Jurnal Promkes: The Indonesian Journal of Health Promotion and Health Education Vol. 12 Issue 2 SP, August 2024, 222-226 doi: 10.20473/jpk.V12.I2SP.2024.222-226

Review of Tobacco Taxes Advocacy in Indonesia: A Health Promotion Strategies

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ABSTRACT

Background: The global smoking prevalence from 2007 to 2021 decreased from 22.7% to 17%. However, in some countries, the prevalence has not changed or even increased. Indonesia is the third largest country in cigarette consumption. Data shows about 58 million male smokers and 3.5 million female smokers smoke every day. Many tobacco control efforts have been made, including efforts to increase cigarette excise taxes. In the process, there are advocacy efforts included in the health promotion strategy according to WHO in the Ottawa Charter. However, a complete review of the process and results of advocacy is still lacking, even though it can be used to evaluate the implementation of advocacy for future excise tax increases. Aims: This research aims to review the process and results of advocacy as a health promotion strategy in tobacco control. Methods: This research involves CISDI (Center for Indonesia's Strategic Development Initiatives). The method used was Focus Group Discussion with CISDI and secondary data from political mapping in assessing advocacy results. Results: Advocacy of the excise tax increase policy carried out by CISDI received support from officials or the public amounting to 70.2% and only 23.6% disagreed. Conclusion: Health promotion strategies through advocacy can increase awareness and support from policy makers quite effectively. Tobacco control through increasing tobacco taxes can be carried out if all parties encourage the government to make policies. However, in reality, an increase in tobacco taxes alone cannot reduce cigarette consumption in the community.

Keywords: advocacy, health promotion, tobacco control, tobacco taxes

INTRODUCTION

One of the biggest concerns to public health in the globe today is the tobacco pandemic. According to data, tobacco use kills around 8 million people annually, including 1.3 million nonsmoking passive smokers (WHO, 2023). Approximately 80% of the 1.3 billion tobacco smokers worldwide are in lowand middle-income nations (WHO, 2021). Cigarette smoke from tobacco contains more than 7000 toxic chemicals and 70 carcinogenic substances that can damage the body's organ systems. The average life expectancy of a lifetime smoker is reduced by around 10 years and a quarter of those of their productive age can suffer from tobacco-related disabilities. The risks identified in the impact of COVID-19 are increased hospitalization, potential death, increased risk of periodontal gastroesophageal reflux disease and

disease (Tobacco Atlas, 2022a). Additionally, smoking was found to nearly double the probability of developing a severe COVID-19 infection (Zhao *et al.*, 2020).

The 2021 Global Adult Tobacco Survey (GATS) states that the average price of 12 kretek cigarettes is IDR 14,867 and the monthly price reaches IDR 382,091. Tobacco and electronic cigarette use is 34.5% overall (70.2 million adults), 65.5% of men, and 3.3% of women currently (smoking, used tobacco smokeless, or heated tobacco products) 2021). Even (GATS, healthcare professionals' smoking habits may result from work-related stress and outdated cultural standards that once accepted smoking as a habit and linked it to a particular status symbol, making it more difficult to offer patients cessation advice (Juranić et al., 2017).



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Received: 03-06-2024, Accepted: 03-07-2024, Published Online: 01-08-2024

According to the Global Youth Tobacco Survey (GYTS), 19.2% of students aged 13-15 years, 25.6% of boys and 3.5% of girls consume tobacco products. Access to buying cigarettes is still very free in shops, kiosks, street vendors and even 76.6% of students are not prevented from buying (GYTS, 2019).

There is a practical initiative from the FCTC (Framework Convention on Tobacco Control) called MPOWER. MPOWER's steps are as follows: 1) Monitor tobacco use and prevention policies, 2) Protect people from tobacco use 3) Offer help to guit tobacco use, 4) Warn about the dangers of tobacco, 5) Enforce bans on tobacco advertising, promotion and sponsorship, 6) Raise taxes on tobacco (WHO, 2023), are the most effective but implemented tobacco intervention. A sizable tax increase would raise the price of tobacco productsmaking them less affordable-thereby discouraging initiation, encouraging people to quit smoking, and decreasing consumption (Tobacco Atlas, 2022b). In light of this on-site circumstance, advocacy initiatives might be used to carry out a health promotion strategy.

encourage better policies, advocacy efforts are needed for policy makers. This is in accordance with the implementation of health promotion strategies based on the Ottawa Charter (1984) which consists of Advocacy, Mediation and Enabling. Advocacy is an activity to convince policy makers that the proposed health program is important and requires policy support and decisions from these officials. Advocacy activities can be formal or informal. Formal advocacy can be carried out through presentations or seminars about proposed programs which are expected to receive support from relevant officials. Meanwhile, informal advocacy activities can include visiting officials relevant to the proposed program to request policy support and/or other facilities (Nurmala, 2018). One of the advocacy efforts regarding tobacco control is carried out by the Center for Indonesia"s Strategic Development Initiatives or CISDI.

CISDI was strategically placed on the committee for APACT 12 in 2018, hosted by Indonesia, its first international tobacco control conference. The theme of the 12th APACT is "Tobacco Control for Sustainable Development: Ensuring a Healthy Generation", which will be a positive momentum to utilize this effort to reflect Indonesia's concern and seriousness in achieving the SDGs by 2030 and protecting its young generation. This supports CISDI's involvement in the tobacco control movement as a small part of a larger goal to help drive the regulatory and institutional framework within the central government mainstream the SDGs in Indonesia's National Long Term Plan. Improving the atmosphere of correctional facilities to promote health has an influence on community and social welfare in addition to more efficient incarceration (Satria et al., 2024).

The CISDI Tobacco Control Division has a political mapping program which is demonstration of argumentation mapping through mass media in the form of news within a certain period of time. The mapping results are discussed with other organizations and then used to formulate advocacy strategies regarding increases in tobacco taxes and/or simplification of tobacco taxes (Murtiningtyas, 2021).

METHODS

This research involves CISDI. This research involves CISDI (Center for Indonesia's Strategic Development Initiatives) in 2021. The method used is qualitative methods with Focus Group explore Discussion techniques to information about CISDI's advocacy efforts to policy makers regarding tobacco control through increasing tobacco taxes. The FGD involved the CISDI tobacco control division and a team of students from the Faculty of Public Health, University. Airlangga The advocacy process and results are assessed through secondary political mapping data which contains official or public approval regarding the policy of increasing tobacco taxes.

RESULTS AND DISCUSSION

The advocacy process by CISDI starts from mapping the process of what activities need to be carried out to create a policy to increase tobacco taxes every month. Apart from that, CISDI also determines the main actors who have an influence on the implementation of these



activities. In May - August 2020, the carried activities out were the preparation of the APBN so that the national budget draft activities for next year were formed and expenditure plans and income targets for all ministries, with the main actor playing a role in budget planning being the Ministry of Finance (Ministry of Finance/MoF), Coordinating Minister of the Economy (CMoE) and consulted with legislative institutions and Bappenas. Then in August - September 2020, the activity carried out was to determine the amount of excise rates required with details to determine the excise revenue targets to increase state revenues as expected, with the main actor playing a role in budget planning being the Ministry of Finance (Ministry of Finance/ MoF), Coordinating Minister of the Economy (CMoE) and Ministry of Industry (Minister of Industry/Mol).

The amount of tobacco taxes has been determined, then the next activity is a hearing meeting which will be held internally by the Ministry of Finance, the Ministry of Finance with Industrial Players, the Ministry of Finance with other affected Ministries and the RDP with Commission IX of the DPR. In October - December 2020, the process of issuing a Minister of Finance Regulation regarding tobacco taxes policy which will be brought to a limited Cabinet Meeting with the president.

The advocacy strategy carried out by CISDI from May 2020 is by lobbying. Lobbying is a process, method, act of contacting or approaching (a government official or political leader) to influence a decision or issue that can benefit a number of people; an attempt to influence another party in deciding a case or issue, usually by negotiating informally or privately (KBBI, 2023). In May, the advocacy strategy carried out was to approach BKF to push for direction on excise policy to encourage consumption reduction in KEM-PPKF, champion at Commission

In August approaches were made to the affected Ministries (Ministry of Health, KemenPP-PA, Ministry of Social Affairs, Ministry of Agriculture, Ministry of Manpower) who will be involved in interministerial meetings. In September an approach was made to DJBC to obtain an update on the process of determining excise rates. In October 2020, he attended the Commission XI RDP on excise.

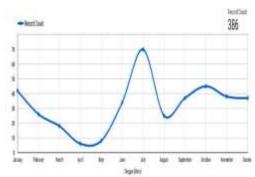


Figure 1. Political Mapping Data

It can be seen that the data obtained from January - December 2020 was 386 pieces of data consisting of news regarding tobacco taxes policy in Indonesia. Overall, the data obtained experienced increases and decreases. The highest data was obtained in July, which was the month approaching the APBN meeting which would be held by the ministry. The highest argumentation statements were found in July, namely 70 data, and the lowest were found in April, namely 6 data.

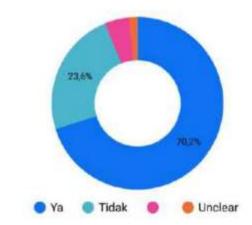


Figure 2. Political Mapping Result

From the total of 386 data, it can be seen that there are more arguments from officials or the public who agree with an increase in tobacco taxes. 70.2% agreed to increase tobacco taxes compared to arguments that did not agree if tobacco taxes was increased, namely 23.6% and 6.3% were arguments that could not be clearly concluded (unclear and null). From the previous data presentation, the results of the political mapping carried out for the policy of



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Received: 03-06-2024, Accepted: 03-07-2024, Published Online: 01-08-2024

increasing tobacco taxes were widely approved by officials and the public with the results obtained being that 70.2% expressed their agreement and the institution with the most voices in agreement was the Ministry of Finance and only 23.6% does not agree with an increase in tobacco taxes and most of the institutions that speak out are the APTI organization (Murtiningtyas, 2021).

Advocacy can increase awareness of the executive and legislative branches. This also applies to advocacy strengthen smoke-free regulations (Widati et al., 2022). Research shows that strong community support from advocacy results encourage policy makers accommodate these interests (Sugiyo & Henshall, 2020). The younger generation also needs to understand the value of advocacy. Getting youth involved in tobacco advocacy can help lay the groundwork for upcoming initiatives aimed at tobacco reduction. Since policy changes take time, it could be beneficial to keep an eye on youth development over the coming years, as well as community involvement and, eventually, tobacco policy changes (Ickes et al., 2020). By including the community at every level of the policy change processfrom data collecting to health equality advocacy campaigns-policy makers may be persuaded to pay attention and alter their policies to improve people's health (Folkerth et al., 2020).

Increases in excise taxes have a major impact on both the number of smoking-related deaths that are prevented and the prevalence of smoking. High taxation measures would mostly affect countries with middle- and uppermiddle-class incomes (Ho et al., 2018). In the Asia-Pacific area, low- and middleincome nations have significantly raised since the WHO Framework Convention (FCTC) was signed. Nonetheless, tobacco rates have persisted to be less than the FCTC declared WHO Best-practice tax rate of more than 75% of retail price (Ho et al., 2018).

The problems that occur in tobacco control can be clearly seen. The Ministry of Finance consistently increases tobacco excise until in 2021 tobacco taxes increases by an average of 12.5%, but there is still an increase in cigarette production. In 2020 Indonesia produced IDR 298.4 billion cigarettes and in 2021

cigarette production increased to IDR 320.1 billion cigarettes(CISDI, 2023a). The price elasticity of the possibility of quitting smoking in Indonesia is still low. When the price of a certain brand of cigarette increases due to excise taxes, smokers tend to switch to other brands of cigarettes with cheaper prices, even illegal cigarettes. Research shows that a price increase increases probability of quitting smoking by 0.15% to 0.17%. However, the government should consider increasing the excise tax on cigarettes at higher prices because price increases over the last two decades have not shown a decline in cigarette consumption (CISDI, 2023b).

CONCLUSION

Health promotion strategies through advocacy can increase awareness and support from the executive and legislative branches. Tobacco control through increasing tobacco taxes can be carried out if all parties encourage the government to make policies. However, in reality, an increase in tobacco taxes alone cannot reduce cigarette consumption in the community. Therefore, comprehensive tobacco control efforts called MPOWER are needed and at the same time address the presence of illegal cigarettes in circulation.

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