number of respondents in the FGD have perceived health warnings on cigarette packs as an anti-smoking message. When asked how often they have seen an anti-smoking message, almost all respondents answered that they have far more often seen cigarette ads and promotion than anti-smoking messages or ads. Some groups even could not spontaneously mention any kind of anti-smoking messages. Anti-smoking messages and ads were considered less attractive and their influence was regarded minimal. The mass media's role in broadcasting anti-smoking messages was also considered minimal. In fact, respondents found the state-run Television (TVRI) as the only TV station that is broadcasting anti-smoking messages/ads. Meanwhile, according to respondents, private-run TV stations are broadcasting anti-smoking messages in the form of health warnings of cigarette ads that they are displaying. However, there was one group with respondents aged 20-25 in the urban area and one group with respondents aged 16-19 in the rural area who reported that they have never seen any anti-smoking messages/ads. When participants were asked ***"How often do you see anti-smoking messages or ads?,*** they replied:

- *"I've never seen an anti-smoking message or ad but I've seen a lot of cigarette ads.." (High School student in the rural area)*
- *"In the ratio of 1 to 100 .,. 100 for cigarette ad and one for anti-smoking ad ... but there are health warnings on cigarette packs ... so why then are cigarettes still being sold?" (High School student in the rural area)*
- *"Hardly ever ... they, instead, entice us to smoke." (Junior High School student in the rural area)*
- *"Rarely … mostly I see cigarette ads … not anti-smoking ads" (Junior High School student in the rural area)*

- *"Oh... smoking? … I think there was one . .. Fauzi Bowo (Jakarta Governor) ... when he was busy campaigning for governor ... he's very anti-smoking." (High School student in the urban area)*
- *"Often, every time I see a cigarette pack." (University/college student in the rural area)*
- *"There are cigarette ads ... but there don't seem to be any restrictions on smoking" (University/college student in the urban area)*
- *"I've seen some in other countries, but I have never seen one here in Indonesia." (University student in the urban area)*
- *"I live in a religious neighborhood. Every Sunday there is house to house socialization ... and they bring a proposal … inside there are pictures of smoking addicts who have become victims. There are pictures of a huge uterus. When directly exposed to things like that … that can really move someone" (Junior High School student in the urban area)*
- *"Yes .. yes, I've heard about it." (Junior High School student in the urban area)*

When further asked ***"Where did you see an anti-smoking ad or message?",*** the participants responded:

- *"Sometimes there are some on TVRI (state-run TV)" (Junior High School student in the urban area)*
- *"On the streets ... anti-smoking messages" (University student in the urban area)*
- *"Not that often on TV, there are more in the form of stickers... "(University student in the urban area)*
- *"No smoking area ... and when I go to the cinema ... there's usually a short ad (before the movie begins) … stay away from smoking and drugs."(University student in the urban area)*
- *"I once attended a course by PMI (Indonesian Red Cross) but it wasn't so clear." (Junior High School student in the urban area)*
- *"On TV, Gudang Garam ... smoking can cause cancer, hypertension, heart attack, and complications to pregnancy"(Junior High School student in the urban area)*
- *"We can find many on banners … on the streets" (University/college student in the rural area)*
- *"There are none on television ... there are some in schools ... but that also happens just once in a while." (University/college student in the rural area)*
- *"There are many in the form of posters" (University/college student in the rural area)*
- *"Yes, on TV, banners, billboards, hospitals ... the administration room in our school has a poster on all the dangerous materials in a cigarette ... through e-mails." (Junior High School student in the urban area)*
- *"Yes… on cigarette packs" (High School student in the urban area)*

Of all the anti-smoking messages and health warnings on cigarette packs that they have seen, the respondents found that the messages do not have enough influential impact on smokers. Almost all groups stated that the awareness to stop smoking should come from within (self-awareness). It was also found that health warnings on cigarette packs would not make a person want to stop smoking. There were only a few respondents who thought that health warnings have an impact on people such as on females and pregnant women. When participants were asked ***"Do you think that anti-smoking messages or ads can discourage smoking among youth, young girls, and women?***, these were their responses:

- *"No... there clearly are warnings on cigarette packs ... still they don't have any effects." (High school student in the urban area)*

- *“Not yet… very …very little” (High School student in the rural area)*
- *“All that actually depends on one’s willingness. Whoever is talking … whatever the ad ... that will not affect young girls not to smoke. It all depends on one’s drive. Social environment also influences smoking behavior” (University/college student in the rural area)*
- *“Those who want to smoke will keep on smoking ... no matter what the warnings ... they will still smoke ... so that’s not effective.” (University/college student in the rural area)*
- *“Well … I don’t think it’s effective… they’re just displays … it’s just an ad ... so what, huh…? ... like that ... those who smoke will keep on smoking, won’t they? If a heavy smoker has experience the consequences and then he intends to quit ... then maybe he can. People will realize the bad impact only if they have experienced it … oh, my kids are like this because I smoke! … usually it’s like that .. They get the impact first and then they stop smoking. But those who haven’t got the impact … nothing wrong is happening to me ... why should I stop?” (University/college student in the urban area)*
- *“If a person is addicted, it might be more difficult to stop… but for a person who smoke only once in a while, it might have an effect” (Junior High School student in the rural area)*
- *"No, it depends on each individual” (Junior High school student in the urban area)*
- *"It won’t be noticed ... they see it and that’s it … not effective ... most people who are addicted won’t be bothered by it” (Junior High School student in the urban area)*
- *"If one has not experienced any impact from smoking ... ah well, that’s just some writings ... no effect” (University/College student in the urban area)*
- *“It doesn’t have any effect ... giving warnings that smoking can cause all that is just a waste , in fact, cigarettes are still being produced. As long as cigarette ads exist … that (the anti-smoking messages) won’t discourage young girls from smoking”(High School student in the rural area)*
- *"No … everything must come from within”(High School student in the urban area)*
- *“In the ads ... there’s a suggestion that smoking can harm pregnancy… but it’s not a prohibition ... it’s just a suggestion ... so young people are not that affected by it … so it has not impact.” (High School Student in the rural area)*
- *“(depends on) One’s self-awareness .. ”(High School student in the urban area)*
- *“It may have an impact because I’m really anti-smoking” (Junior High School student in the rural area)*
- *“It won’t stop one from smoking. It will only cause one to smoke less” (High school student in the urban area)*
- *"It’s ordinary ... it only attracts people a little to stop (smoking)" (High School student in the urban area)*
- *“When I first saw it, I voiced a protest to my parents … Why are they doing ads like that while, in fact, the factories (tobacco factory) keep on going (producing)? My parents told me that the tobacco factory has a lot of workers. So if it’s eliminated, it will add the number of jobless people in Indonesia. In the end, I could understand. It means that self-awareness matters” (High School student in the urban area)*

CONCLUSIONS AND RECOMMENDATIONS

7.1 Conclusions

1. The extent of smoking and smoking behavior

- **A vast majority of the respondents have never smoked** (79.7%). The girls aged 13 to 15 represent the highest percentage (86.2%) for those who have never smoked. Yet, 16.5% of girls in the rural area and 24.2% of girls in the urban area have ever smoked a cigarette.

- **20.3% of total respondents have ever smoked.** With approximately ± 4.4% margin of error, the percentage could possibly range from 15.9% to 24.7%. This confirms the findings of GYTS (2006) that showed 15.5% of female respondents have ever smoked. Moreover, we found that **17.2% of urban respondents within the 13-15 age group have ever smoked.** This means that the percentage of those who have ever smoked a cigarette is 17.2% ± 4.4% or between 12.8% and 21.6%. These results are consistent with GYTS (2001) data which showed that 18.8% of female students aged 13-15 in Jakarta have ever smoked.

- **Rate of current smokers is higher among urban (5.8%) respondents than among rural (1%) respondents.** The rate of smoking is significantly higher (3.4%) among those 20-25 years of age compared to the younger respondents aged 16-19 (1.9%) and aged 13-15 (1.4%).

- There is a significance correlation ($p<0.05$) between status of current smoker and thought of risk from health warnings on cigarette packs. The health warnings tend to have little impact on those who are current smokers. Meanwhile, for those who are not smokers the health warnings have a great impact.

- **Most respondents have a negative opinion about female smoker and they think smoking is very bad.** The research found a significant correlation ($p<0.05$) between the opinion of smoking and status of being a smoker/non-smoker. Girls who smoke tend to have a more positive opinion about smoking.

- **Most girls had their first cigarette before the age of 15.** The majority of respondents in the rural areas had their first try before the age of 10 while in the urban area, most of the girls tried smoking when they were 14 years old. The survey, nevertheless, found respondents who started even before the age of seven.

- **Reasons for smoking.** Generally, the FGD revealed that peer pressure and example of a family member who smokes are the main factors that have triggered respondents to try smoking in the first place. After becoming a smoker, it appears that releasing tension or stress was the main reason for smoking .This was stated by 67.4% respondents aged 13-15, 66.8% respondents aged 16-19, and 42.86% respondents aged 20-25 in the quantitative survey.

- Some 62.8% of respondents who have ever smoked said they sometimes smoke with their friends. Most of the rural respondents smoke in their house (50%), while the urban respondents usually smoke during social events (39.3%). Surprisingly, 6.5% of girls aged 13-15 and 5% of girls aged 16-19 said that they "sometimes "smoke with their parents.

- Respondents who have smoked every day in the past 30 days were only found in the 20-25 age group, and 8.5% of girls aged 20 to 25 have smoked more than 100 cigarettes.

- Young women tend to believe that smoking helps control body weight. This was stated by more than half of the respondents (53.2%).

Personal and socio-cultural factors predicted current smoking. Girls who have a positive opinion and image of smoking were more likely to smoke. Perceiving that smoking among young girls and women is acceptable as well as most young women smoke are important predictors of female smoking. The broader socio-cultural factors such as peer smoking, exposure to tobacco advertising, and being offered free sample of cigarettes are important predictors of smoking among young girls and women. Because of a lack of a ban on tobacco advertising, exposure to tobacco advertising and promotion is very high and found to be a significant predictor of female smoking. There should be ban on tobacco advertising to reduce smoking uptake especially among the youth.

- ***Sampoerna Mild* is a market leader for young women smokers.** Among those who smoke a specific brand 55.2% reported that they favor Sampoerna Mild, Star Mild (11.2%), Marlboro Menthol (3.7%) and Class Mild (0.75%).
- **Underage women have easy access to cigarettes**. 34.8% of respondents aged 13-15 said it is "a little easy" to get cigarettes. This percentage is higher than those who said "very difficult" (17. 4%) and "a little difficult" (23.9%).
- **Less than half of smokers planned to quit smoking.** 39% of respondents said they plan to quit smoking in the next 30 days, but 41.1% of girls aged 20-25 and 30.4% of girls aged 13-15 said that they would not quit smoking in the next six months.
- **A small proportion of girls aged 13-15 are likely to smoke next year**. Although younger girls appeared to be the majority of non-smokers, only 83.3% of all respondents aged 13-15 said they "definitely will not smoke" at any time next year. This indicates that a small proportion of young girls potentially will become smokers in the following year.

2. Girls' and young women's awareness of anti-smoking messages, smoke-free places, ban on advertising, promotion and sponsorship and health warning on cigarette pack.
   - **Television and posters are the main source of information for anti-smoking messages** (i.e. the health consequence of smoking or encouragement to quit smoking). Most of the girls said that they have noticed anti-smoking messages on television (81.1% in the urban area and 75.6% in the rural area) as well as on posters (63.8% in the urban area and 58.22% in the rural area). Less than 20% of the respondents said they have never noticed anti-smoking message (15.6% in the urban area and 17.9% in the rural area). The FGD revealed that respondents tend to be impacted by health warnings after watching anti-smoking messages in a TV ad.
   - **High awareness of health warnings.** More than 50% of respondents of all age groups said they have noticed health warnings on cigarette packs. A vast majority of young women understand that smoking cause lung cancer in smokers (99%) and passive smokers (91.3%). The percentage of those who required more health information on cigarette packages was

slightly higher in the older group (76.2% of girls aged 20-25), compared with the percentage of girls aged 16-19 (73.2%) and girls aged 13-15 (65.4%) who stated the same. Such requirement is also higher among rural girls (75.8%), compared to urban girls (67.3%). The FGD findings, however, showed that such messages alone would not necessarily impede their intention to smoke as respondents are heavily exposed to tobacco promotion and peer pressure.

- **Impact of health warnings is uncertain**. Respondents' awareness of health risk of smoking was high. In relation to health warnings, 72.4% of respondents aged 13-15 think a lot about the risks of smoking after seeing the warnings. However, health warnings have less impact on the older groups. Less than two-third of the older girls (69.8% of girls aged 16-19 and 60.8% of girls aged 20-25) said that they think a lot about the risks after seeing the warnings.
- **Perception on pictorial health warnings on cigarette packs.** 52.1% of respondents said that pictorial health warnings would be effective. The FGD revealed that pictorial health warnings would not have a significant influence on smokers. Nonetheless, a majority of respondents (85.6%) said that government should implement pictorial health warnings on cigarette packs.
- **Young women's awareness on tobacco control policy and regulation is limited to smoking ban in public places and health warnings.** Urban respondents were much more likely to have knowledge on tobacco policy than rural respondents.

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3. Exposure to tobacco advertising, promotion and sponsorship among the respondents

- **Girls were highly exposed to advertisement of tobacco products through television and poster.** Respondents were often exposed to tobacco/cigarette advertisement via television (92.9%) and posters (70.6%). In addition, more than 50% respondents in both urban and rural, as well as in all age groups, stated that they have seen many actors smoking on television, videos or movies. The FGD also revealed that tobacco advertisements and promotions were attractive to young people and considered to be more creative than other advertisements.
- **Girls were excessively exposed to tobacco promotion at social events**. More than 70% of girls in the rural and urban areas were exposed to tobacco advertising, promotion during sports events, school fairs, concerts, or community events. The highest exposure was among the 20-25 years old group. Some 61.2 % respondents in rural areas said they were exposed to tobacco advertisements in the shops/stores. While, 60.2% respondents in urban were likely to be exposed to tobacco advertisement through magazines/newspapers.
- **Cigarette companies offered free sample to underage women**. Data shows that 10.2% of girls aged 13-15 and 14.53% of girls aged 16-19 admitted that they have been offered free sample of cigarettes. The fact that they have been offered free sample is a violation of the Government law (PP) No.19/2003 on Health Protection Against Tobacco.

4. Respondents' support for tobacco control policies

- **Lack of enforcement and social acceptability have prevented the implementation of smoking ban in Indonesia**. Respondents in both urban (95.1%) and rural areas (90.8%) believed that lack of enforcement have prevented the implementation of the smoking ban. Moreover, around 40% of respondents think that the government effort in enforcing the ban of tobacco advertising, promotion and sponsorship in the country was ineffective.

Meanwhile, 85.4% respondents in the urban and 75.9% in the rural areas believe that high social acceptability of smoking is one of the inhibiting factors for the implementation of smoking ban.

- **Most young women support smoking ban.** The majority of respondents from the rural (63.8%) and urban areas (54.6%) support the banning of smoking scenes in movies and television programs. The findings are also consistent with those of the FGD that tobacco control policies received positive support both from urban and rural girls. Moreover, only 39% of respondents in the rural area and 34.51% of respondents in the urban area stated that they strongly support the banning of sponsorship of sports and cultural activities by the tobacco industry.
- Most FGD informants were of the opinion that sporting or music events that are organized or sponsored by the tobacco companies are usually more attractive.
- **Violation of advertising ban should be the responsibility of relevant government agencies.** Although 78% respondents recommended imposing heavy penalties on tobacco companies that violate the ban on advertising, promotion and sponsorship, the highest percentage of respondents suggested that relevant government agencies should be held responsible (84.6%).

5. Respondents' perception of tobacco industry's Youth Smoking Prevention (YSP) program and corporate social responsibility (CSR)

- **The philanthropic actions of the tobacco industry are likely to get support from young women.** Most girls in the urban (89%) and rural areas (88%) said they would support the tobacco industry's philanthropic activities. This shows that the industry has succeeded in creating the image as a good corporate citizen. Youths should be educated about the truth of such activities.
- **Many young women do not have any opinion about the effectiveness of the Youth Smoking Prevention (YSP) program.** Data revealed that 28,6% of respondents have never heard of the YSP program; and 22.6% of respondents said that the program was neither effective nor ineffective.
- This study also revealed that 53% of girls in the rural and 44% in the urban areas did not know about the contribution of the tobacco industry to the national economy. However, 20% of respondents in the rural area believe that the tobacco industry contributes a lot to the national economy.

7.2 Recommendations

The majority of respondents in this study think that smoking is bad. However, respondents who have ever smoked tend to have a more positive opinion towards smoking. The research found a significant correlation (95% in level of belief) between opinion about smoking and the status of respondent being a smoker or non-smoker.

Thus, behavior change campaign should not only target smokers but should also target passive smokers including children who are affected by environmental tobacco smoke. In addition to law enforcement, passive smokers should be empowered to assertively reprimand smokers who smoke near them. As such, Article 8 of the FCTC on "protection from exposure to tobacco smoke" should be implemented.

Anti-smoking campaigns should not be limited to slogans in ads and posters. The research found that only less than 20% of respondents reported that they have never seen an anti-smoking message (15.6% girls in the urban area and 17.9% in the rural area). Generally, they have seen or heard of anti-smoking messages through television (81.1% urban girls and 75.6% rural girls) and posters (63.8% urban girls and 58.2% rural girls). However, most respondents consider these anti-smoking ads/messages as less attractive and as having little impact in making someone quit smoking.

Respondents also reported that they are more often exposed to tobacco promotion and ads than to anti-tobacco messages. More than 70% of respondents in both the urban and the rural areas said they are exposed to tobacco promotion in sporting and music events, school parties, and events in their community. Meanwhile, the majority of respondents in the rural area (63.8%) and in the urban area (54.6%) support the banning of smoking scenes in movies and television programs. Therefore, the government should implement Article 13 of the FCTC that calls for a ban on tobacco advertising, promotion and sponsorship.

The research found that 85.63% supported the implementation of graphic health warnings. Graphic health warnings should be enforced to also reach the illiterate and young children who may not yet fully understand the danger of the diseases caused by smoking as described in text warnings, and serve as continual reminders of the harm done by smoking.

About 23.91% of respondents aged 13-15 said that they purchase their own cigarettes. This indicates that cigarette sales to minors still exist. Even if the ban on cigarette sales to minors is imposed, it would be difficult to ensure an effective enforcement of the law. Thus, tax on all tobacco products should also be increased to make them less affordable to youth.

Law enforcement by the government is still not effective. About 40% of respondents said that government efforts to enforce tobacco control policies are ineffective. Moreover, about 10.22% of respondents aged 13-15 and 14.5% of respondents aged 16-19 reported that they have been given free-samples of cigarettes while, in fact, provision of free-sample is prohibited by law (PP 19/2003). Establishing policies and laws without the commitment to enforce it will make such policies ineffective. The government should increase the capacity of its apparatus to enforce the policies. We should not be satisfied with the passing of laws and policies only. The process of policymaking should include education for the public so as to strengthen the culture of law.

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APPENDIX 1

ID Interviewer: ☐ - ☐☐

SMOKING IN GIRLS AND WOMEN

SURVEY

INSTRUCTIONS
These questions are about awareness and attitudes of young people like yourself to anti-smoking activities, smoking tobacco products and any smoking experiences you might have had. **Please read each question carefully and answer honestly.** **The answers you give will be kept completely secret and confidential, <u>including from your family</u>.** **To help us keep your information confidential, please do not put your name on any of the pages.** **For each question, indicate your answer by circling your response.** **For example: (1) No 2 Yes**

DATE: _____/_____/_____

Checked by:_____

(Name of Field Supervisor)

SECTION A: SMOKING BEHAVIOUR

1 Have you ever smoked a cigarette, even just a few puffs?

- [1] Yes
- [2] No

2 How many cigarettes have you smoked in your life? (Choose only one)

- [1] None
- [2] 1-10
- [3] 11-100
- [4] More than 100

3 How old were you when you first tried a cigarette?

- [1] I have never smoked cigarettes
- [2] 7 years old or younger
- [3] 8 or 9 years old
- [4] 10 or 11 years old
- [5] 12 or 13 years old
- [6] 14 or 15 years old
- [7] 16 years old or older
- [8] Others (specify: _____)

4 During the past 30 days [one month]. How many days did you smoke cigarette? (Choose only one)

- [1] Not at all → **[SKIP TO SECTION B (Q.15) on PAGE 4]**
- [2] 1 or 2 days
- [3] Some days
- [4] Almost every day
- [5] Every day

→ **Go to NEXT QUESTION**

5 During the past week, <u>on the days you smoked</u>, how many cigarettes did you smoke each day?

- [1] None at all
- [2] Less than 1 cigarette (only puffs)
- [3] 1 cigarette
- [4] 2 to 5 cigarettes
- [5] 6 to 10 cigarettes
- [6] 11 to 20 cigarettes

7 More than 20 cigarettes

6 Which of the following best describe the reasons for smoking?

1 To release tension/ stress
2 To do what the guys can do
3 To be accepted by group
4 To relax
5 Group norm

7 How often do you smoke with your friends?

1 Never
2 Sometimes
3 Often

8 How often do you smoke with your parents?

1 Never
2 Sometimes
3 Often

9 What brand of cigarettes do you usually smoke? (Select only one response)

1 Write name of brand (e.g Marlboro Light) _____
2 I have no usual brand
3 I usually smoke hand rolled cigarettes

10 In your opinion, do imported Western cigarettes taste better or worse than local brands?

1 Taste better
2 Taste the same
3 Taste worse
4 I don't know

11 How do you usually get your cigarettes? (Select only one response)

1 I do not smoke
2 I buy them
3 Someone buys them for me
4 I get them from friends
5 I get them from home
6 I get them another way

12 Where do you usually smoke? (Select only one response)

- [1] I have never smoked cigarettes
- [2] At home
- [3] At school
- [4] At work
- [5] At friends' houses
- [6] At social events
- [7] In public places (e.g. parks, shopping centres, street corners)
- [8] Others (specify: _____)

13 How easy or difficult is it for you to get cigarettes when you want them?

- [1] Very difficult
- [2] A little difficult
- [3] A little easy
- [4] Very easy
- [5] I don't know/Not sure

14 Which of the following describe your thoughts about quitting smoking?

- [1] I plan to quit in the next 30 days [1month]
- [2] I plan to quit sometime in the next 6 months
- [3] I plan to quit, but not in the next 6 months
- [4] I do not plan to quit at all

SECTION B

TO BE ANSWERED BY EVERYBODY

15 If one of your best friends were to offer you a cigarette, would you smoke it?

- [1] Definitely not
- [2] Probably not
- [3] Probably yes
- [4] Definitely yes

16 At any time during the next year do you think you will smoke a cigarette?

- [1] Definitely not
- [2] Probably not

3 Probably yes
4 Definitely yes

17 As far as you know, are there any health warnings on cigarette packs?

1 Yes
2 No
3 Don't know

18 In the last month, how often, if at all, have you NOTICED health warnings on cigarette packages?

1 Never
2 Once in a while
3 Often
4 Very often

19 To what extent, if at all, have the health warnings made you think about the health risks of smoking?

1 Not at all
2 A little
3 A lot
4 I haven't seen any warning labels

20 Do you think that cigarette packages should have more health information, less, or about the same amount as they do now?

1 Less health information
2 About the same
3 More health information
4 Can't say

21 Do you think printing pictorial health warnings about harmful effects of smoking on cigarette packs is an effective way to reduce smoking among young people?

1 Very effective
2 Effective
3 Neither effective nor ineffective
4 Ineffective
5 Very ineffective

22 In your opinion, should the government implement pictorial health warnings on cigarette packs in each country?

- [1] Yes
- [2] No
- [3] Unsure

23 In the last 30 days, how often have you noticed things that are designed to encourage smoking or which make you think about smoking? (Things like advertisements and pictures of smoking).

- [1] Never
- [2] Once in a while
- [3] Often
- [4] Very often

24 In the last 30 days, have you noticed CIGARETTES or TOBACCO PRODUCTS ADVERTISED in any of the following places:

	Tick ☑ in appropriate box	
	[1]Yes	[2]No
a. on television……	☐	☐
b. on radio ……	☐	☐
c. on posters ……	☐	☐
d. on billboards ……	☐	☐
e. in newspapers or magazines ……	☐	☐
f. at shops or stores ……	☐	☐
g. in discos/karaoke lounges, etc ……	☐	☐
h. on or around street vendors ……	☐	☐
i) others (specify:_____)	☐	☐

25 When you go to sports events, fairs, concerts, or community events, how often do you see advertisements for cigarettes?

- [1] Never
- [2] Sometimes
- [3] A lot
- [4] I hardly ever attend sports events, fairs, concerts, or community events

26 Do you support the banning of sponsorship of sports (such as Formula 1) and cultural activities by tobacco industry in Malaysia?

1 Not at all
2 A little/somewhat
3 A lot

27 In the last year, has anyone offered you a free sample of cigarettes, other than friends or family?

1 Yes
2 No

28 In the last year, have you noticed COMPETITIONS or PRIZES associated with cigarettes?

1 Yes
2 No

29 Do you have something like a hat or t-shirt, or any other clothing with a cigarette brand name or logo on it?

Yes
No

30 Would you ever use or wear something that has a cigarette name or logo on it, like a t-shirt or hat?

1 Definitely not
2 Probably not
3 Probably yes
4 Definitely yes
5 Don't know

31 When you watch TV, videos, or movies, how often do you see actors smoking?

1 Never
2 Sometimes
3 A lot
4 I hardly ever watch TV, videos, or movies

32 As far as you know, how many of your favourite actors smoke?

1 None
2 Some
3 Most or all

4 I don't have any favourite actors

5 I don't know

33 Do you support banning smoking scenes in movies and television programmes?

1 Not at all

2 A little/somewhat

3 A lot

34 In your opinion, how effective has the government been in enforcing ban on tobacco advertising, promotion and sponsorship in the country?

1 Very effective

2 Effective

3 Neither effective nor ineffective

4 Ineffective

5 Very ineffective

35 In your opinion, what should be done to tobacco companies that violate this ban on advertising, promotion and sponsorship?

	Tick ☑ in appropriate box	
	[1]Yes	[2]No
a. Heavy penalty placed on tobacco industry …….	☐	☐
b. Withdraw license to operate ……	☐	☐
c. Relevant government agencies should be held responsible ……..	☐	☐
d. Others (specify:_____)……	☐	☐

36 Do you support a complete **ban on tobacco advertisements** inside shops and stores?

1 Not at all

2 A little/somewhat

3 A lot

37 Do you support a complete **ban on displays** of cigarettes inside shops and stores?

1 Not at all

2 A little/somewhat

3 A lot

38 Do you believe banning tobacco sales to minors is an effective way to reduce smoking among young people in Malaysia?

- [1] Very effective
- [2] Effective
- [3] Neither effective nor ineffective
- [4] Ineffective
- [5] Very ineffective

39 Do you believe that the tobacco industry's Youth Smoking Prevention Program (YSP) is effective in reducing smoking among young people?

- [1] Very effective
- [2] Effective
- [3] Neither effective nor ineffective
- [4] Ineffective
- [5] Very ineffective
- [9] Never heard of Youth Smoking Prevention Program (YSP)

40 The tobacco industry provides scholarship to students, aid to flood victims, build bus stands and other forms of philanthropic actions. Do you support these actions of the tobacco industry?

- [1] Not at all
- [2] A little/somewhat
- [3] A lot

41 In your opinion, how much does the tobacco industry contribute to the Malaysian economy?

- [1] Contribute nothing
- [2] Contribute very little
- [3] Contribute somewhat
- [4] Contribute a lot
- [5] No idea

42 How much do you like cigarette company?

- [1] I like them a lot
- [2] I like them somewhat
- [3] Neither like nor dislike
- [4] I don't like them somewhat
- [5] I don't like them at all

43 During the past 6 months, how often have you noticed ANTI-SMOKING media messages (e.g., television, radio, billboards, posters, newspapers, magazines, movies)?

- [1] Never
- [2] Sometimes
- [3] A lot

44 In the last 6 months, have you noticed advertising or information that talks about the dangers of smoking, or encourages quitting in any of the following places?

	Tick ☑ in appropriate box	
	[1]Yes	[2]No
a. on television ……..	☐	☐
b. on radio ……..	☐	☐
c. on posters ……..	☐	☐
d. on billboards ……	☐	☐
e. in newspapers or magazines ……	☐	☐
f. at cinema before or after film ……	☐	☐
g. in discos/karaoke lounges, etc ……..	☐	☐
h. on cigarette packs ……	☐	☐
i. others (specify:_____)	☐	☐

SMOKING BAN

45 For each of the following public places, please tell me if you think smoking should be allowed in all indoor areas, in some indoor areas, or not allowed indoors at all (tick within the given boxes):

	[1] Smoking allowed in all indoor areas	[2] Smoking allowed in some indoor areas	[3] Smoking should not be allowed at all
a. Hospitals?	☐	☐	☐
b. Workplaces?	☐	☐	☐

c. Air-conditioned restaurants and other air-conditioned places?	☐	☐	☐
d. Non-air-conditioned restaurants and public eating areas?	☐	☐	☐
e. Public transport?	☐	☐	☐
f. Indoor areas at your place of worship (where people pray)?	☐	☐	☐
g. Outdoor areas at your place of worship.	☐	☐	☐
h. Bars/pubs/discos	☐	☐	☐
i. Universities/colleges/school	☐	☐	☐

46 How effective has the government enforced smoking bans in public places?

1 Very effective
2 Effective
3 Neither effective nor ineffective
4 Ineffective
5 Very ineffective

47 In your opinion, which are the factors that have prevented the implementation of smoking ban in public places in Malaysia?

	Tick ☑ in appropriate box	
	[1]Yes	[2]No
a. Lack enforcement ……..	☐	☐
b. Public awareness is inadequate ……....	☐	☐
c. Lack of concern of non-smokers about passive smoking ……	☐	☐
d. High social acceptability of smoking …….	☐	☐
e. Others (specify:_____)……	☐	☐

48 In your opinion, how can implementation of smoking ban in public places be improved?

	Tick ☑ in appropriate box	
	[1]Yes	[2]No
a. Increase enforcement ……..	☐	☐
b. Increase public awareness of smoking bans……..	☐	☐

c. Educate public about the harms of passive smoking …… ☐ ☐

d. Others (specify:_____)…… ☐ ☐

49 Which of the following best describes smoking in your home?

1 Smoking is ALLOWED EVERYWHERE in your home
2 Smoking is allowed in some places or at some times
3 Smoking is NEVER allowed ANYWHERE in your home

50 During the past 7 days (one week), how often have people smoked INSIDE YOUR HOME, while you were there?

1 Never
2 Sometimes
3 Often

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ATTITUDES AND BELIEFS

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51 Some cigarettes are described as 'light' or 'mild', have you ever heard of light or mild cigarettes?

1 Yes
2 No

52 Compared to regular cigarettes, are 'light' or 'mild' cigarettes easier or harder to smoke for new smokers?

1 Easier
2 Harder
3 No difference
4 Don't know / I haven't heard of 'light or mild' cigarettes

53 Are 'light or mild' cigarettes **less** harmful than regular cigarettes?

1 No, they are not
2 Yes, they are less harmful
3 Don't know / I haven't heard of 'light or mild' cigarettes

54 Based on what you know or believe, does smoking cause the following:

	Tick ☑ in appropriate box	
	[1]Yes	[2]No
a. Lung cancer in smokers ……	☐	☐
b. Lung cancer in nonsmokers from secondhand smoke ……..	☐	☐
c. Stained teeth in smokers ..…….	☐	☐
d. Premature ageing …….....	☐	☐
e. Stroke (blood clots in the brains) in smokers …….	☐	☐
f. Impotence in male smokers ……...	☐	☐
g. Pregnancy related complications in women smokers …….	☐	☐

55 Of the five closest friends that you spend time with on a regular basis, how many of them are smokers?

- [1] 0
- [2] 1
- [3] 2
- [4] 3
- [5] 4
- [6] 5

56 What is your overall opinion of smoking? (Choose only one)

- [1] Very Bad
- [2] Bad
- [3] Neither good nor bad
- [4] Good
- [5] Very Good

57 Please indicate whether you agree or disagree with the following statements:

	Strongly agree	Agree	Disagree	Strongly disagree
a) Smoking helps to control body weight.				
b) Smoking is a sign of being modern.				
c) Smoking made people look cool or fit.				
d) Most of the women my				

age smoke.				
e) It is acceptable for young men (aged 15 to 25) to smoke.				
f) It is acceptable for young women (aged 15 to 25) to smoke.				
g) Smoking is disgusting.				
h) Smoking makes young people look more mature.				
i) It is safe to smoke for a year or two.				
j) Smokers have a harder time in sports.				
k) People who smoke have more friends.				
l) Cigarette companies lie about the danger of smoking.				
m) Cigarette companies try to get people my age to smoke.				
n) I would like to see cigarette companies go out of business.				
0) Young women are used by tobacco industry to promote their product.				
p) Malaysian society disapproves of smoking.				
q) Tobacco companies do good things for the community.				

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DEMOGRAPHICS

58 Do any of your OLDER BROTHERS smoke?

- [1] I don't have an older brother
- [2] Yes
- [3] No
- [4] I don't know if they smoke

59 Do ANY of your OLDER SISTERS smoke?

- [1] I don't have an older sister

2 Yes
3 No
4 I don't know if they smoke

60 In what grade or year are you?

1 Form 1
2 Form 2
3 Form 3
4 Form 4
5 Form 5
6 Form 6 /pre-university/diploma
7 Bachelor degree- Year 1
8 Bachelor degree –Year 2
9 Bachelor degree –Year 3
10 Bachelor degree –Year 4
11 Master / PhD degree

61 What is your age?

1 13 -15 years old
2 16- 19 years old
3 20-25 years old

62 What is your gender?

1 Male
2 Female

63 To what religious faith do you belong?

1 Islam
2 Christianity
3 Hinduism
4 Buddhism
5 Others (specify: _____)
6 No religion

THANK YOU, YOU HAVE FINISHED

Thank you very much for your help.

Please check to see that you have answered all the questions that apply to you.

Please place the survey in the envelope provided, seal it, and hand it back to the interviewer.

As a reminder, all of your answers will be kept strictly confidential.

If you have any questions, please ask the interviewer.

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About SEATCA

The Southeast Asia Tobacco Control Alliance (SEATCA) works closely with key partners in ASEAN member countries to generate local evidence through research programs, to enhance local capacity through advocacy fellowship program, and to be catalyst in policy development through regional forums and in-country networking. By adopting a regional policy advocacy mission, it has supported member countries to ratify and implement the WHO Framework Convention on Tobacco Control (FCTC)

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