

Smoke-free Tobacco Public Places Yogyakarta, Indonesia

Fact Sheet

Background

Yogyakarta, a city in Central Java, passed City Law No. 2/2017 which created 100% smoke-free areas including in government buildings, hospitality settings, shopping centers, and religious settings. This study assessed compliance with smoke-free policies in different settings from February to March 2019.

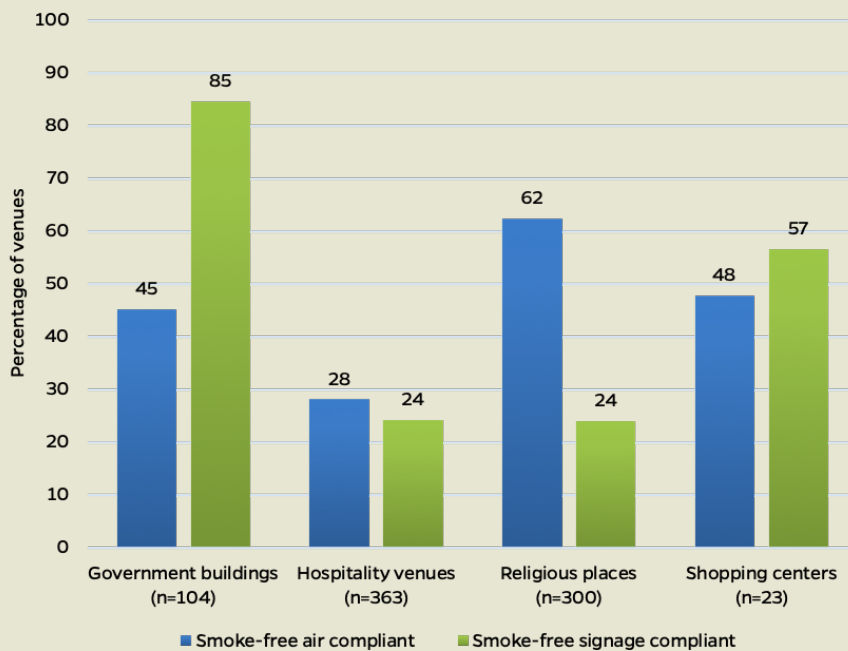


No-smoking sign displayed in a shopping center in Yogyakarta. March 15, 2019



Findings

Figure 1. Percentage of venues that are compliant with smoke-free air and smoke-free signage



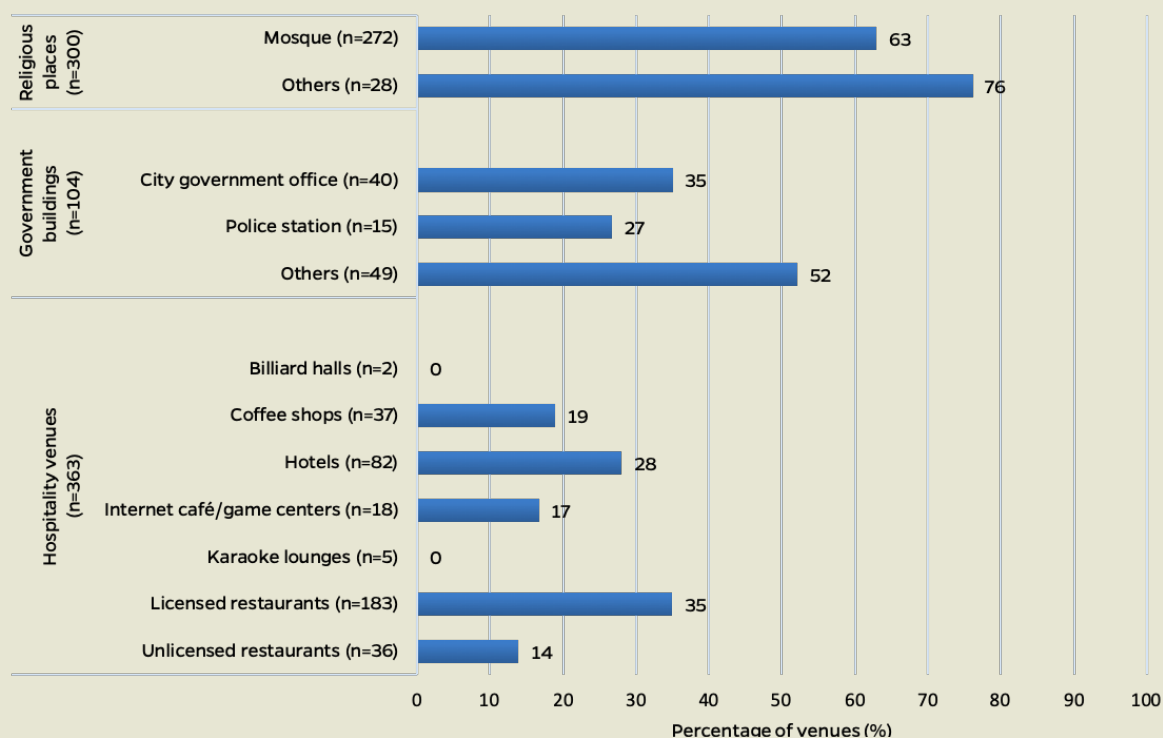
A venue was considered compliant with smoke-free air if:

1. No one was observed smoking inside and;
2. No cigarette butt litter was found and;
3. No ashtrays were present

A venue was considered compliant with smoke-free signage if no-smoking signs which included a no-smoking image (e.g. lit cigarette and crossed red circle) were posted at the venue.

- Less than half of the government buildings (45%), hospitality venues (28%), and shopping centers (48%), were smoke-free air compliant
- The majority of religious places (62%) were smoke-free air compliant
- The majority of government buildings (85%) and shopping centers (57%) had smoke-free signage posted
- Less than one-quarter of hospitality venues (24%) and religious places (24%) had smoke-free signage posted

Figure 2. Percentage of venues that are compliant with smoke-free air – by venue type



- A wide range of compliance was observed across government buildings; police stations had the lowest proportion of compliant venues (27%)
- The majority of all hospitality venues were not compliant; none (0%) of the observed billiard halls or karaoke lounges were compliant, and less than a quarter of unlicensed restaurants (14%), internet cafés (17%), and coffee shops (19%) were compliant

Methods

Staff and faculty from the Johns Hopkins Bloomberg School of Public Health’s Institute for Global Tobacco Control (IGTC), with partners from International Union Against Tuberculosis and Lung Disease worked with tobacco control/public health experts from Udayana University (Bali, Indonesia) and trained teams of local data collectors to follow set protocols and conduct observations in each of the identified venues. Data collectors used mobile phones equipped with software to support the observational data collection, which was conducted during business hours when people were most likely to be present. Comprehensive lists and a walking protocol, where appropriate, were used to identify the venues to be sampled. A total of 790 venues were sampled: government buildings (n=104), hospitality venues (n=363), religious places (n=300) and shopping centers (n=23).

Discussion

The findings from this study indicate that measures to improve compliance with Yogyakarta’s smoke-free laws need to be taken, particularly in hospitality venues. Achieving compliance with local tobacco control policies is crucial due to the serious health risks associated with tobacco smoke. In accordance with Article 17 of City Law No. 2/2017, persons in charge of smoke-free venues should ensure no-smoking signs are posted and ash trays are removed from the premises. In accordance with Article 16 of City Law No. 2/2017, regional authorities must ensure they are conducting routine monitoring and evaluation of smoke-free implementation across the city.

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