Anti-Smoking Campaign in Brunei Darussalam, Malaysia, and Republic of Indonesia

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Abstract

The objectives of this study entitled "Anti-Smoking Campaign in Brunei Darussalam, Malaysia, and Republic of Indonesia" are to examine 1) the practice of health communication promoting anti-smoking campaign in Brunei Darussalam, Malaysia, and Indonesia and 2) information exposure in the countries and the effects of the campaign. Qualitative methods including interviews with the Muslims living in the areas, non-participant observation investigating signs, media, and anti-smoking activities, behavior analysis scrutinizing the population's smoking behavior and documentary analysis examining law, regulations, and approaches used in the campaign, are employed. Data collection process was done during July 2014 – August 2015. The findings showed that in the three countries, there were two common approaches adopted in anti-smoking campagin run in televison, radio, newspaper, magazine, and specialized media including posters, indoor electronic signs, stickers, brochures, and billboards. The result showed that non-smokers in the countries agreed to accept and follow the offered practice. However, the campaigns failed to achieve the objectives. That is to say that smokers did not realized the cons of smoking behavior that affect people around them, and in fact, they believed that smoking defined the characteristics of a new generation.

Keywords: Health Communication, Anti-Smoking Campaign, ASEAN

Introduction

The faculty of Mass Communication received a research grant from CMU's 2014 revenue, and the goals of this research are to study the health issues in 10 ASEAN Member States in order to advance communication knowledge and to produce documents and materials used for the Faculty's lectures to be in accordance with the establishment of ASEAN.

The researcher decided to select the Muslims as they account for the highest number of the ASEAN population, and on the surface, the major problem for health communication seems to be the prevention aspect of the anti-smoking campaign. According to studies and situation reports about the smoking behavior of the Muslims living in Thailand, it is obvious that in Thailand, the Muslims show the smoking behavior twice the size of Thai Buddhist males (Sarntisart, Isara. Personal interview. 2014). Also, Universitas Indonesia's health communication research foresees significant problem pointing out that in 2020, number of smokers in Indonesia would rise to 140 million from 74 million in 2013 (http://www.manager.co.th, accessed on August 13, 2013). In Malaysia, the number of the youth adopting smoking habit is increasing (http://www.tobaccoreporter.com/2016/07/smoking-a-weighty-issue-in-malaysia/, accessed on September 13, 2014). For this reason, the researcher decided to examine smoking behavior and health communication campaigns run in ASEAN member states consisting of Muslim population: Brunei, Malaysia, and Indonesia. In

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other words, this study focuses on investigating the input, procedure for the health communication campaigns and their influences on target groups. Furthermore, the findings of this study could compare and explore for potentially effective campaign in Thailand, a country with different legal standing, ruling system, and religion, and this would lead into applied knowledge in effective anti-smoking campaign.

Objective
1. To examine the practice of health communication promoting anti-smoking campaign in Brunei Darussalam, Malaysia, and Republic of Indonesia.
2. To examine the anti-smoking campaign exposure in the countries and the effects of the campaign.

Educational Application / Advantages
1. This actual research would provide a better understanding of policy making and the implementation of more effective anti-smoking campaign.
2. The acquired knowledge of communication in ASEAN would improve teaching approach at the Faculty of Mass Communication, CMU and the lecturers' research skills, together with publishing this research in national and international scholarly journals. These would not only help refine the students' skills but also improve the Faculty's standard of education quality assurance.

Hypothesis
Anti-smoking campaigns exert influence on smoking behavior of Bruneian, Malaysian, and Indonesian.

Theoretical Frameworks
There are two theoretical frameworks involved in this research which are 1) campaign and 2) Islamic beliefs and principles.

Campaign refers to communication plan emphasizing on bringing about social change altering both individual and the whole society such as preventing undesirable behaviors and setting acceptable behaviors. Such change could only happen under three conditions: cognitive change—change in knowledge development such as spreading regulations about no smoking area, attitude and value change—change in individuals' attitude including beliefs and values, and behavioral change—change in behavior pattern from smokers to be non-smokers. Attitude change takes time and is a highly complex taks to achive. For the same reason, behavior change must be done gradually on daily basis as new mindset and attitude towards the realization of the dangers of smoking and secondhand smoke. These changes could be brought by implementing regulations on the target group.

A successful campaign must be persuasive and convincing, distributing across various media: PSA TV/radio spots, newspaper, magazine, and specialized media—brochures or stickers. Persuasive content creation requires certain characteristics of the media, senders, procedure, and content itself in order to exert influence resulting in alteration in values and attitude. (Pilun-Owad, Orawan. 1994)

The campaign procedure establishment includes two major elements. 1) Problem and context analysis is involved in smoking problem, law, regulation, social trends, and relevant policy to smoking control. 2) Target group analysis is also involved in the the procedure, and it could be classified into two level: indiviudal level aiming to grow realization of behavior problems and the solution among both smokers and the newcomers to smoking, especially the youth and structure level aiming at social change—growing realization of social problems requiring immediate addressing. In fact, at this level, the aim could also be at changes in

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policy or law involved with no smoking areas. 3) Planning and conducting a campaign involve determining and creating content, choosing proper media outlet and channel. 4) Carrying out assement of the campaign in order to design more effective and efficient future campaign.

Based on the Quran (5: 3; 3: 19), "Islam" derived from "Aslama" means submission to god, and based on Thai Office of the Royal Society's definition (1999: 147 – 148), the word refers to submission to the only god—Allah and follow the Islamic regulations and restrictions (Banjong Binkason, 1997: 1). These restrictions include a belief prohibiting smoking as the Muslims must follow Muhammad's footsteps Banjong Binkason (1993: 62 – 63). Actually, law in Islamic countries are based on the three essential beliefs of Islam in which a part of those prohibits smoking (Abdullah al-Qaradawi, Yusuf. 1987, 27 – 57), and the punishment can be divided into three types: Qisas—"eye for an eye" or taking revenge, Hadd or Hudud—public punishment which cannot be pardoned, and Tazir—punishment on account of the state (Thongsook, Benjapon. 1997, 19 – 20).

According to the literature review, influential factors in running a successful anti-smoking campaign in Islamic context are as follows: embedding Islamic teaching in the campaign to emphasize that drugs are not only prohibited by law but also by God (Manote Patchanee, 2003), creating safe and suitable environment for the target group to change from positive attitude towards smoking to grow realization of the danger and downside of the behavior (Mareeyanee BueraHeng, 2013), and encouraging the teachers or parents to be more strict with their children about smoking (Mareeyanee BueraHeng, 2013).

Procedure for a successful anti-smoking campaign involves engaging the target group to participate in activities aiming to grow realization of the dangers of smoking and give inspiration for giving up smoking, for example launching a website giving advices about quitting smoking (Jintana Sarayuthpitak, 2010).

Studies show that various approaches were used in anti-smoking campaigns, for instance campaign focusing on promoting healthy lifestyle, beauty, care, sex appeal, and death via mostly viral marketing technique on the internet (Chatnapha Amphonpheeraphan, 2010), and activities involved self-observation could also be used as a means to have a negative attitude to smoking behavior (Jintana Sarayuthpitak, 2010).

Research Methodology

This qualitative research employs 3 research methods: content analysis, non-participant observation, and interview. In data collection, content analysis was employed to analyze law and regulations involved in the anti-smoking campaigns, and the data was collected from Chiang Mai University's online subscription databases and information about anti-smoking and smoking control campaigns derived from both private and government organizations such as World Health Organization (WHO).

Non-participant observation was employed to observe smoking behavior at various public places such as hospitals, hotels, guesthouses, private houses, restaurants, streets, and footpaths the three countries.

Also interviews were conducted with 12 people in the selected areas which can be divided into 6 smokers and 6 non-smokers. The interview questions were about attitude towards smoking, information exposure of anti-smoking campaigns, and its influences on the samples' decision-making processes to join anti-smoking campaigns. Then, the researcher synthesized the gathered data using triangulation

Results

The result showed that major influential factors in the anti-smoking campaigns included context, input, and process. Context here refered to WHO's health communication

policy towards anti-smoking which was implemented since February 2004. This national policy embeded certain law on smoking: smoking areas, advertising, sales promotion, and sponsor control, along with delivering message about the dangers of smoking. In this regard, studies showed that there were more regulations on advertising, sales promotion, and sponsorship of tobacco products in Malaysia and Brunei than Indonesia. In 2014, Haram, Islamic restriction prohibiting smoking was embedded in the law in Malaysia and Indonesia. Also, law about smoking areas was implemented in the sampling countries, but the degree of toughness varied according to the existing domestic law. Malaysia and Brunei declared more smoking areas across the countries than Indonesia.

In terms of cigarette labeling law, all three countries provided a set of national standards for cigarette packaging requiring them to state the dangers of smoking both in English and Bahasa Malaysia not less that 50-75% of the packaging.

Based on the documentary and non-participant observation analysis of health communication campaigns, goals of the campaigns launched in all sampling countries were to reduce the number of newcomers to smoking and encourage smokers to quit, and the target group was the youth, especially smokers aged above 15.

In all three countries, mass media: radio spot, cinema advertising, newspaper, and magazine and specialized media: stickers, posters, and electronic signs were included in the campaigns to display persuasive messages, and the latter was mostly done indoor.

Information exposure on health communication campaigns among population in Malaysia, Indonesia, and Brunei

According to the findings, in Malaysia, male and female smokers were in a range of 18-45 years old, and these people expressed an attitude believing that smoking defined the characteristics of a new generation. In other words, they believed that smokers were considered cool and smoking was considered contemporary social behavior, so it was acceptable giving sense of belonging.

In particular, in Indonesia, a voter decided to smoke during the vote as he said that smoking gave him the sense of belonging. In Brunei, a woman expressed her opinion that both male and female could smoke due to gender equality, and mostly, women smoked with their lovers or husbands.

In terms of smoking areas, the result indicated that in Indonesia, the most crowded smoking areas were the footpaths as 758 cigarette butts were found, and during the observation between 15:00 to 20:00, there were 58 smokers at the scene. From the observation at storefronts during 15 to 20 July 2015, there were 30 to 47 smokers at the scene. In fact, there were no no-smoking signs at smoking rooms at the airports, restaurants, and tourist attractions, so in this case, in these areas; there were around 10 to 20 smokers during 11:00-19:00, mostly smoking after a meal.

In terms of the information exposure on anti-smoking campaigns, the samples were exposed to TV spots the most and then online media. Mostly, smokers realized the dangers of smoking and secondhand smoke; in contrast, they had positive to smoking: stress relieving and cool. Also, they said that the damages of smoking were lengthy, so they could probably quit before it inflicted serious damaged on them. Female smokers expressed that they did realized that smoking inflicted damage on them.

The result also reflected that the non-smoking samples realized, remembered, and understood the embedded message about the dangers and damages of smoking passing through the contents of the campaigns. Because of the message, they did not want to smoke and want to encourage people around them to quit smoking. On the other hand, the sampling smokers ignored the message as it contrasted with their beliefs.

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According to the interviews, the realization of dangers and damages of smoking among those two groups of the samples were the same as the result of the information exposure. Both smokers and non-smokers were mostly exposed to TV spots or online spots, and they did not pay attention to the distribution of the campaigns via the rest of media outlets. However, they reflected that campaigns' activities were effective in persuading the non-smokers, not the smokers.

In addition, based on recommendations for the campaigns by the samples, the target groups should be the youth to prevent them from becoming smokers. The campaign goals should also be set to reduce the number of newcomers to smoking and protect them and people around them from exposure to secondhand smoke, along with diminishing health problems caused by smoking. Haram and relevant regulations should be embedded in the law. This approach could possibly diminish the smokers and be able to encourage more smokers to quit compared to campaigns running in the mass media and specialized media as the campaigns alone could not cause social change. Additionally, the samples recommended that TV, cinema and online spots were more convincing than specialized media as those contained audiovisual materials in which could attract audience's attention. Effective campaigns' activities should be conducted together with imposing anti-smoking law, prohibiting smoking in public areas which could help preventing secondhand smoke exposure. Peer pressure was also recommended by the samples as they suggested that it should be included in the campaigns' activities, for example, anti-smoking rally along the streets to put pressure on smokers in public areas.

Conclusion and Discussion

Based on the cognitive consistency theory which said that people generally have selective memory, in this case, the smokers only accepted what was in line with their attitude. Fortunately, the smokers tended to conform to the anti-smoking regulations and law if there were Islamic restrictions embedded. The number of smokers in Brunei Darussalam was lower than Malaysia and Republic of Indonesia as there were more Islamic restrictions on smoking embedded in the law in Brunei than the rest. On the whole, this research project differs from Chuchai Supawongse's research (1997) on Thai youth's smoking behavior which proved that Thai anti-smoking law for people under 18 failed and showed that cigarette labeling had influence over smokers, helping discourage smoking behavior.

As previously stated, in Indonesia, the samples held the belief that smoking reflected the characteristics of new generation and being in fashion, along with giving a sense of belonging. Natwipa Sinsuwarn's research (2005) also confirmed that crucial factors in successful anti-smoking campaign were cooperation between the campaign runners and both domestic and international youth development organizations and anti-smoking campaign must be set high on the agenda in the country.

Recommendation

Based on the analysis of this research, it would be of significant benefit to conduct a further analysis on the relationship with psychological factors that could analyze and predict smoking behavior of the Muslims living in Brunei Darussalam, Malaysia, and Republic of Indonesia, in order to build and develop health communication promoting anti-smoking campaign. Furthermore, action research could be conducted to seek for an alternative approach to launch anti-smoking campaign for the youth.

Multidisciplinary approach to embrace Islamic restrictions with the law should be adopted in these areas. In particular, there should be restrictions on smoking areas, volume of cigarette sales, minor cigarette purchase, together with cooperating with religious leaders to join or take part in the campaign and religious rituals.

References

Abdullah al-Qaradawi, Yusuf. (1987). *Halal, and Harom in Islam.* (Banjong Binkason, Translater). 2 nd ed. Naramedia Co.ltd., Bangkok.

Chatnapha Amphonpheeraphan. (2010). *The Pro-Social Communication Approach on Non-Smoking Campaign among Thai Females.* Thesis. Master Degree of Communication Arts. Chulalongkorn University.

Banjong Binkason. (1997). *Islam and Universal Peace.* n.d.

Mareeyanee BueraHeng. (2013). *Viewpoint toward Smoking among Youth Aged 13 – 15 Year in Islamic Private School,* Khok Pho District, Pattani Province. Thesis. Master Degree of Public Health. Chiang Mai University.

Manote Patchanee. (2003). *The Application of Islamic Teaching for The Prevention against Narcotic Drugs Problem in Islamic Private Schools,* Nokhon Si Thammarat. Thesis. Master Degree of Arts in Social Sciences for Development. Rajabhat Institute Nakhon Si Thammarat Academic.

Orawan Pilun-Owad. (1994). *Persuasive Communication.* Bangkok: Chulalongkorn University Press.

Quran. Available from: http://alquran.softhut.net/chapter?p=3&n=%E0% B8%AD%E0%B8%B2%E0%B8%A5%E0%B8%B0%E0%B8%AD%E0%B8%B4% E0%B8%A1%E0%B8%A3%E0%B8%AD%E0%B8%99. Retrieval date October, 19, 2014 (2014)

Jintana Sarayuthpitak. (2010). *Intervention Activities Model Development for Smoking Behaviors Change in Male Adolescent.* Dissertation. Ph.D. in Sport Science. Chulalongkorn University.

Isara Sarntisart. *Interview.* 2014.

Thai Office of the Royal Society. (1999). *Thai Office of the Royal Society Dictionary. Aksorn ChareonDhat.* Bangkok.

Benjapon Thongsook. (1997). *Islam and Narcotic Drug Addiction: A study of Religious Reference on the Problem of Narcotic Drug Addiction in Muslim Communities,* Yala. Master of Arts Thesis, Mahidol University.

http://www.manager.co.th, accessed on August 13, 2013.

http://www.tobaccoreporter.com/2016/07/smoking-a-weighty-issue-in-malaysia/, Accessed on September 13, 2013.