

Social Marketing Campaign in Tobacco Cessation to Young Adults

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Abstract

This study will evaluate the social marketing strategy to influence young adults by taking a case study in Klungkung Regency in Bali Province, Indonesia. This research specifically interested in looking at the social marketing strategy including channel analysis, market segmentation and audience analysis, considerations of product, price, place and promotions), implementation and evaluation of Tobacco Control Behavior. The study found that the social marketing using 4P (Product, Price, Place and Promotions) +additional 2P (Partnership and Policy) elements of social marketing. The product is the idea of healthy life, preventing is more worthy than cure. The price is the change of behaviour, from smoking to quit smoking, and to prevent the early smokers. The distribution channel is family and community support. The partnership is using community elements, among others, Recibido: 20-12-2019 •Aceptado: 20-02-2020 community leaders starting from Banjar (village), PKK (Family Welfare Program) mothers, Posyandu (Integrated Service Post) cadres and religious leaders. Finally the policy is the local regulations (Perda) Number 10 of 2011 concerning Smoke Free Area.

Campaña De Marketing Social En Cesación De Tabaco Para Jóvenes Adultos

Resumen

Este estudio evaluará la estrategia de mercadeo social para influir en los adultos jóvenes tomando un estudio de caso en Klungkung Regency en la provincia de Bali. Indonesia. Esta investigación está específicamente interesada en analizar la estrategia de mercadeo social, incluido el análisis de canales, la segmentación del mercado y el análisis de la audiencia, las consideraciones del producto, el precio, el lugar y promociones), la implementación y la evaluación del las comportamiento del control del tabaco. El estudio encontró que el marketing social utiliza elementos 4P (Producto, Precio, Lugar y Promociones) + 2P adicionales (Asociación y Política) de marketing social. El producto es la idea de una vida sana, prevenir vale más que curar. El precio es el cambio de comportamiento, de fumar para dejar de fumar, y prevenir a los fumadores tempranos. El canal de distribución es el apovo familiar y comunitario. La asociación está utilizando elementos de la comunidad, entre otros, líderes de la comunidad a partir de Banjar (aldea), madres PKK (Programa de Bienestar Familiar), cuadros Posyandu (Puesto de Servicio Integrado) y líderes religiosos. Finalmente, la política es la normativa local (Perda) número 10 de 2011 sobre el área libre de humo

1. INTRODUCTION

Thousands of studies attest to the harmful effects of smoking. The longer people smoke, the greater the risks they face. Tobacco contains

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nicotine, a highly addictive substance and more than 4000 other substances that are potentially harmful to health when smoked or chewed. In low and middle-income countries, smokers typically start at an early stage, but the peak age of uptake is getting younger. Moreover, smoking rates among youth have been increasing. Falling age of smoking initiation is especially of concern for developing countries with large populations and a high proportion of young people. Indonesia is the fourth most populous nation in the world with over 261.1 million people, and 25.02% of the population is under 15 years of age and 16.99% of the population is between 15-24 years.

High and increasing youth smoking prevalence means that Indonesia will face a huge burden of premature morbidity and mortality from tobacco-attributable diseases in future decades if nothing is done (Bandura, 2003). Indonesia offers particular challenges, since smoking is still an accepted part of social interaction, at least among men. The initiation and predictors of smoking by adolescents, although well documented in the West, have been less well studied in the Asia Pacific region. Nevertheless, smoking is still on the increase, especially in developing countries. The World Health Organization estimates that about 50% of men and 8% of women in developing countries are smokers (Edmunds, 1999; Kitzinger, 1994). Cigarette smoking is a practice that is widely accepted among men without limitation. By contrast, under 5% of adult females are current smokers. Although many surveys in Indonesia confirm that smoking among children of school age is relative high, results vary, probably because of different research design, methods, and age groups, rather than because of different smoking behavior (LeFebre & Flora, 1988).

If current trends of the world continue, a lifetime of tobacco use would result in the deaths of 250 million children and young people alive today, most of them in low-and middle-income countries (LMICs). Indonesia, a country of 261.1 million and the biggest economy in Southeast Asia, is attractive for major cigarette companies at a time when growth is slowing in more developed markets (Freeman, 2012).

The Bali Provincial Government effectively applied local regulations (Perda) Number 10 of 2011 concerning Smoke Free Area (Kawasan Tanpa Rokok) or called KTR since June 1, 2012. The KTR regulates that smokers do not smoke anywhere, therefore exposure to cigarette smoke does not affect vulnerable groups, namely children, adolescents and pregnant women (Janz, 2012). More broadly, this regulation is intended to protect the public from the dangers of exposure to cigarette smoke. In addition, the KTR Regional Regulation also aims to create a cleaner space and environment for the community and prevent the emergence of novice smokers. In its implementation, KTR is effectively implemented in the area of health service facilities, teaching and learning places, places for children to play, places of worship, public transportation, workplaces, public places and other locations such as sports locations and city parks (Kotler & Gertner, 2002; Anderson, 2018).

This study will evaluate the social marketing strategy to influence young adults in Indonesia We would be specifically interested in looking at the social marketing strategy including channel analysis, market segmentation and audience analysis, considerations of product, price, place and promotions), implementation and evaluation of Tobacco Control Behavior in Klungkung Regency, Bali.

2. METHODOLOGY

Data collection was done using face-to-face interviews. The data base for this paper came from face-to-face interviews with local government, local community leaders and members and NGO members. The qualitative software QSR-NVivo 11 was used to clean the data, code and analyze the data sets. In qualitative research, computer packages such as QSR-NVivo 11, increase analysis transparency, accuracy, efficiency, rigor and trustworthiness. As part of the analysis process, NVivo 'word frequency queries' were run to identify words and word groups (e.g. stem words, synonyms) that occurred most often, as well as the relative and absolute frequency of word/word groups within the data set. To ensure the comprehensiveness of data in terms of data coverage, 'text search queries' were used to look for (1) specific themes and subthemes; (2) words with a shared stem and (3) words with related meanings. Apart from that, all the documents and reports regarding tobacco cessation programs and other initiatives were analyzed thoroughly.

3. RESULTS

Klungkung Regency is the smallest regency in the province of Bali, Indonesia. The capital city is in Semarapura. Klungkung is bordered by Bangli Regency in the north, Karangasem Regency in the east, Gianyar Regency in the west and with the Indian Ocean in the south. One third of the Klungkung Regency area (112.16 km²) is located between the island of Bali and two thirds (202.84 km²) again are islands, namely Nusa Penida, Nusa Lembongan and Nusa Ceningan .Klungkung Regency consists of 4 districts, 6 villages, and 53 villages. In 2017, the population reached 215,852 people with an area of 315.00 km² and a population distribution of 685 people / km².

No Smoking Zone (KTR) rules are applied not only in public areas and public services. The strict rules of the Klungkung Regional Government are applied with the prohibition of cigarette banners and even the installation of cigarette stickers. The local government of Klungkung Government also applied strict rules to cigarette banners or billboards on the road. Networked shops are also required not to display cigarettes at the front of the outlets. This is because it will lead to the desire of adolescents to smoke cigarettes.

The No Smoking Zone (KTR) in Klungkung Regency, Bali is an effort to support the Law of the Republic of Indonesia (RI) number 36 of 2009 in realizing public health welfare. The Application of No-Smoking Areas (KTR) in Klungkung Regency has been implemented since 2014. Since the enactment of PERDA No. 1 of 2014 on Non-Smoking Areas (KTR).

Thousands of studies attest to the harmful effects of smoking. The longer people smoke, the greater the risks they face. Tobacco contains nicotine, a highly addictive substance and more than 4000 other substances that are potentially harmful to health when smoked or chewed. In low and middle-income countries, smokers typically start at an early stage, but the peak age of uptake is getting younger. Moreover, smoking rates among youth have been increasing. Falling age of smoking initiation is especially of concern for developing countries with large populations and a high proportion of young people. Indonesia is the fourth most populous nation in the world with over 261.1 million people, and 25.02% of the population is under 15 years of age and 16.99% of the population is between 15-24 years.

High and increasing youth smoking prevalence means that Indonesia facing a huge burden of premature morbidity and mortality from tobacco-attributable diseases in future decades if nothing is done. Indonesia offers particular challenges, since smoking is still an accepted part of social interaction, at least among men. The initiation and predictors of smoking by adolescents, although well documented in the West, have been less well studied in the Asia Pacific region. Nevertheless, smoking is still on the increase, especially in developing countries.

The World Health Organization estimates that about 50% of men and 8% of women in developing countries are smokers. Cigarette smoking is a practice that is widely accepted among men without limitation. By contrast, under 5% of adult females are current smokers. Although many surveys in Indonesia confirm that smoking among children of school age is relative high, results vary, probably because of different research design, methods, and age groups, rather than because of different smoking behavior.

The No Smoking Zone (KTR) in Klungkung is applied in health service facilities, teaching and learning places, children playgrounds, places of worship, public transportation, workplaces, and public places. Through these rules, it is expected that youth, students, all levels of society don't try smoking and for those who already smoke, let's stop smoking.

High and increasing youth smoking prevalence means that Indonesia facing a huge burden of premature morbidity and mortality from tobacco-attributable diseases in future decades if nothing is done. Indonesia offers particular challenges, since smoking is still an accepted part of social interaction, at least among men. Klungkung regency as one of the regency in Indonesia which actively involved in promoting the danger of smoking and promote tobacco cessation by social marketing Campaign to support Smoke Free Zone in Klungkung Regency.

KTR rules are applied not only in public areas and public services. The strict rules of the Klungkung Regional Government are applied with the prohibition of cigarette banners and even the installation of cigarette stickers. The Klungkung local government also applies strict rules to cigarette banners or billboards on the road. Networked shops are also required not to display cigarettes at the front of the outlets. This is because it will lead to the desire of adolescents to smoke cigarettes. Based on interviews with the head of the Kungkung Regency Satpol PP, KTR is one of the applications of Public Order in Klungkung, Bali. Like the problem of garbage and drugs. The vision is that our society is healthy. When we are healthy, work can be done optimally. We hope that people do not smoke in the hope that the money from buying cigarettes can be used for their children's education and other useful things. In Klungkung Regency KTR rules are enforced to the traditional villages in Klungkung. The application of the rules is through pararem or traditional rules, namely smoking bans. For those who violate, we are fined for giving 4 kg of rice.

He added: This KTR rule emphasizes that there should be no more smoking in places of worship such as village temples, or in other areas such as schools, bus terminals, offices. In the office if caught smoking will get a warning letter. Smoking bans are also applied in hospitals.

The interview with the informant in the Klungkung Regency Office: Development in the health sector has faced serious problems, this is caused by changes in people's life behavior that starts from unhealthy eating patterns, lack of activity and the increasing prevalence of smoking in the community. Cigarettes are dangerous products and addictive substances that contain 4000 chemicals, 69 of which are carcinogenic (cancer triggers). The Klungkung district government also equips health centers and hospitals with KBM (stop smoking clinics)

He continued: We carry out ongoing anti-smoking campaigns and campaigns to the public about the dangers of smoking and KTR area

socialization. This socialization is carried out in the villages through the banjar (village) through the agents of Primary Health Services. For households, we educate PKK mothers about the importance of maintaining family health without cigarettes.

Through KTR, the Klungkung government hopes that young people, students, all levels of society do not try to smoke and those who have smoked, stop smoking. KTR is oriented towards public health, where prevention is better than cure. The Health Service program in Klungkung Regency includes rehabilitation which includes reducing smoking habits: KBM (Stop Smoking Clinic) is made by involving puskesmas and hospitals, purchasing CO2 equipment, extension cars. Because it is low, KBM net from related diseases such as Asthma

The campaign against tobacco carried out by the Public Health Service of Klungkung Regency and collaborated with schools and various stakeholders such as universities, community organizations. In 2018, the campaign against tobacco was carried out in Klungkung Regency. This campaign was participated by 1000 participants that consists of middle and high school students and communities in Nusa Penida, Bali.

To support a smoke free law, the public health agency, municipality police collaborated with various organizations such as MTCC Udayana and supported by community leaders and the community organizations including Banjar (village), PKK (Family Welfare Program), Posyandu (Integrated Service Post) cadres and religious leaders support KTR socialization and anti-smoking campaigns conducted to the community in Klungkung Regency. During the interview one of the public health officers mentioned that: We socialize the program by educating the mother in the family. Since the mother has an important role in each family. Further, we also socialize the program to the leaders of community. Now they enacted pararem (local law) in smoking prohibited in public places such as pura (the temple) and during the meeting in banjar forum. If they found someone is smoking they impose social sanctions and has to pay money as sanctions

Most campaigns of this type aim to increase not only awareness of the dangers of secondhand smoke but also support for smoke-free laws. The socialization was carried out in schools in the Klungkung area to reduce smoking behavior in adolescents and extend to the villages (banjar) in Klungkung Regency.

Puskesmas cadres educate the dangers of smoking to residents in Banjar (village) and promote KTR. The Health Office established the Youth Movement without Cigarettes (GEBRAK) and the Cigarette Cares Concern Group (KSPBR) which massively carried out a smoking hazard campaign at the community and school level. For GEBRAK cadre, taken from teruna teruni and active in their environment. While KSPBR is in the scope of schools.

In addition, the dangers of smoking is also carried out through educational institutions from junior high school to university about the dangers of smoking for health and also an appeal to participate in supporting the city of Klungkung as a Non-Smoking Area.

From the data collection, it shows that the Smoke free policy derived from the Law of Health. Smoke-free policies protect

nonsmokers from the harmful effects of secondhand smoke, contribute to the denormalization of smoking, and decrease consumption.

4. CONCLUSION

According to the concept of social marketing, commonly known as marketing mix or commonly called 4P namely product (product), price (price), promotion (promotion) and place (the place). And an additional 2P, namely partnership (partnership) and policy (policy), the social marketing element of the campaign against tobacco in Klungkung used the concept. The product is the idea of healthy life, preventing is more worthy than cure. The price is the change of behaviour, from smoking to quit smoking, and to prevent the early smokers. The distribution is using one channel and two channel. The channel of social marketing campaign is family and community support. The community support come over from the social organizations such as sekaa and teruna teruni as well as the banjar. In this case by cooperating with community elements, among others, community leaders starting from Banjar (village), PKK (Family Welfare Program) mothers, Posyandu (Integrated Service Post) cadres and religious leaders.

The media to promote the campaign by using advocacy in school and communities, posters and audio visual (film). The partnership the campaign collaborated with other communities' organizations and also some institutions who have the same mission in against Tobacco campaign. The policy is supported by the Law of number 36 of 2009 in realizing public health welfare. The Application of No-Smoking Areas (KTR) in Klungkung Regency has been implemented since 2014. Since the enactment of PERDA No. 1 of 2014 on Non-Smoking Areas (KTR)

The social marketing process against tobacco in Klungkung is developed to protect nonsmokers from the harmful effects of secondhand smoke, contribute to the demoralization of smoking, and decrease consumption. It is according to Le Febre and Flora (1998) that social marketing and health promotion approaches were developed in response to Limited reach of individual and small group programs, Low Penetration of programs to some segments of populations; and the desire to develop program to achieve change in populations.

The social marketing campaign in Klungkung was running effectively since the government are strict toward the regulations and enacted the regulations. The government also involving other stakeholders such as schools, community organizations to cooperate and collaborate in the program. The usage of channel or medium and by involving mother and family as well as community support to educate the danger of tobacco both are effective.

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