

# Global Youth Tobacco Survey (GYTS)

## Indonesia Report, 2014



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WHO Library Cataloguing-in-Publication data

World Health Organization, Regional Office for South-East Asia.

Global youth tobacco survey (GYTS): Indonesia report 2014.

- |  |               |
|--|---------------|
| 1. Tobacco Use – statistics and numerical data | 2. Demography |
| 3. Data Collection - methods                   | 4. Marketing  |
|  | I. Indonesia. |

ISBN 978-92-9022-487-7

(NLM classification: WM 290)

Suggested citation:

World Health Organization, Regional Office for South-East Asia. Global Youth Tobacco Survey (GYTS): Indonesia report, 2014. New Delhi: WHO-SEARO, 2015.

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Printed in India

Cover photo: Gary Hampton

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## Acronyms

CDC	United States Centers for Disease Control and Prevention
CI	confidence interval
FCTC	(WHO) Framework Convention on Tobacco Control
GYTS	Global Youth Tobacco Survey
MPOWER	a package of six evidence-based demand reduction measures: Monitor tobacco use and prevention policies; Protect people from tobacco smoke; Offer help to quit tobacco use; Warn about the dangers of tobacco; Enforce bans on tobacco advertising, promotion and sponsorship; Raise taxes on tobacco
NIHRD	National Institute of Health Research and Development
OSH	Office on Smoking and Health (United States)
SE	standard error
TFI	Tobacco Free Initiative
UN	United Nations
WHO	World Health Organization





## Message



Indonesia has taken several tobacco control initiatives at national and subnational levels. Indonesia has implemented graphic health warning on cigarette packages. Ban on smoking in public places and tobacco advertisements has been implemented by several local governments. Indonesia has been monitoring tobacco control among adults through Global Adult Tobacco Survey. Implementation of the Global Youth Tobacco Survey (GYTS) at the national level in 2014 demonstrates the government's commitment to protecting youth from the health effects of tobacco use.

The findings of the Indonesia Global Youth Tobacco Survey (GYTS) 2014 raise alarm about the high prevalence of tobacco use among youth aged 13–15 years in Indonesia. This trend calls for stricter enforcement of tobacco control laws.

The findings of the GYTS show that three out of five students were exposed to secondhand smoke (SHS) in homes and public places. While there are good initiatives at the subnational level to protect people from SHS, there is a need for strong initiatives to be taken countrywide against SHS.

Nearly two thirds of youth have easy access to tobacco products. The Ministry of Health together with other stakeholders must take the lead to minimize access to and availability of tobacco products among youth.

GYTS findings reveal that over 60% of students were exposed to direct advertising on electronic media, and nearly 10% of students to indirect advertisement. The Government of Indonesia needs to make concerted efforts for the strict enforcement of a ban on tobacco advertisements and thereby minimize their impact on youth. The government also needs to take stronger action against the tobacco industry and prevent tobacco companies from distributing free samples of tobacco products including objects with brand logos of their products.

According to the study, over 88% of smokers want to quit smoking and many have attempted to quit, but in the absence of tobacco cessation support, the results have been negligible. The government must urgently establish tobacco cessation facilities at all levels to support such efforts.

This report provides an opportunity to review the effects of public health policies and tobacco control interventions among youth in Indonesia. WHO commends and supports the efforts of the Government of Indonesia in its effort to protect both adults and youth from the scourge of tobacco use.



Dr Poonam Khetrapal Singh  
Regional Director



Ministry of Health  
Republic of Indonesia

## Foreword



The Ministry of Health, Republic of Indonesia has the pleasure and honour to release the results of the Global Youth Tobacco Survey (GYTS) 2014. This survey marks the first attempt made to collect a national representative sample of around 5900 students from across the country, and it provides the national estimates of tobacco use trends among the Indonesian school children studying from grade 7–9, aged 13–15 years, during the survey period.

The current report shows that one out of five students is a current user of tobacco. This trend has continued since we conducted the last survey in 2009. Almost two-thirds of them are also exposed to second-hand smoke at home or outside; and more than two thirds have noticed someone smoking inside the schools.

These findings are clearly alarming. The persistently high trends of tobacco use among children aged 13–15 years, may result in the rising trends in adolescents as those children grow up. In addition, exposure to second-hand smoke, including smoking by adults at schools poses a serious concern to us all. The findings and interpretations suggest the need for proactive and sustained tobacco control efforts by a wide variety of sectors of the government.

The national tobacco control roadmap (Minister of Health Decree No.40 Year 2013) has targeted 1% decrease of youth smoking prevalence

per year during 2015–2019. The Ministry of Health also intends to intensify the drive to decrease youth smoking prevalence beyond 2020.

The current report is crucial for planning and implementing tobacco control strategies, not only for the youth, but for all age groups as well. The Ministry of Health remains committed to taking stronger measures to ensure successful tobacco control strategies, and expanding its strategic outreach to other sectors, to reverse tobacco use trends in our young generation.

This survey is a collaborative activity of the National Institute of Health Research and Development, Ministry of Health, and international organizations including CDC Foundation and US Centers for Disease Control and Prevention, Tobacco Free Initiative of WHO Headquarters, Regional Office for South-East Asia and Country Office for Indonesia — to all of whom I would like to express my gratitude and high appreciation.

Finally, I do hope that this document will take us a long way towards controlling tobacco use, enabling people to live healthier and happier lives without tobacco.



Prof. Dr. dr. Nila Farid Moeloek, Sp. K (K)  
Minister of Health of Republic of Indonesia

## Acknowledgements

The Global Youth Tobacco Survey (GYTS) Indonesia 2014 was successfully completed due to the efforts and involvement of numerous organizations and individuals at different stages of the survey. We would like to thank everyone who helped to make the survey a success.

We would like to thank the National Institute of Health Research and Development (NIHRD), the development agency, the Department of Health as the implementing agency for the GYTS in Indonesia, and the Ministry of Education, which allowed students to participate in the survey.

At the NIHRD, we express our gratitude to Endang Indriasih, researcher, for taking the lead in coordinating all the tasks related to implementation of GYTS Indonesia, 2014, commencing with preparation of the study to the final reporting, and Dr Soewarta Kosen, senior researcher, for sharing his knowledge and experience. We would like to thank Anny Yulianti, Tita Rosita, Tati Suryati and Ingan Ukur Tarigan for their work in preparing the report. Our thanks also go to the other researchers who helped in data collection.

We are grateful for the support of the World Health Organization (WHO) and the United States Centers for Disease Control and Prevention (CDC) for providing technical and financial support to develop and print this document.

These acknowledgements would not be complete without expressing our appreciation for the teachers who allowed the researchers to utilize their teaching hours, and the students who were willing to take the time to answer our questions with great patience and without any expectation from the GYTS.



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Disclaimer: The views expressed in this document are not necessarily those of the GYTS collaborating organizations.



## Executive summary

The Global Youth Tobacco Survey (GYTS) Indonesia, 2014, is a national representative school-based survey of students in the age group of 13–15 years, irrespective of classes/grades. The GYTS uses a global standardized methodology for constructing the sample frame, selecting schools and classes, and processing data. It is intended to enhance the capacity of countries to design, implement and evaluate tobacco control and prevention measures.

The survey used a two-stage sample design, with schools selected proportional to their enrolment size. In the first stage, 75 schools were selected. The classrooms within selected schools were chosen randomly and all students in selected classes were eligible to participate in the survey. The survey used a standard global core questionnaire to elicit information on tobacco use, cessation, secondhand smoke, access and availability, exposure to anti-tobacco information, awareness and receptivity to tobacco marketing, knowledge and attitudes.

The GYTS was conducted by the National Institute of Health Research and Development (NIHRD), Ministry of Health. Technical assistance was provided by the World Health Organization (WHO) and the United States Centers for Diseases Control and Prevention (CDC). Financial support for the survey was provided by the WHO Regional Office for South-East Asia. The findings of the survey are given below.

**Tobacco use:** In Indonesia, 36.2% of boys and 4.3% of girls (comprising 20.3% of all students) currently use tobacco in smoked and/or smokeless form. Among current tobacco users, 18.3% consume cigarettes. Overall, 35.6% smoke one stick per day, whereas more than half of girls (58.3%) smoke less than one cigarette per day. The age at initiation into cigarette smoking of 43.2% of those who have ever smoked a cigarette is 12 to 13 years.

**Cessation:** Among current smokers, 81.8% confessed that they had tried to stop smoking in the past 12 months. Those who wanted to stop



smoking comprised 88.2%, but only 24.0% had ever received help/advice from a programme or professional to stop smoking.

**Secondhand smoke:** Overall, almost three out of five students (57.3%) were exposed to smoke in their homes and 60.1% were exposed to secondhand smoke in enclosed public places. Students who thought that smoking should be banned in all outdoor public places comprised 80.9%, whereas 89.4% wanted it to be banned inside enclosed public places as well. 69% of students claimed to have seen someone smoking inside the school building or outside on school property.

**Access and availability:** Roughly three out of five (58.2%) students who currently smoked cigarettes usually purchased their cigarettes in stores/shops. The percentage of students who were not refused purchase of cigarettes because they were minors was 64.5%.

**Exposure to anti-tobacco information:** Among current smokers, 71.3% of those who noticed health warnings thought about quitting smoking because of such warnings on cigarette packages, while 50.9% of those who never smoked thought about not starting smoking because of the health warnings on cigarette packages.

**Awareness and receptivity to tobacco marketing:** Overall, 9.0% of students owned an object with a cigarette brand logo on it, while 7.9% of students were offered free cigarettes by a tobacco company representative.

**Knowledge and attitudes:** More than one third of the students (35.5%) thought that it is difficult to quit once someone starts smoking tobacco, while 72.5% thought that other people's tobacco smoking was harmful to them.

Government and other stakeholders of tobacco control should come up with comprehensive tobacco control policy and implement it effectively. Taxation on tobacco products should be increased so that it becomes unaffordable to youth.



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## Introduction



## 1. Introduction

Tobacco use is the leading global cause of preventable death. The World Health Organization (WHO) attributes nearly 6 million deaths a year to tobacco. This figure is expected to rise to more than 8 million deaths a year by 2030. Most people who use tobacco begin using it before the age of 18 years.

The Global Youth Tobacco Survey (GYTS) was developed by the Tobacco Free Initiative (TFI), WHO and the Office on Smoking and Health (OSH) of the United States Centers for Disease Control and Prevention (CDC), in collaboration with a range of countries representing the six WHO regions. It collects comprehensive tobacco prevention and control information on youth. The GYTS provides a global standard to systematically monitor tobacco use among youth and track key tobacco control indicators. The GYTS is a nationally representative school-based survey of students 13–15 years of age, which uses a consistent and standard protocol across countries. It is intended to generate comparable data within and across countries.

### 1.1 Country demographics

Indonesia is a Member State of the WHO South-East Asia Region and is considered a low–middle-income country. According to the 2010 national census, the population of Indonesia was 237.6 million, with 58% living on the island of Java, the world’s most populous island. The annual national population growth rate of Indonesia between 2000 and 2010 was 1.49%. According to projections by the United Nations (UN) with regard to the future absolute population, Indonesia is expected to have a population that exceeds 250 million inhabitants by 2015, 270 million by 2025, 285 million by 2035 and 290 million by 2045.

Indonesia is an archipelagic island country, lying between the Indian Ocean and the Pacific Ocean, extending 5120 km (3181 miles) from east to west, and 1760 km (1094 miles) from north to south. It encompasses an estimated 17 508 islands, of which only 6000 are inhabited. Indonesia’s

total land area is 1 919 317 square kilometer (741 052 square miles). Included in Indonesia's total territory is another 93 000 square kilometer (35 908 square miles) of island seas (straits, bays and other bodies of water).

## 1.2 WHO Framework Convention on Tobacco Control and MPOWER

In response to the globalization of the tobacco epidemic, the 191 Member States of WHO unanimously adopted the WHO Framework Convention on Tobacco Control (FCTC) at the Fifty-sixth World Health Assembly in May 2003. The FCTC is the world's first public health treaty on tobacco control. It is the driving force behind, and blueprint for, the global response to the pandemic of tobacco-induced deaths and diseases. The treaty embodies a coordinated, effective and urgent action plan to curb tobacco consumption and lays out cost-effective tobacco control strategies for public policies, such as banning direct and indirect tobacco advertising, increasing tobacco taxes and prices, promoting smoke-free public places and workplaces, displaying prominent health messages on tobacco packages, and tobacco surveillance, research and exchange of information.

To help countries fulfil WHO FCTC obligations, WHO introduced MPOWER in 2008, a technical package of six evidence-based tobacco control measures that are proven to reduce tobacco use and save lives:

- ◆ **M**onitor tobacco use and prevention policies
- ◆ **P**rotect people from tobacco smoke
- ◆ **O**ffer help to quit tobacco use
- ◆ **W**arn about the dangers of tobacco
- ◆ **E**nforce bans on tobacco advertising, promotion and sponsorship
- ◆ **R**aise taxes on tobacco

The GYTS supports WHO MPOWER by monitoring country-specific data on key tobacco indicators, including prevalence, knowledge and behaviour.

### 1.3 Purpose and rationale

The GYTS enhances countries' capacity to monitor tobacco consumption and initiation of tobacco use among youth, guides national tobacco prevention and control programmes, and facilitates comparison of tobacco-related data at the national, regional and global levels. Results from the GYTS are also useful for documenting the changes in different variables of tobacco control measures in order to monitor implementation of different provisions of the tobacco control law and relevant Articles of the WHO FCTC.

The rationale for Indonesia's participation in the GYTS includes the following:

- ◆ Indonesia is the fifth-largest producer of tobacco leaf.
- ◆ Based on the National Baseline Health Research, the prevalence of smoking among Indonesians aged 15 years and above increased from 34.2% in 2007 to 34.7% in 2010, and to 36.3% in 2013.
- ◆ Based on the National Baseline Health Research 2013, the percentages initiating and using tobacco in each age group are: 5–9 years – 0.7%; 10–14 years – 9.5%; 15–19 years – 50.3%; 20–24 years – 26.7%; 25–29 years – 7.6%; ≥30 years – 5.2%.
- ◆ A study by the World Bank and WHO in 2005 found that low-income households spent 7.2% of their income on tobacco.
- ◆ Based on the National Baseline Health Research 2013, an average of 12.3 cigarettes sticks are consumed per person per day at an average price of Rp 600.00 (US\$ 0.04) per stick.
- ◆ Total medical expenditure on selected major diseases (629 017 hospitalized cases) attributed to tobacco use in 2010 was Rp 1.85 trillion; these included chronic obstructive pulmonary disease, coronary heart disease, selected neoplasms/cancers and perinatal disorders.
- ◆ There have been no studies on youth tobacco use at the national level.

## 1.4 Current state of policy

Indonesia is the only country in the WHO South-East Asia Region that has not signed the FCTC. However, Indonesia is committed to implementing the MPOWER policy package (Sixty-first Regional Committee resolution).

Government Regulation No 81/1999 on Tobacco Control was issued as an implementation document for tobacco control measures stated in the 1992 Indonesian Health Act. The articles include regulations on advertisements, health warning labels, restrictions on tar and nicotine levels, public disclosure of cigarette content, penalties and enforcement, regulatory authority, public participation and provisions for a smoke-free environment. This regulation, however, did not address issues of economics, liability, sale to minors and sponsorships.

Government Regulation No 38/2000 on Tobacco Control basically revised Regulation No 81/1999 on tobacco advertisements, permitting advertisements in the electronic media in addition to printed and outdoor media, and prolonging the deadline for industries to comply with new regulations by 5–7 years, depending on the type of industry. In 2003, the government issued Regulation No 19/2003, which replaced Regulation No 38/2000 and included aspects related to the size and types of messages in health warning labels, time restrictions for advertising in the electronic media, and testing of tar and nicotine levels.

Indonesian Health Law No 36/2009 states that tobacco and tobacco products are considered to be addictive substances, and will be regulated to protect the health of the individual, family, community as well as the environment. Besides, more than 20 local governments (province, district and city) have enacted local laws on smoke-free environments.

In 2014, Indonesia issued government regulations on specific textual and pictorial health warnings required to be displayed on every tobacco advertisement and on packets of all smoked tobacco products; however, it has been implemented on cigarette packets only. Smokeless tobacco products are not covered by the law.

The Indonesian Government has developed smoke-free policies that cover all public areas and workplaces to support the cessation programme.

Moreover, in many cities and districts, specific regulations on smoke-free areas have been officially issued.

Secondhand smoke can be found anywhere, even in places where smoking is strictly prohibited, such as schools, hospitals and public transport. This is despite the ordinance enacted by the government on smoke-free areas.

The government has promulgated the Tobacco Control Act and the Ministry of Health's Regulation on Tobacco Control, which include the aspect of controlling advertisements, promotion activities and sponsorships of tobacco products. This limitation applies to the print and electronic mass media.

## 1.5 Other tobacco surveys

The GYTS was conducted in Indonesia in 2003, 2006 and 2009 at the subnational level. In addition to the GYTS, the Global Adult Tobacco Survey, Indonesia, was conducted in 2011.







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## Methodology



## 2. Methodology

### 2.1 Questionnaire

The GYTS questionnaire contained 61 multiple-choice questions. The survey included 43 questions from the GYTS Standard Core Questionnaire and 18 selected optional questions. The final questionnaire was translated into Indonesian and translated back into English to check for accuracy. The 2014 Indonesia questionnaire is provided in Annex 1.

### 2.2 Sampling design

The GYTS was a school-based survey that employed a two-stage cluster sample design to produce a nationally representative sample of students in grades 7, 8 and 9. The sampling frame consisted of all school types that had grades 7, 8 and 9. In the first stage, schools were selected with a probability proportional to school enrollment size. The second sampling stage consisted of systematic equal probability sampling (with a random start) of classes from each school selected during the first stage. Seventy-two schools, 208 classes and 5986 students participated in the GYTS.

### 2.3 Data collection

Data collection took place from 21 September 2013 to 20 June 2014, and was supported by 11 researchers.

Survey procedures were designed to protect the students' privacy by allowing for anonymous and voluntary participation. The questionnaire was self-administered in the classroom. Students recorded their responses directly on an answer sheet that could be scanned by a computer.

### 2.4 Data analysis

A weighting factor was applied to each student record to adjust for probability of selection, nonresponse and poststratification adjustment to population estimates. SUDAAN, a software package for statistical

analysis of complex survey data, was used to calculate weighted prevalence estimates and standard errors (SEs) of the estimates (95% confidence intervals [CI] were calculated from the SEs). Frequency tables were developed for the survey questions that were considered key tobacco control indicators from the GYTS. Indicators were in accordance with the WHO FCTC and MPOWER technical package.

Table 1 provides information on the sample size and response rate. The GYTS Indonesia 2014 was conducted in 72 schools. A total of 5986 eligible students in grades 7–9 completed the survey, of which 4313 were aged 13–15 years (2029 boys, 2284 girls). The school response rate was 100%, the class response rate was 98.1% and the student response rate was 91%. The overall response rate was 89.3%.

**Table 1:** Sample sizes and response rates, by region (unweighted) – GYTS Indonesia, 2014

	Region			Total
	A	B	C	
School level				
Number of sampled schools	25	23	24	72
Number of participating schools	25	23	24	72
School response rate (%)	100.0	100.0	100.0	100.0
Class level				
Number of sampled classes	72	77	63	212
Number of participating classes	69	77	62	208
Class response rate (%)	95.8	100.0	98.4	98.1
Student level				
Number of sampled students	2582	2240	1757	6579
Number of participating students	2310	2135	1541	5986
Student response rate (%)	89.5	95.3	87.7	91.0
Overall response rate (%) <sup>1</sup>	85.7	95.3	86.3	89.3

<sup>1</sup>Overall response rate = School response rate x Class response rate x Student response rate  
Source: GYTS Questionnaire.



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## Results



## 3. Results

### 3.1 Tobacco use

For the 2014 GYTS, the information on tobacco use consisted of the use of smoked and smokeless tobacco products. Smoked tobacco products include cigarettes, hand-rolled cigarettes and *kretek* (clove cigarettes), among others.

In Indonesia, 32.1% of students had ever used any smoked tobacco product. By gender, boys were more likely than girls to ever use any tobacco product. The current use of any tobacco product by youth was 20.3%, of which 19.4% were current tobacco smokers and 2.1% were current smokeless tobacco users. In addition, 8.8% indicated that they were susceptible to start smoking in future.

The detailed break-up of tobacco use among the target age group of 13–15-year-olds is given in Table 2. Details of daily cigarette consumption are given in Table 3.

**Table 2:** Detailed tobacco use status among students 13–15 years old, by gender – GYTS Indonesia, 2014

	Overall	Boys	Girls
	Percentage (95% CI)		
Smoked tobacco			
Current tobacco smokers <sup>1</sup>	19.4 (15.0–24.8)	35.3 (27.4–44.0)	3.4 (2.2–5.3)
Current cigarette smokers <sup>2</sup>	18.3 (13.9–23.6)	33.9 (26.1–42.7)	2.5 (1.4–4.3)
Frequent cigarette smokers <sup>3</sup>	1.8 (1.0–3.5)	3.7 (1.9–6.9)	0 (0.0–0.2)
Ever tobacco smokers <sup>4</sup>	32.1 (26.7–37.9)	54.1 (45.4–62.6)	9.1 (6.7–12.3)
Ever cigarette smokers <sup>5</sup>	30.9 (25.2–37.3)	53.0 (43.9–62.0)	8.0 (5.5–11.5)
Ever smokers of other tobacco <sup>6</sup>	5.5 (4.5–6.7)	8.9 (7.2–11.0)	1.7 (1.0–2.9)



	Overall	Boys	Girls
	Percentage (95% CI)		
Smokeless tobacco			
Current smokeless tobacco users <sup>7</sup>	2.1 (1.5–2.9)	3.0 (2.2–4.2)	1.1 (0.7–1.8)
Ever smokeless tobacco users <sup>8</sup>	4.2 (3.2–5.5)	5.7 (4.2–7.6)	2.6 (1.8–3.8)
Tobacco use			
Current tobacco users <sup>9</sup>	20.3 (15.8–25.7)	36.2 (28.3–44.9)	4.3 (3.0–6.1)
Ever tobacco users <sup>10</sup>	34.0 (28.5–39.8)	55.9 (47.2–64.2)	11.1 (8.5–14.4)
Susceptibility to tobacco use			
Never tobacco users susceptible to tobacco use in the future <sup>11</sup>	8.8 (7.3–10.5)	14.2 (11.2–17.8)	6.0 (4.4–8.1)
Non-smokers who thought they might enjoy smoking a cigarette <sup>12</sup>	4.5 (3.7–5.6)	6.0 (4.5–8.0)	3.7 (2.8–5.0)

<sup>1</sup>Smoked tobacco any time during the past 30 days.

<sup>2</sup>Smoked cigarettes at any time during the past 30 days.

<sup>3</sup>Smoked cigarettes on 20 or more days of the past 30 days.

<sup>4</sup>Ever smoked any tobacco, even one or two puffs.

<sup>5</sup>Ever smoked cigarettes, even one or two puffs.

<sup>6</sup>Ever smoked tobacco other than cigarettes, even one or two puffs.

<sup>7</sup>Used smokeless tobacco any time during the past 30 days.

<sup>8</sup>Ever used smokeless tobacco.

<sup>9</sup>Smoked tobacco and/or used smokeless tobacco any time during the past 30 days.

<sup>10</sup>Ever smoked tobacco and/or used smokeless tobacco.

<sup>11</sup>Susceptible to future tobacco use includes those who answered “Definitely yes”, “Probably yes”, or “Probably not” to using tobacco if one of their best friends offered it to them, or those who answered “Definitely yes”, “Probably yes”, or “Probably not” to using tobacco during the next 12 months.

<sup>12</sup>Those who answered “Agree” or “Strongly agree” to the statement: “I think I might enjoy smoking a cigarette”.

Among current cigarette smokers, 36% smoked less than 1 stick per day, and 35.6% smoked 1 stick per day. The percentage of students who smoked more than 10 sticks a day was 0.3% and those who smoked more than 20 sticks per day was 0.5% (Table 3).

Table 4 shows the age at initiation of cigarette smoking. Most students (43.2%) started smoking cigarettes at 12–13 years of age, while 19.8% started smoking when they were less than 10 years of age.

**Table 3:** Cigarettes smoked per day among current cigarette smokers 13–15 years old, by gender – GYTS Indonesia, 2014

Number of cigarettes usually smoked <sup>1</sup>	Overall	Boys	Girls
	Percentage (95% CI)		
Less than 1 per day	36.0 (29.2–43.5)	34.6 (27.9–41.9)	58.3 (43.0–72.2)
1 per day	35.6 (31.0–40.6)	35.6 (30.9–40.6)	31.5 (19.1–47.3)
2–5 per day	22.1 (17.7–27.3)	23.1 (18.3–28.7)	10.2 (5.0–19.6)
6–10 per day	5.5 (3.2–9.2)	5.9 (3.5–9.9)	0
11–20 per day	0.3 (0.1–1.1)	0.3 (0.1–1.2)	0
More than 20 per day	0.5 (0.1–1.8)	0.5 (0.1–2.0)	0
Total	100.0	100.0	100.0

<sup>1</sup> On the days that current cigarette smokers smoked cigarettes during the past 30 days.

**Table 4:** Age at cigarette smoking initiation among ever cigarette smokers 13–15 years of age by gender – GYTS Indonesia, 2014

Age when first trying a cigarette <sup>1</sup> (years)	Overall	Boys	Girls
	Percentage (95% CI)		
7 or younger	8.9 (7.2–11.1)	7.3 (5.6–9.3)	21.5 (12.5–34.5)
8–9	10.9 (9.1–13.0)	10.9 (9.0–13.2)	11.0 (6.7–17.6)
10–11	25.6 (22.7–28.8)	26.7 (23.4–30.4)	18.0 (11.9–26.3)
12–13	43.2 (39.5–46.9)	43.4 (39.6–47.3)	40.0 (30.0–50.9)
14–15	11.4 (9.2–14.0)	11.7 (9.5–14.2)	9.5 (4.3–19.5)
Total	100.0	100.0	100.0

<sup>1</sup> Among those who had ever tried a cigarette.

Table 5 shows the percentage of current smokers who were showing signs of smoking dependence by gender.

**Table 5:** Current smokers 13–15 years of age who were showing signs of smoking dependence, by gender – GYTS Indonesia, 2014

	Overall	Boys	Girls
	Percentage (95% CI)		
Signs of smoking dependence <sup>1</sup>	47.2 (40.9–53.7)	48.2 (41.3–55.1)	37.5 (21.0–57.6)

<sup>1</sup> Those who answered: they sometimes or always smoke tobacco or feel like smoking tobacco first thing in the morning, or they start to feel a strong desire to smoke again within one full day after smoking.

## 3.2 Cessation

Cessation Indicators for cessation of smoking tobacco among current smokers by gender are shown in Table 6. In the past 12 months, overall, 81.8% of current smokers 13–15 years of age tried to stop smoking, whereas only 24% students had ever received help/advice from a programme or professional to stop smoking.

**Table 6:** Smoking tobacco cessation indicators among current smokers 13–15 years of age, by gender – GYTS Indonesia, 2014

Current smokers	Overall	Boys	Girls
	Percentage (95% CI)		
Tried to stop smoking in the past 12 months	81.8 (76.6–86.0)	81.5 (75.9–86.1)	84.4 (68.9–93.0)
Want to stop smoking now	88.2 (84.1–91.4)	87.8 (83.6–91.0)	94.0 (76.5–98.7)
Thought they would be able to stop smoking if they wanted to	91.8 (87.1–94.9)	91.8 (86.8–95.1)	90.5 (78.3–96.2)
Have ever received help/advice from a programme or professional to stop smoking	24.0 (19.1–29.6)	23.0 (18.2–28.6)	39.7 (26.1–55.1)

## 3.3 Secondhand smoke

The GYTS 2014 provides information on secondhand smoke in schools, homes and public places that are accessed by students (Table 7). Among all students who participated in the survey, 69% saw someone smoking inside the school building or outside on the school property, and 57.3% students were exposed to tobacco smoke at home.

**Table 7:** Students 13–15 years old who were exposed to tobacco smoke during the past 30 days, by gender – GYTS Indonesia, 2014

	Overall	Boys	Girls
	Percentage (95% CI)		
Exposed to tobacco smoke at home in the past 7 days	57.3 (50.3–64.1)	61.7 (53.9–69.0)	52.7 (45.9–59.3)
Exposed to tobacco smoke inside any enclosed public place in the past 7 days	60.1 (54.6–65.3)	62.1 (55.2–68.6)	57.8 (52.8–62.7)
Exposed to tobacco smoke at any outdoor public place in the past 7 days	63.9 (59.5–68.0)	66.3 (60.8–71.4)	61.3 (57.4–65.0)
Saw someone smoking inside the school building or outside on school property	69.0 (63.8–73.7)	67.8 (61.8–73.2)	70.3 (64.9–75.3)

### 3.4 Access and availability

Table 8 gives the sources from where cigarette smokers obtained cigarettes.

**Table 8:** Source for obtaining cigarettes among cigarette smokers 13–15 years old, by gender – GYTS Indonesia, 2014

Source <sup>1</sup>	Overall	Boys	Girls
	Percentage (95% CI)		
Purchased from a store or shop	58.2 (50.3–65.7)	58.8 (50.1–66.9)	54.6 (36.7–71.4)
Purchased from a street vendor	1.7 (0.9 – 3.3)	1.8 (0.9–3.6)	0
Purchased from a kiosk	5.0 (2.8–8.9)	4.8 (2.5–9.2)	8.9 (2.0–31.7)
Purchased from a vending machine	0.2 (0.0 – 0.9)	0.1 (0.0 –0.9)	1.5 (0.2–11.7)
Obtained from someone else	32.1 (25.4–39.6)	31.8 (24.6–40.1)	29.8 (19.2–43.2)
Obtained some other way	2.8 (1.5–5.2)	2.7 (1.3–5.2)	5.2 (1.2–20.1)
Total	100.0	100.0	100.0

<sup>1</sup> How cigarette smokers obtained the cigarette they last smoked during the past 30 days.

Among current cigarette smokers, 58.2% obtained cigarettes by buying them from a store or shop.

Among current cigarette smokers who bought cigarettes, 64.5% were not prevented from buying them because of their age (Table 9).

**Table 9:** Current cigarette smokers 13–15 years old who were not prevented from buying cigarettes because of their age, by gender – GYTS Indonesia, 2014

	Overall	Boys	Girls
	Percentage (95% CI)		
Current cigarette smokers who were not prevented from buying cigarettes because of their age <sup>1</sup>	64.5 (59.0–69.7)	64.4 (58.6–69.9)	–

<sup>1</sup>Among those who tried to buy cigarettes during the past 30 days.

Table 10 gives the unit of purchase of cigarettes among current cigarette smokers 13–15 years of age. Most current cigarette smokers (74.3%) purchased cigarettes as individual sticks.

**Table 10:** Unit of cigarette purchase among current cigarette smokers 13–15 years of age, by gender – GYTS Indonesia, 2014

Unit of purchase <sup>1</sup>	Overall	Boys	Girls
	Percentage (95% CI)		
Individual sticks	74.3 (66.9–80.5)	74.1 (66.9–80.1)	–
Packs	24.6 (18.1–32.5)	24.8 (18.4–32.5)	–
Cartons	0.5 (0.2–1.5)	0.6 (0.2–1.6)	0
Rolls	0.5 (0.2–1.5)	0.5 (0.1–1.5)	–
Loose tobacco for hand-rolled cigarettes	0.1 (0.0–0.9)	0.1 (0.0–0.9)	0
Total	100.0	100.0	100.0

<sup>1</sup>Based on the last purchase, among those who bought cigarettes during the past 30 days.

Table 11 gives the cost of a pack of cigarettes as perceived by students 13–15 years of age by gender. Most students (49.1%) thought that the cost was between Rp 10 000 and Rp 15 000 (US\$ 0.74–US\$ 1.11).

**Table 11:** Estimated cost of cigarettes among students 13–15 years old, by gender and smoking status – GYTS Indonesia, 2014

Cost of a pack (20 cigarettes) <sup>1</sup>	Overall	Boys	Girls
	Percentage (95% CI)		
Less than Rp 5100	7.1 (5.6–9.0)	7.9 (5.9–10.5)	5.8 (4.2–7.9)
Rp 5100 –10 000	17.7 (14.4–21.6)	16.9 (13.4–21.1)	19.1 (14.8–24.4)
Rp 10 100–15 000	49.1 (45.3–52.9)	51.4 (46.6–56.2)	45.1 (39.6–50.6)
Rp 15 100–20 000	21.6 (19.1–24.4)	20.9 (17.8–24.3)	23.0 (19.4–26.9)
Rp 20 100–25 000	3.3 (2.1–5.1)	2.2 (1.6–2.9)	5.4 (2.8–10.0)
Rp 25 100–30 000	0.7 (0.3–1.4)	0.7 (0.3–1.5)	0.7 (0.2–2.5)
Rp 30 100–40 000	0.5 (0.2–1.4)	0.1 (0.0–0.5)	1.1 (0.3–3.7)
<b>Total</b>	100.0	100.0	100.0

<sup>1</sup> On average, how much students think a pack of 20 cigarettes costs.

## 3.5 Media

### Anti-tobacco messages

Table 12 shows that 7 out of 10 students noticed anti-tobacco messages in the media, such as television, radio, Internet, billboards, posters, newspapers, magazines and movies in the past 30 days. About 7 out of 10 students (69.3%) were taught in school about the dangers of tobacco use in the past 12 months.

**Table 12:** Anti-tobacco information noticed among students 13–15 years old, by gender – GYTS Indonesia, 2014

	Overall	Boys	Girls
	Percentage (95% CI)		
Noticed anti-tobacco messages in the media <sup>1</sup> in the past 30 days <sup>2</sup>	70.1 (67.2–72.9)	70.6 (66.8–74.1)	69.6 (66.9–72.2)
Noticed anti-tobacco messages at sporting or community events			
Among all students in the past 30 days	31.4 (28.2–34.8)	35.8 (32.3–39.5)	26.7 (23.0–30.7)
Among those who attended sporting or community events in the past 30 days	47.3 (42.6–52.1)	50.5 (45.6–55.3)	43.3 (37.6–49.2)
Taught in school about the dangers of tobacco use in the past 12 months <sup>2</sup>	69.3 (66.7–71.7)	70.5 (67.2–73.7)	68.0 (65.0–70.8)

<sup>1</sup> For example, television, radio, Internet, billboards, posters, newspapers, magazines, movies.

<sup>2</sup> Among all students aged 13–15 years.

Among current smokers 13–15 years of age who noticed health warnings on cigarette packages, 71.3% thought about quitting smoking because of such warnings (Table 13).

**Table 13:** Noticing health warnings on cigarette packages among current and non-smokers 13–15 years of age, by gender – GYTS Indonesia, 2014

	Overall	Boys	Girls
	Percentage (95% CI)		
Current smokers who noticed health warnings on cigarette packages <sup>1</sup>	89.8 (88.0–91.4)	90.8 (88.9–92.5)	78.4 (65.0–87.6)
Thought about quitting smoking because of health warnings on cigarette packages <sup>1</sup>			
Among current smokers	64.0 (58.0–69.6)	63.6 (57.3–69.4)	67.1 (51.9–79.3)
Among current smokers who noticed health warnings	71.3 (64.7–77.1)	70.0 (63.0–76.1)	85.6 (71.6–93.3)
Non-smokers who thought about not starting smoking because of health warnings on cigarette packages <sup>1,2</sup>	50.9 (46.2–55.6)	60.2 (54.4–65.7)	45.4 (39.1–51.9)

<sup>1</sup> During the past 30 days.

<sup>2</sup> Among non-smokers who noticed health warnings on cigarette packages in the past 30 days.

### 3.5 Tobacco marketing

The ban on advertisements of tobacco products has, in a limited way, implications for the marketing strategy of the tobacco industry. The tobacco industry is using various creative marketing tactics to attract young people.

Half of the students who participated in this survey noticed tobacco advertisements or promotions at points of sale; 58.2% noticed someone using tobacco on television, videos or movies; and 62.7% noticed someone using tobacco among those who watched television, videos, or movies in the past 30 days (Table 14).

**Table 14:** Tobacco marketing noticed among students 13–15 years of age, by gender – GYTS Indonesia, 2014

	Overall	Boys	Girls
	Percentage (95% CI)		
Noticed tobacco advertisements or promotions at points of sale			
Among all students in the past 30 days	50.0 (46.2–53.9)	54.2 (49.3–59.1)	45.6 (41.7–49.6)
Among those who visited a point of sale in the past 30 days	60.7 (56.2–64.9)	64.5 (59.3–69.3)	56.5 (51.6–61.2)
Noticed someone using tobacco on television, videos, or movies			
Among all students in the past 30 days	58.2 (54.1–62.1)	61.5 (56.4–66.3)	54.6 (50.8–58.4)
Among those who watched television, videos, or movies in the past 30 days	62.7 (57.9–67.3)	66.1 (60.3–71.4)	59.1 (54.6–63.5)
Ever offered a free tobacco product from a tobacco company representative	7.9 (6.3–9.9)	12.6 (9.8–15.9)	3.0 (2.1–4.5)

Overall, 9.0% of students stated that they owned something with a tobacco brand logo on it and 15.6% of non-tobacco users owned something with a tobacco brand logo on it or might in the future (Table 15).



**Table 15:** Ownership and receptivity to tobacco marketing among students 13–15 years old, by gender – GYTS Indonesia, 2014

	Overall	Boys	Girls
	Percentage (95% CI)		
Students who owned something with a tobacco brand logo on it <sup>1</sup>	9.0 (7.4–10.9)	11.9 (9.8–14.5)	5.9 (4.5–7.7)
Non-tobacco users who owned something with a tobacco brand logo on it, or might in the future <sup>2,3</sup>	15.6 (13.4–18.1)	18.9 (15.4–22.9)	13.9 (11.5–16.7)

<sup>1</sup> For example, a T-shirt, pen, backpack.

<sup>2</sup> Those who might use or wear something that has a tobacco company or product name or picture on it.

<sup>3</sup> Considered highly receptive to tobacco marketing (at risk for future tobacco use).

### 3.6 Knowledge and attitudes

Among students 13–15 years of age, 35.5% thought that it is difficult to quit smoking tobacco once someone starts (Table 16).

**Table 16:** Knowledge and attitudes towards smoking cessation and social smoking among students 13–15 years of age, by gender – GYTS Indonesia, 2014

Students	Overall	Boys	Girls
	Percentage (95% CI)		
Definitely thought it is difficult to quit once someone starts smoking tobacco	35.5 (33.2–37.9)	37.6 (35.1–40.1)	33.4 (30.5–36.4)
Thought smoking tobacco helps people feel more comfortable at celebrations, parties and social gatherings	8.9 (7.3–10.9)	11.2 (8.8–14.0)	6.7 (5.3–8.4)

A substantial percentage (72.5%) of students definitely thought that other people's tobacco smoking was harmful to them, and 89.4% of students were in favour of banning smoking at enclosed public places (Table 17).

**Table 17:** Knowledge and attitudes towards secondhand smoke among students 13–15 years of age, by gender – GYTS Indonesia, 2014

Students	Overall	Boys	Girls
	Percentage (95% CI)		
Definitely thought other people's tobacco smoking is harmful to them	72.5 (69.8–75.0)	67.6 (64.9–70.3)	77.6 (74.1–80.7)
Favoured banning smoking at enclosed public places	89.4 (87.1–91.4)	87.6 (85.3–89.6)	91.3 (88.4–93.5)
Favoured banning smoking at outdoor public places	80.9 (77.8–83.5)	78.0 (74.7–80.9)	83.9 (80.3–86.9)



## Discussion



## 4. Discussion

### 4.1 Discussion of survey findings

#### Tobacco use

The status of tobacco use among students was as follows:

- ◆ One in five students (20.3%) were tobacco users (36.2% of boys and 4.3% of girls).
- ◆ Among all students who were currently tobacco smokers (19.4%), 18.3% were cigarette smokers. Of them, 35.6% smoked one cigarette stick per day. Among girls, 58.3% smoked less than one cigarette per day.
- ◆ Among non-cigarettes smokers, 43.2% started smoking at 12–13 years of age.

#### Cessation

- ◆ As many as 81.8% of current smokers had tried to stop smoking in the past 12 months. The percentage of students who wanted to stop smoking was as high as 88.2%; however, only 24.0% had ever received help/advice from a programme or professional to stop smoking.

In Indonesia, almost every school has at least one assigned preceptor. Ideally, this preceptor, a special administration staff, or an external person (not part of the school staff) could be assigned with the special job of a counsellor. Such a person would assist students and act as a mediator in any kind of problem that affects the student's activities in school, such as personal life, social life, academics, education, etc.

School personnel should be trained in tobacco cessation so that they may provide support to the students within the school. In addition, school personnel should be trained in tobacco control so that they may make their schools tobacco free and apply comprehensive tobacco control policies within their jurisdiction. There is an urgent need to develop a special

training and assistance package for school personnel, which is specifically designed for students' tobacco control programme. This programme can also involve health institutions such as *puskesmas* (primary health centres), hospitals and health offices, in collaboration with the Education and Health Ministries.

## Secondhand smoke

Secondhand smoke is a major cause of morbidity and mortality. It has been associated with serious health problems in both children and adults. To minimize the adverse effects on tobacco use, the Indonesian Government issued Law No. 36 in 2009, which requires local governments (province, district and city) to enact laws on smoke-free areas.

Smoke-free areas cover public places such as health facilities, offices, schools, children's playgrounds, public transportation and places of worship. However, to date, this law has not been fully enforced.

The GYTS Indonesia 2014 shows that:

- ◆ more than half of students (57.3%) are exposed to tobacco smoke in their homes;
- ◆ approximately six out of 10 students (60.1%) are exposed to tobacco smoke in enclosed public places and 63.9% students are exposed to tobacco smoke in outdoor public places;
- ◆ the percentage of students who saw someone smoking inside the school building or outside on school property was 69%.

These findings prove that the regulation on smoke-free areas is not being implemented effectively. Students are exposed to secondhand smoke in all places, whether at home or in school. These areas where they spend the maximum time also provide no guarantee of being safe from the harmful effects of tobacco.

The large number of tobacco users significantly affects the amount of secondhand smoke at public places. Moreover, in the absence of strict law enforcement, there is no protection from secondhand smoke for vulnerable groups such as babies, children, pregnant mothers and other sick people.

In fact, students in Indonesia are not only affected by the impact of secondhand smoke but are also threatened by the smoking habit, as they see adults who smoke in their daily surroundings. In many societies, smoking is part of the culture.

### Access and availability

Government regulation No. 109 of 2012 on the “Control of materials that contain addictive substances in tobacco products in the interests of health” was not being fully complied. There is much interference by the tobacco industry. One of the articles in this regulation is the prohibition on the sale of tobacco products to children (under 18 years of age) and pregnant mothers.

Currently, these protected groups (children and pregnant mothers) can easily buy cigarettes from sellers (street vendors, small shops around their neighbourhood, stalls, stores and some mini-markets). Buying a cigarette is as easy as buying candy. In addition to cigarette packs, street vendors, stalls or small stores also sell loose cigarettes, i.e. as a single stick or a couple of sticks.

- ◆ Overall, more than half the students (58.2%) who currently smoke cigarettes usually purchase their cigarettes from stores or shops.
- ◆ The percentage of students who bought cigarettes and were not refused purchase of cigarettes because of their age was as high as 64.5%.

### Exposure to anti-tobacco information

The great pressure exerted by the tobacco industry for years has not been able to deter activists and governments from developing programmes, activities and policies on tobacco control. Even though the Indonesian Government has not ratified the FCTC until now, many regulations have been issued to limit the harmful effects of tobacco use, such as text and pictorial health warnings on cigarette packages (Government Regulation No. 18 of 2003, Law No. 36 of 2009, Article 114; Government Regulation No. 109 of 2012, Article 61).



The GYTS 2014 found that 71.3% of current smokers noticed health warnings on cigarette packages during the past 30 days and thought about quitting smoking because of these warnings. Approximately half of those who never smoked (50.9%) thought of not starting smoking because of health warnings on cigarette packages.

### **Awareness and receptivity to tobacco marketing**

- ◆ Overall, 9% of students owned an object with a tobacco brand logo on it.
- ◆ Overall, 7.9% of students were offered free tobacco products by a tobacco company representative.

These findings show that there are still violations by cigarette companies of the ban on using any logo or brand of tobacco product on merchandise in the form of T-shirts, caps, mugs, bags, books, etc. These companies are also banned from giving out free tobacco products especially to students, as part of their marketing strategy.

### **Knowledge and attitudes**

- ◆ More than one third of students (35.5%) definitely thought that it is difficult to quit once someone starts smoking tobacco.
- ◆ As many as 72.5% of students definitely thought that other people's tobacco smoking was harmful to them.

## **4.2 Relevance to the FCTC**

The results of the GYTS are critical for gauging progress towards the WHO FCTC, and implementation and uptake of the MPOWER strategy.

Indonesia's participation in the GYTS addresses the first element of MPOWER (Monitor tobacco use and prevention policies) for youth, and GYTS asks students a range of questions that cover many of the remaining elements of MPOWER. The resulting data are critical for gauging Indonesia's progress towards fully implementing the elements of MPOWER among its youth. The information provided by the GYTS can address several provisions of the FCTC that relate to the role of school personnel and comprehensive school tobacco control policies.

This section highlights key data points within the context of the MPOWER elements:

- ◆ Protect people from tobacco smoke: The GYTS data show that 63.9% of students are around when others smoke outside their home and 57.3% live in homes where others smoke in their presence.
- ◆ Offer help to quit tobacco use: Results from the GYTS show that students who currently smoke are interested in quitting. Of students who currently smoke:
  - 88.2% of students wanted to stop smoking;
  - 81.8% tried to stop smoking in the past 12 months;
  - 24.0% had never received help/advice from a programme or professional to stop smoking.
- ◆ Warn about the dangers of tobacco: In the past 12 months, 69.3% of students were taught in class about the dangers of tobacco use.
- ◆ Enforce bans on tobacco advertising, promotion and sponsorship: The GYTS data show that 70.1% of students saw anti-smoking media messages in the past 30 days and 58.2% saw someone using tobacco on television, videos or movies. Further, 9% of students had an object with a cigarette brand logo and 7.9% of students were offered a free tobacco product by a tobacco company representative.
- ◆ Raise taxes on tobacco products: The cost of cigarettes and kreteks should be raised so that it becomes unaffordable for adolescents and youth.

The GYTS methodology provides an excellent framework for monitoring and guiding the implementation of school tobacco control programmes, while making it compliant with the requirements of the WHO FCTC. The results of this survey will be disseminated broadly, and ideally used to adopt and implement effective legislative measures for preventing and reducing tobacco consumption, nicotine addiction and exposure to tobacco smoke.

### 4.3 Relevance to the country

This section summarizes the findings from the GYTS and how they are specifically applicable to Indonesia:

- ◆ Many youth report wanting to quit tobacco use in Indonesia, but teachers are not adequately trained to prevent tobacco use among their students, and cessation services are limited.
- ◆ The susceptibility to begin smoking within the next year is high among both boys and girls, and there are few laws prohibiting the use of tobacco on school campuses.
- ◆ The data suggest an early age of initiation of cigarette use among Indonesian adolescents. Tobacco control education therefore needs to start at a very young age. However, coverage of tobacco-related issues and prevention is currently limited in the formal school curriculum.
- ◆ The majority of youth in Indonesia report exposure to secondhand smoke at multiple venues. Given that there is no safe level of exposure to secondhand smoke, policies that will protect youth from possible exposure are needed.
- ◆ Indonesian adolescents are faced with the double burden of cigarette use and the use of other forms of tobacco products, such as chewing tobacco, snuff, etc.
- ◆ Despite the existence of information on tobacco control, a significant information gap exists on tobacco use in Indonesia, specifically in the cases of women, youth and adolescents.
- ◆ Students in Indonesia are still reporting exposure to pro-smoking media campaigns. Controlling this exposure has been shown to reduce youth initiation.



## Recommendations



## 5. Recommendations

Based on the most pressing GYTS findings, Indonesia should consider rapidly implementing expanded and comprehensive tobacco control measures. Such action will save lives, reduce illnesses, and help reduce the economic burden associated with tobacco-related illnesses and lost productivity. The following proposed evidence-based interventions may be included.

- ◆ A significant number of students were exposed to tobacco smoke at home and in public places, and 89.4% of students believed that smoking in enclosed public places should be banned. There is a need to pass laws that ban tobacco smoking in public places, and if such laws have already been passed, to effectively enforce them.
- ◆ Many students who smoked expressed the desire to quit smoking (88.2%) and many had even attempted to quit (81.8%). With the proper assistance and tools, these students could stop smoking forever. Nongovernmental organizations could play a vital role as a resource for youth interested in quitting.
- ◆ Many youth were exposed to pro-cigarette advertising (62.7%) on television and were provided free cigarettes by tobacco company representatives (7.9%). There is an urgent need to more strictly enforce the existing law banning all forms of advertisement of tobacco products and paraphernalia in Indonesia.
- ◆ To maintain a current understanding of tobacco use and other key indicators among youth, and to gauge trends in the uptake and implementation of the WHO FCTC and MPOWER, this survey should be undertaken at least once every four years.
- ◆ A comprehensive health promotion strategy, and effective and comprehensive tobacco cessation programmes need to be implemented to prevent tobacco use and assist school personnel and the general community in quitting.
- ◆ School rules and policies should be framed *for the prevention and control of tobacco use*.



## Bibliography





## Bibliography

1. WHO report on the global tobacco epidemic, 2011: warning about the dangers of tobacco. Geneva: World Health Organization; 2011 ([http://www.who.int/tobacco/global\\_report/2011/en/](http://www.who.int/tobacco/global_report/2011/en/), accessed 17 June 2015).
2. Preventing tobacco use among youth and young adults: a report of the Surgeon General. Atlanta, GA: US Department of Health and Human Services, Centers for Disease Control and Prevention; 2012 (<http://www.surgeongeneral.gov/library/reports/preventing-youth-tobacco-use/full-report.pdf>, accessed 17 June 2015).
3. Adioetomo SM, Triasih Djutaharta T, Hendrato. Cigarette consumption, taxation and household income: Indonesia case study. HNP Discussion Paper No. 26. Washington DC: The International Bank for Reconstruction and Development, World Bank; 2005.
4. Badan Penelitian dan Pengembangan Kesehatan - Departemen Kesehatan Republik Indonesia. (2011). Riset Kesehatan Dasar 2010.
5. Barber S, Adioetomo SM, Ahsan A, Setyonaluri D. Tobacco economics in Indonesia. Paris: International Union against Tuberculosis and Lung Disease; 2008 (<http://www.worldlungfoundation.org/ht/a/GetDocumentAction/i/6567>, accessed 25 June 2015).
6. Blecher E, Walbeek CV. An analysis of cigarette affordability. Paris: International Union Against Tuberculosis and Lung Diseases; 2008.
7. Departemen Kesehatan R.I., Direktorat Jendral Bina Pelayanan Medik (2007), Buku Tarif INA-DRG RS Umum dan Khusus Kelas C & D. (Keputusan Menteri Kesehatan R.I., No. 1161/MENKES/SK/X/2007 Tanggal 31 Oktober 2007)
8. Eriksen M, Mackay J, Ross H. The tobacco atlas. 4th edition. Georgia: American Cancer Society; 2012.
9. Kosen S. Study on medical expenditures and burden of major of tobacco attributed diseases in Indonesia. Jakarta: Ministry of Health Republic of Indonesia, National Institute of Health Research and Development; 2010.
10. Ministry of Health, Republic of Indonesia. The tobacco source book: data to support a national tobacco control strategy. Jakarta: Ministry of Health; 2004.
11. National Institute of Health Research and Development, Ministry of Health Republic of Indonesia. Baseline health research 2007. Jakarta: Ministry of Health; 2008.

12. Shafey O, Eriksen M, Ross H, Mackay J. The tobacco atlas. 3rd edition. Georgia: American Cancer Society; 2009.
13. Tobacco Control Support Center. Fakta tembakau permasalahannya di Indonesia tahun 2010. Jakarta: TCSC IAKMI; 2010.
14. US Department of Health and Human Services. How tobacco smoke causes diseases: the biology and behavioral basis for smoking attributable disease: a report of the Surgeon General. Atlanta, Georgia: US Department of Health and Human Services, Centers for Diseases Control and Prevention, National Center for Chronic Disease Prevention and Health Promotion, Office on Smoking and Health; 2010.
15. Warren WC, Sinha DN, Lee J, Lea V, Jones N, Asma S. Tobacco use, exposure to secondhand smoke, and cessation counselling training among dental students around the world. *J Dent Educ*. 2011;75(3):385–405.
16. Warren WC, Sinha DN, Lee J, Lea V, Jones N, Asma S. Tobacco use, exposure to secondhand smoke, and cessation counseling among medical students: cross country data from Global Health Professions Student Survey (GHPSS), 2005–2008. *BMC Public Health*. 2011;11(72):3–16.
17. World Health Organization, Regional Office for South-East Asia. Indonesia Global School Personnel Survey (GSPS): factsheet. New Delhi: WHO Regional Office for South-East Asia; 2009.
18. World Health Organization. WHO report on the global tobacco epidemic, 2008: the MPOWER package. Geneva: WHO; 2008.
19. Republic of Indonesia, Government Regulation of the Republic of Indonesia No. 81 of 1999 Regarding Pacification of Cigarettes for Health.
20. President Republic of Indonesia, Regulation of the Government of Indonesia number 109 of 2012 concerning control of materials that contain addictive substances in tobacco products in the interests of health.

## Annex 1

### GYTS questionnaire

- 1. How old are you?**
  - a. 11 years old or younger
  - b. 12 years old
  - c. 13 years old
  - d. 14 years old
  - e. 15 years old
  - f. 16 years old
  - g. 17 years old or older
- 2. What is your sex?**
  - a. Male
  - b. Female
- 3. In what grade/form are you?**
  - a. 7 grade
  - b. 8 grade
  - c. 9 grade
- 4. During an average week, how much money do you have that you can spend on yourself, however you want?**
  - a. I usually don't have any spending money
  - b. Less than Rp. 11,000
  - c. Rp. 11,000 - Rp. 20,000
  - d. Rp. 21,000 - Rp. 30,000
  - e. Rp. 31,000 - Rp. 40,000
  - f. Rp. 41,000 - Rp. 50,000
  - g. More than Rp. 50,000

- 5. Have you ever tried or experimented with cigarette smoking, even one or two puffs?**
- a. Yes
  - b. No
- 6. How old were you when you first tried a cigarette?**
- a. I have never tried smoking a cigarette
  - b. 7 years old or younger
  - c. 8 or 9 years old
  - d. 10 or 11 years old
  - e. 12 or 13 years old
  - f. 14 or 15 years old
  - g. 16 years old or older
- 7. During the past 30 days, on how many days did you smoke cigarettes?**
- a. 0 days
  - b. 1 or 2 days
  - c. 3 to 5 days
  - d. 6 to 9 days
  - e. 10 to 19 days
  - f. 20 to 29 days
  - g. All 30 days
- 8. Please think about the days you smoked cigarettes during the past 30 days. How many cigarettes did you usually smoke per day?**
- a. I did not smoke cigarettes during the past 30 days
  - b. Less than 1 cigarette per day
  - c. 1 cigarette per day
  - d. 2 to 5 cigarettes per day

- e. 6 to 10 cigarettes per day
  - f. 11 to 20 cigarettes per day
  - g. More than 20 cigarettes per day
- 9. Have you ever tried or experimented with any form of smoked tobacco products other than cigarettes (such as smoking pipes, shisha, cigars)?**
- a. Yes
  - b. No
- 10. During the past 30 days, did you smoke some form of tobacco products other than white, rolled, kreteks cigarettes (such as smoking pipes, shisha, cigars)?**
- a. Yes
  - b. No
- 11. Do you ever smoke tobacco or feel like smoking tobacco first thing in the morning?**
- a. I don't smoke tobacco
  - b. No, I don't smoke tobacco or feel like smoking tobacco first thing in the morning
  - c. Yes, I sometimes smoke tobacco or feel like smoking tobacco first thing in the morning
  - d. Yes, I always smoke tobacco or feel like smoking tobacco first thing in the morning
- 12. How soon after you smoke tobacco do you start to feel a strong desire to smoke again that is hard to ignore?**
- a. I don't smoke tobacco
  - b. I never feel a strong desire to smoke again after smoking tobacco
  - c. Within 60 minutes
  - d. 1 to 2 hours
  - e. More than 2 hours to 4 hours

- f. More than 4 hours but less than one full day
- g. 1 to 3 days
- h. 4 days or more

**13. Have you ever tried or experimented with any form of smokeless tobacco products (such as candies tobacco, chewing tobacco, betel leaf with tobacco, pinang nut with tobacco)?**

- a. Yes
- b. No

**14. During the past 30 days, did you use any form of smokeless tobacco products (such as candies tobacco, chewing tobacco, betel leaf with tobacco, pinang nut with tobacco)?**

- a. Yes
- b. No

**15. Do you want to stop smoking now?**

- a. I have never smoked
- b. I don't smoke now
- c. Yes
- d. No

**16. During the past 12 months, did you ever try to stop smoking?**

- a. I have never smoked
- b. I did not smoke during the past 12 months
- c. Yes
- d. No

**17. Do you think you would be able to stop smoking if you wanted to?**

- a. I have never smoked
- b. I don't smoke now

- c. Yes
  - d. No
- 18. Have you ever received help or advice to help you stop smoking? (select only one response)**
- a. I have never smoked
  - b. Yes, from a program or professional
  - c. Yes, from a friend
  - d. Yes, from a family member
  - e. Yes, from both programs or professionals and from friends or family members
  - f. No
- 19. During the past 7 days, on how many days has anyone smoked inside your home, in your presence?**
- a. 0 days
  - b. 1 to 2 days
  - c. 3 to 4 days
  - d. 5 to 6 days
  - e. 7 days
- 20. During the past 7 days, on how many days has anyone smoked in your presence, inside any enclosed public place, other than your home (such as hospitals, health centers, clinics, public transport, offices, schools, shops, restaurants, shopping malls, movie**
- a. 0 days
  - b. 1 to 2 days
  - c. 3 to 4 days
  - d. 5 to 6 days
  - e. 7 days



- 21. During the past 7 days, on how many days has anyone smoked in your presence, at any outdoor public place (such as train stations, bus stops, cafeteria, playgrounds, sidewalk, building entrances, parks, beaches)?**
- a. 0 days
  - b. 1 to 2 days
  - c. 3 to 4 days
  - d. 5 to 6 days
  - e. 7 days
- 22. During the past 30 days, did you see anyone smoke inside the school building or outside on school property?**
- a. Yes
  - b. No
- 23. Do you think the smoke from other people's tobacco smoking is harmful to you?**
- a. Definitely not
  - b. Probably not
  - c. Probably yes
  - d. Definitely yes
- 24. Are you in favor of banning smoking inside enclosed public places (such as hospitals, health centers, clinics, public transport, offices, schools, shops, restaurants, shopping malls, movie theaters)?**
- a. Yes
  - b. No
- 25. Are you in favor of banning smoking at outdoor public places (such as train stations, bus stops, cafeteria, playgrounds, sidewalk, building entrances, parks, beaches)?**
- a. Yes
  - b. No

- 26. The last time you smoked cigarettes during the past 30 days, how did you get them? (select only one response)**
- a. I did not smoke any cigarettes during the past 30 days
  - b. I bought them in a store or shop
  - c. I bought them from a street vendor
  - d. I bought them at a kiosk
  - e. I bought them from a vending machine
  - f. I got them from someone else
  - g. I got them some other way
- 27. During the past 30 days, did anyone refuse to sell you cigarettes because of your age?**
- a. I did not try to buy cigarettes during the past 30 days
  - b. Yes, someone refused to sell me cigarettes because of my age
  - c. No, my age did not keep me from buying cigarettes
- 28. The last time you bought cigarettes during the past 30 days, how did you buy them?**
- a. I did not buy cigarettes during the past 30 days
  - b. I bought them in a pack
  - c. I bought individual sticks (singles)
  - d. I bought them in a carton
  - e. I bought them in rolls
  - f. I bought tobacco and rolled my own
- 29. On average, how much do you think a pack of 20 cigarettes costs?**
- a. less than Rp. 5100
  - b. Rp. 5100 to Rp. 10,000
  - c. Rp. 10,100 to Rp. 15,000
  - d. Rp. 15,100 to Rp. 20,000

- e. Rp. 20,100 to Rp. 25,000
- f. Rp.25,100 to Rp.30,000
- g. Rp.30,100 to Rp.40,000
- h. I don't know

**30. During the past 30 days, did you see or hear any anti-tobacco media messages on television, radio, internet, billboards, posters, newspapers, magazines, or movies?**

- a. Yes
- b. No

**31. During the past 30 days, did you see or hear any anti-tobacco messages at sports events, fairs, concerts, or community events, or social gatherings?**

- a. I did not go to sports events, fairs, concerts, or community events, or social gatherings in the past 30 days
- b. Yes
- c. No

**32. During the past 30 days, did you see any health warnings on cigarette packages?**

- a. Yes, but I didn't think much of them
- b. Yes, and they led me to think about quitting smoking or not starting smoking
- c. No

**33. During the past 12 months, were you taught in any of your classes about the dangers of tobacco use?**

- a. Yes
- b. No
- c. I don't know

- 34. During the past 30 days, did you see any people using tobacco on TV, in videos, or in movies?**
- a. I did not watch TV, videos, or movies in the past 30 days
  - b. Yes
  - c. No
- 35. During the past 30 days, did you see any advertisements or promotions for tobacco products at points of sale (such as stores, shops, convenience stores, kiosks, etc.)?**
- a. I did not visit any points of sale in the past 30 days
  - b. Yes
  - c. No
- 36. Would you ever use or wear something that has a tobacco company or tobacco product name or picture on it such as a lighter, t-shirt, hat, or sunglasses?**
- a. Yes
  - b. May be
  - c. No
- 37. Do you have something (for example, t-shirt, pen, backpack) with a tobacco product brand logo on it?**
- a. Yes
  - b. No
- 38. Has a person working for a tobacco company ever offered you a free tobacco product?**
- a. Yes
  - b. No
- 39. If one of your best friends offered you a tobacco product, would you use it?**
- a. Definitely not
  - b. Probably not

- c. Probably yes
- d. Definitely yes

**40. At anytime during the next 12 months do you think you will use any form of tobacco?**

- a. Definitely not
- b. Probably not
- c. Probably yes
- d. Definitely yes

**41. Once someone has started smoking tobacco, do you think it would be difficult for them to quit?**

- a. Definitely not
- b. Probably not
- c. Probably yes
- d. Definitely yes

**42. Do you think smoking tobacco helps people feel more comfortable or less comfortable at celebrations, parties, or in other social gatherings?**

- a. More comfortable
- b. Less comfortable
- c. No difference whether smoking or not

**43. Do you agree or disagree with the following: "I think I might enjoy smoking a cigarette."**

- a. I currently smoke cigarettes
- b. Strongly agree
- c. Agree
- d. Disagree
- e. Strongly disagree

**44. Do your parents smoke tobacco?**

- a. None
- b. Both
- c. Father only
- d. Mother only
- e. Don't know

**45. Do any of your closest friends smoke tobacco?**

- a. None of them
- b. Some of them
- c. Most of them
- d. All of them

**46. About how many students in your grade smoke tobacco?**

- a. Most of them
- b. About half of them
- c. Some of them
- d. None of them

**47. Do you think young people who smoke tobacco have more or less friends?**

- a. More friends
- b. Less friends
- c. No difference from non-smokers

**48. Do you think smoking tobacco makes young people look more or less attractive?**

- a. More attractive
- b. Less attractive
- c. No difference from non-smokers

**49. During the past 30 days, did you smoke tobacco to help you lose weight or keep from gaining weight?**

- a. I did not smoke tobacco in the past 30 days
- b. Yes
- c. No

**50. How do you describe your weight?**

- a. Very underweight
- b. Slightly underweight
- c. About the right weight
- d. Slightly overweight
- e. Very overweight

**51. Which of the following are you trying to do about your weight?**

- a. Lose weight
- b. Gain weight
- c. Stay the same weight
- d. I am not trying to do anything about my weight

**52. Do you think smoking tobacco is harmful to your health?**

- a. Definitely not
- b. Probably not
- c. Probably yes
- d. Definitely yes

**53. Do you think it is safe to smoke tobacco for only a year or two as long as you quit after that?**

- a. Definitely not
- b. Probably not
- c. Probably yes
- d. Definitely yes

- 54. Has anyone in your family discussed the harmful effects of smoking tobacco with you?**
- a. Yes
  - b. No
- 55. During the past 12 months, did you read in your school texts or books about the health effects of tobacco?**
- a. Yes
  - b. No
  - c. I do not have school texts or books
- 56. During the past 12 months, did you discuss in any of your classes the reasons why people your age use tobacco?**
- a. Yes
  - b. No
  - c. Not sure
- 57. During the past 12 months, were you taught in any of your classes about the effects of using tobacco like it makes your teeth yellow, causes wrinkles, or makes you smell bad?**
- a. Yes
  - b. No
  - c. Not sure
- 58. During school hours, how often do you see teachers smoking in the school building?**
- a. About every day
  - b. Sometimes
  - c. Never
  - d. Don't know



- 59. During school hours, how often do you see teachers smoking outdoors on school premises?**
- a. About every day
  - b. Sometimes
  - c. Never
  - d. Don't know
- 60. Do you think the sale of tobacco products to minors should be banned?**
- a. Yes
  - b. No
- 61. Do you believe that tobacco companies try to get young people under age 18 to use tobacco products?**
- a. Yes
  - b. No

## Annex 2

### Core GYTS indicators

The core GYTS indicators are described in detail in this annex. This includes the indicators provided in the GYTS Fact Sheet Template and GYTS Country Report Template.

The GYTS Fact Sheet is intended to provide an overview of the key findings and highlights of the survey for a broad audience. The GYTS Country Report provides an opportunity to examine the core indicators and other findings in more detail and to describe the results in the context of each country's unique tobacco control environment.

#### Tobacco Use

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##### Ever Tobacco Smokers

**Indicator:** Percentage of youth who ever smoked any tobacco products.

**Numerator:** Number of respondents who tried or experimented with cigarette smoking or any smoked tobacco products other than cigarettes.

**Denominator:** Total number of respondents.

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##### Ever Cigarette Smokers

**Indicator:** Percentage of youth who ever smoked cigarettes.

**Numerator:** Number of respondents who tried or experimented with cigarette smoking, even one or two puffs.

**Denominator:** Total number of respondents.

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### Ever Smokers of Other Products

**Indicator:** Percentage of youth who ever smoked tobacco products other than cigarettes.

**Numerator:** Number of respondents who tried or experimented with any smoked tobacco products other than cigarettes.

**Denominator:** Total number of respondents.

---

### Ever Smokeless Tobacco Users

**Indicator:** Percentage of youth who ever used any smokeless tobacco products.

**Numerator:** Number of respondents who tried or experimented with any smokeless tobacco products.

**Denominator:** Total number of respondents.

---

### Ever Tobacco Users

**Indicator:** Percentage of youth who ever used any tobacco products.

**Numerator:** Number of respondents who tried or experimented with cigarettes or any other smoked tobacco products or any smokeless tobacco products.

**Denominator:** Total number of respondents.

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### Current Tobacco Smokers

**Indicator:** Percentage of youth who currently smoke any tobacco products.

**Numerator:** Number of respondents who smoked cigarettes or any other smoked tobacco products in the past 30 days.

**Denominator:** Total number of respondents.

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### **Current Cigarette Smokers**

**Indicator:** Percentage of youth who currently smoke cigarettes.

**Numerator:** Number of respondents who smoked cigarettes on 1 or more days in the past 30 days.

**Denominator:** Total number of respondents.

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### **Frequent Cigarette Smokers**

**Indicator:** Percentage of youth who smoked cigarettes on 20 or more days of the past 30 days.

**Numerator:** Number of respondents who smoked cigarettes on 20 or more days of the past 30 days.

**Denominator:** Total number of respondents.

---

### **Current Smokers of Other Products**

**Indicator:** Percentage of youth who currently smoke tobacco products other than cigarettes.

**Numerator:** Number of respondents who smoked tobacco products other than cigarettes during the past 30 days.

**Denominator:** Total number of respondents.

---

### **Current Smokeless Tobacco Users**

**Indicator:** Percentage of youth who currently use smokeless tobacco products.

**Numerator:** Number of respondents who used any smokeless tobacco products in the past 30 days.

**Denominator:** Total number of respondents.

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## Current Tobacco Users

**Indicator:** Percentage of youth who currently use any tobacco products.

**Numerator:** Number of respondents who smoked cigarettes on 1 or more days in the past 30 days or smoked any tobacco products other than cigarettes in the past 30 days or used any smokeless tobacco products in the past 30 days.

**Denominator:** Total number of respondents.

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## Susceptibility to Future Tobacco Use

**Indicator:** Percentage of never tobacco users who are susceptible to using tobacco in the future.

**Numerator:** Number of respondents who have never used any tobacco products who answered: 1) "Definitely Yes", "Probably Yes", or "Probably Not" to using tobacco if one of their best friends offered it to them, or 2) "Definitely Yes", "Probably Yes", or "Probably Not" to using tobacco during the next 12 months.

**Denominator:** Number of never tobacco users.

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## Susceptibility to Cigarette Smoking

**Indicator:** Percentage of never smokers who think they might enjoy smoking a cigarette.

**Numerator:** Number of respondents who have never smoked tobacco who Strongly Agree or Agree with the statement "I think I might enjoy smoking a cigarette".

**Denominator:** Number of never smokers.

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### Number of Cigarettes Smoked per Day

**Indicator:** Percentage of current cigarette smokers who usually smoke [*less than 1; 1; 2 to 5; 6 to 10; 11 to 20; more than 20*] cigarettes per day, on the days they smoke.

**Numerator:** Number of current cigarette smokers who reported usually smoking [*less than 1; 1; 2 to 5; 6 to 10; 11 to 20; more than 20*] cigarettes per day on the days they smoked in the past 30 days.

**Denominator:** Number of current cigarette smokers.

---

### Age at Cigarette Smoking Initiation

**Indicator:** Percentage of ever cigarette smokers who first tried a cigarette at the age of [*7 or younger; 8 or 9; 10 or 11; 12 or 13; 14 or 15*] years old.

**Numerator:** Number of ever cigarette smokers who reported trying a cigarette at the age of [*7 or younger; 8 or 9; 10 or 11; 12 or 13; 14 or 15*] years old.

**Denominator:** Number of ever cigarette smokers.

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### Smoking Dependency

**Indicator:** Percentage of current smokers who are showing signs of smoking dependence.

**Numerator:** Number of current smokers who sometimes or always smoke or feel like smoking tobacco first thing in the morning OR start to feel a strong desire to smoke again within 1 full day after smoking.

**Denominator:** Number of current smokers.

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## Cessation

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### Attempt to Stop Smoking in the Past 12 Months

**Indicator:** Percentage of current smokers who tried to stop smoking during the past 12 months.

**Numerator:** Number of current smokers who tried to stop smoking during the past 12 months.

**Denominator:** Number of current smokers.

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### Desire to Stop Smoking

**Indicator:** Percentage of current smokers who want to stop smoking.

**Numerator:** Number of current smokers who want to stop smoking now.

**Denominator:** Number of current smokers.

---

### Ability to Stop Smoking

**Indicator:** Percentage of current smokers who think they would be able to stop smoking.

**Numerator:** Number of current smokers who think they would be able to stop smoking if they wanted to.

**Denominator:** Number of current smokers.

---

### Received Help to Stop Smoking

**Indicator:** Percentage of current smokers who have received help/advice to stop smoking from a program or professional.

**Numerator:** Number of current smokers who received any help/advice from a program or professional to help them stop smoking.

**Denominator:** Number of current smokers.

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## Secondhand Smoke

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### Exposure to Secondhand Smoke at Home

**Indicator:** Percentage of youth who were exposed to tobacco smoke at home in the past 7 days.

**Numerator:** Number of respondents who reported that smoking occurred in their presence inside their home on 1 or more days in the past 7 days.

**Denominator:** Total number of respondents.

---

### Exposure to Secondhand Smoke in Enclosed Public Places

**Indicator:** Percentage of youth who were exposed to tobacco smoke in enclosed public places in the past 7 days.

**Numerator:** Number of respondents who reported that smoking occurred in their presence in any enclosed public place other than their home (such as schools, shops, restaurants, shopping malls, and movie theaters) in the past 7 days.

**Denominator:** Total number of respondents.

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### Exposure to Secondhand Smoke at Outdoor Public Places

**Indicator:** Percentage of youth who were exposed to tobacco smoke at outdoor public places in the past 7 days.

**Numerator:** Number of respondents who reported that smoking occurred in their presence at any outdoor public place other than their home (such as playgrounds, sidewalks, entrance of buildings, parks, and beaches) in the past 7 days.

**Denominator:** Total number of respondents.

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## Exposure to Secondhand Smoke at School

**Indicator:** Percentage of youth who saw anyone smoking inside the school building or outside on school property in the past 30 days.

**Numerator:** Number of respondents who saw someone smoke inside the school building or outside on school property during the past 30 days.

**Denominator:** Total number of respondents.

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## Access and Availability

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### Source for Obtaining Cigarettes

**Indicator:** Percentage of current cigarette smokers who last obtained cigarettes from various sources in the past 30 days.

**Numerator:** Number of current cigarette smokers who last obtained cigarettes by [*purchasing from a store or shop; purchasing from a street vendor; purchasing from a kiosk; purchasing from a vending machine; getting them from someone else; getting them some other way*].

**Denominator:** Number of current cigarette smokers.

---

### Obtaining Cigarettes from a Person-to-Person Retail Purchase

**Indicator:** Percentage of current cigarette smokers who last obtained cigarettes by purchasing them from a store, shop, street vendor, or kiosk in the past 30 days.

**Numerator:** Number current cigarette smokers who last obtained cigarettes by purchasing them from a store, shop, street vendor, or kiosk in the past 30 days.

**Denominator:** Number of current cigarette smokers.

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### **Minors' Access to Purchasing Cigarettes**

**Indicator:** Percentage of current cigarette smokers who were not prevented from buying cigarettes in the past 30 days because of their age.

**Numerator:** Number of current cigarette smokers who were not prevented from buying cigarettes in the past 30 days because of their age.

**Denominator:** Number of current cigarette smokers who tried to buy cigarettes in the past 30 days.

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### **Unit of Purchased Cigarettes**

**Indicator:** Percentage of current cigarette smokers who last bought cigarettes as [*individual sticks; packs, cartons; rolls; loose tobacco for hand-rolled cigarettes*] in the past 30 days.

**Numerator:** Number of current cigarette smokers who last purchased cigarettes as [*individual sticks; packs, cartons; rolls; loose tobacco for hand-rolled cigarettes*] in the past 30 days.

**Denominator:** Number of current cigarette smokers.

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### **Purchasing Cigarettes: Cost**

**Indicator:** Percentage of youth who estimate the cost of a pack of 20 cigarettes is [*Range 1, Range 2, Range 3, etc.*].

**Numerator:** Number of respondents who think, on average, a pack of 20 cigarettes costs [*Range 1, Range 2, Range 3, etc.*].

**Denominator:** Total number of respondents.

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## Media: Anti-Tobacco

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### Awareness of Anti-Tobacco Messages in the Media

**Indicator:** Percentage of youth who saw or heard any anti-tobacco messages in the media in the past 30 days.

**Numerator:** Number of respondents who saw or heard any anti-tobacco messages in the media (e.g., television, radio, internet, billboards, posters, newspapers, magazines, or movies) in the past 30 days.

**Denominator:** Total number of respondents.

---

### Awareness of Anti-Tobacco Messages at Sporting or Community Events (Among the Population)

**Indicator:** Percentage of youth who saw or heard any anti-tobacco messages at sporting or other community events in the past 30 days.

**Numerator:** Number of respondents who saw or heard any anti-tobacco messages at sporting events, fairs, concerts, community events, or social gatherings in the past 30 days.

**Denominator:** Total number of respondents.

---

### Awareness of Anti-Tobacco Messages at Sporting or Community Events (Among Those who Attended Events)

**Indicator:** Percentage of youth who attended sporting or other community events in the past 30 days who saw or heard any anti-tobacco messages at the events.

**Numerator:** Number of respondents who saw or heard any anti-tobacco messages at sporting events, fairs, concerts, community events, or social gatherings in the past 30 days.

**Denominator:** Number of respondents who attended sporting or other community events in the past 30 days.

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## Noticing Health Warnings on Cigarette Packages

**Indicator:** Percentage of current smokers who noticed health warnings on cigarette packages in the past 30 days.

**Numerator:** Number of current smokers who answered “Yes, but I didn’t think much of them” or “Yes, and they led me to think about quitting smoking or not starting smoking” to seeing health warnings on cigarette packages in the past 30 days.

**Denominator:** Number of current smokers.

---

## Thinking of Quitting Because of Health Warnings on Cigarette Packages (Among All Current Smokers)

**Indicator:** Percentage of current smokers who thought about quitting smoking in the past 30 days because of health warnings on cigarette packages.

**Numerator:** Number of current smokers who reported that seeing health warnings on cigarette packages in the past 30 days led them to think about quitting smoking.

**Denominator:** Number of current smokers.

---

## Thinking of Quitting Because of Health Warnings on Cigarette Packages (Among Current Smokers who Noticed Health Warnings)

**Indicator:** Percentage of current smokers who noticed health warnings on cigarette packages in the past 30 days, who thought about quitting smoking because of the health warnings.

**Numerator:** Number of current smokers who reported that seeing health warnings on cigarette packages in the past 30 days led them to think about quitting smoking.

**Denominator:** Number of current smokers who saw health warnings on cigarette packages in the past 30 days.

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## Thinking of Not Starting Smoking Because of Health Warnings on Cigarette Packages

**Indicator:** Percentage of never smokers who thought about not starting smoking in the past 30 days because of health warnings on cigarette packages.

**Numerator:** Number of never smokers who reported that seeing health warnings on cigarette packages in the past 30 days led them to think about not starting smoking.

**Denominator:** Number of never smokers who saw health warnings on cigarette packages in the past 30 days.

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## Learning About Dangers of Tobacco Use at School

**Indicator:** Percentage of youth who were taught about the dangers of tobacco use in class during the past 12 months.

**Numerator:** Number of respondents who were taught in any classes about the dangers of tobacco use during the past 12 months.

**Denominator:** Total number of respondents.

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## Media: Pro-Tobacco

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### Awareness of Tobacco Marketing at Points of Sale (Among the Population)

**Indicator:** Percentage of youth who saw any tobacco marketing at points of sale in the past 30 days.

**Numerator:** Number of respondents who saw any advertisements or promotions for tobacco products at point of sale (such as stores, shops, kiosks, etc.) in the past 30 days.

**Denominator:** Total number of respondents.

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### **Awareness of Tobacco Marketing at Points of Sale (Among Those who Visited Points of Sale)**

**Indicator:** Percentage of youth who visited points of sale in the past 30 days who saw any tobacco marketing at the points of sale.

**Numerator:** Number of respondents who saw any advertisements or promotions for tobacco products at point of sale (such as stores, shops, kiosks, etc.) in the past 30 days.

**Denominator:** Number of respondents who visited points of sale in the past 30 days.

---

### **Awareness of Tobacco Use on Television, Videos, or Movies (Among the Population)**

**Indicator:** Percentage of youth who saw someone using tobacco on television, videos, or movies in the past 30 days.

**Numerator:** Number of respondents who saw someone using tobacco on television, videos, or movies in the past 30 days.

**Denominator:** Total number of respondents.

---

### **Awareness of Tobacco Use on Television, Videos, or Movies (Among Those who Watched Television, Videos, or Movies)**

**Indicator:** Percentage of youth who watched television, videos, or movies in the past 30 days who saw someone using tobacco on television, videos, or movies.

**Numerator:** Number of respondents who saw someone using tobacco on television, videos, or movies in the past 30 days.

**Denominator:** Number of respondents who watched television, videos, or movies in the past 30 days.

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### **Exposure to Free Tobacco Promotion**

**Indicator:** Percentage of youth who were ever offered a free tobacco product from a tobacco company representative.

**Numerator:** Number of respondents who were ever offered a free tobacco product from a tobacco company representative.

**Denominator:** Total number of respondents.

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### **Ownership of an Object with a Tobacco Brand Logo**

**Indicator:** Percentage of youth who have something with a tobacco product brand logo on it.

**Numerator:** Number of respondents who have something (e.g., t-shirt, pen, backpack) with a tobacco product brand logo on it.

**Denominator:** Total number of respondents.

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### **High Receptivity to Tobacco Marketing**

**Indicator:** Percentage of youth who own something with a tobacco product brand logo or who might use or wear something that has a tobacco company or product name or picture on it.

**Numerator:** Number of respondents who own something with a tobacco product brand logo on it or answered "Yes" or "Maybe" to would they ever use or wear something that has a tobacco company or tobacco product name or picture on it (such as a lighter, t-shirt, hat, or sunglasses).

**Denominator:** Number of never tobacco users.

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## Knowledge and Attitudes

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### Belief about the Addictiveness of Smoking

**Indicator:** Percentage of youth who definitely think that once someone starts smoking tobacco it is difficult to quit.

**Numerator:** Number of respondents who answered "Definitely Yes" to thinking it would be difficult to quit smoking tobacco once they started.

**Denominator:** Total number of respondents.

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### Belief that Smoking Helps People Feel Comfortable at Social Gatherings

**Indicator:** Percentage of youth who think that smoking tobacco helps people feel more comfortable at celebrations, parties, and social gatherings.

**Numerator:** Number of respondents who think smoking tobacco helps people feel more comfortable at celebrations, parties or in other social gatherings.

**Denominator:** Total number of respondents.

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### Beliefs about the Dangers of Secondhand Smoke

**Indicator:** Percentage of youth who think other people's tobacco smoking is harmful to them.

**Numerator:** Number of respondents who answered "Definitely Yes" when asked if smoke from other people's tobacco smoking is harmful to them.

**Denominator:** Total number of respondents.

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### **Banning Smoking in Enclosed Public Places**

**Indicator:** Percentage of youth who are in favor of banning smoking in enclosed public places.

**Numerator:** Number of respondents who favor banning smoking in enclosed public places (such as schools, shops, restaurants, shopping malls, and movie theaters).

**Denominator:** Total number of respondents.

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### **Banning Smoking at Outdoor Public Places**

**Indicator:** Percentage of youth who are in favor of banning smoking at outdoor public places.

**Numerator:** Number of respondents who favor banning smoking at outdoor public places (such as playgrounds, sidewalks, entrances to buildings, parks, and beaches).

**Denominator:** Total number of respondents.

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## Annex 3

# Factsheet GYTS – Indonesia 2014

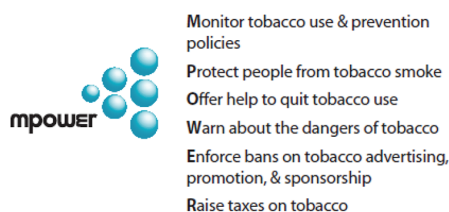
**GYTS** | GLOBAL YOUTH TOBACCO SURVEY

FACT SHEET  
**INDONESIA 2014**

### GYTS Objectives

The Global Youth Tobacco Survey (GYTS), a component of the Global Tobacco Surveillance System (GTSS), is a global standard for systematically monitoring youth tobacco use (smoking and smokeless) and tracking key tobacco control indicators.

GYTS is a nationally representative school-based survey of students in grades associated with 13 to 15 years of age and is designed to produce cross-sectional estimates for each country. GYTS uses a standard core questionnaire, sample design, and data collection protocol. It assists countries in fulfilling their obligations under the World Health Organization (WHO) Framework Convention on Tobacco Control (FCTC) to generate comparable data within and across countries. WHO has developed MPOWER, a package of selected demand reduction measures contained in the WHO FCTC:



### GYTS Methodology

GYTS uses a global standardized methodology that includes a two-stage sample design with schools selected with a probability proportional to enrollment size. The classes within selected schools are chosen randomly and all students in selected classes are eligible to participate in the survey. The survey uses a standard core questionnaire with a set of optional questions that permits adaptation to meet the needs of the country on tobacco use and key tobacco control indicators. The questionnaire consists of the following topics: tobacco use (smoking and smokeless), cessation, secondhand smoke (SHS), pro- and anti-tobacco media and advertising, access and availability to obtain tobacco products, and knowledge and attitudes regarding tobacco. The questionnaire is self-administered; using scannable paper-based bubble sheets, it is anonymous to ensure confidentiality.

In Indonesia, GYTS was conducted in 2014 by the National Institute Health Research and Development, under the coordination of the Ministry of Health. A total of 5,986 eligible students in grades 7 – 9 completed the survey, of which 4,317 were aged 13-15 years. The overall response rate of all students surveyed was 89.3%.



### GYTS Highlights

#### TOBACCO USE

- 20.3% overall, 36.2% of boys, and 4.3% of girls currently used any tobacco products.
- 19.4% overall, 35.3% of boys, and 3.4% of girls currently smoked tobacco.
- 18.3% overall, 33.9% of boys, and 2.5% of girls currently smoked cigarettes.
- 2.1% overall, 3.0% of boys, and 1.1% of girls currently used smokeless tobacco.

#### CESSATION

- More than 8 in 10 current smokers tried to stop smoking in the past 12 months.
- Almost 9 in 10 current smokers want to stop smoking now.

#### SECONDHAND SMOKE

- 57.3% of students were exposed to tobacco smoke at home.
- 60.1% of students were exposed to tobacco smoke inside enclosed public places.

#### ACCESS & AVAILABILITY

- 64.9% of current cigarette smokers obtained cigarettes by buying them from a store, shop, street vendor, or kiosk.
- Among current cigarette smokers who bought cigarettes, 64.5% were not prevented from buying them because of their age.

#### MEDIA

- 7 in 10 students noticed anti-tobacco messages in the media.
- 6 in 10 students noticed tobacco advertisements or promotions when visiting points of sale.
- 1 in 10 students own something with a tobacco brand logo on it.

#### KNOWLEDGE & ATTITUDES

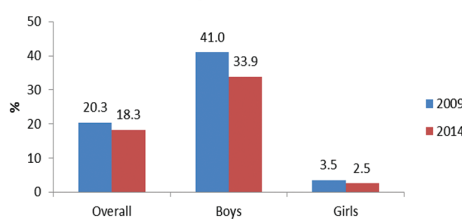
- 72.5% of students definitely thought other people's tobacco smoking is harmful to them.
- 89.4% of students favor banning smoking inside enclosed public places.



## TOBACCO USE

SMOKED TOBACCO	OVERALL (%)	BOYS (%)	GIRLS (%)
Current tobacco smokers <sup>1</sup>	19.4	35.3	3.4
Current cigarette smokers <sup>2</sup>	18.3	33.9	2.5
Frequent cigarette smokers <sup>3</sup>	1.8	3.7	0.0
Ever tobacco smokers <sup>4</sup>	32.1	54.1	9.1
Ever cigarette smokers <sup>5</sup>	30.9	53.0	8.0
Ever smokers of other tobacco <sup>6</sup>	5.5	8.9	1.7
<b>SMOKELESS TOBACCO</b>			
Current smokeless tobacco users <sup>7</sup>	2.1	3.0	1.1
Ever smokeless tobacco users <sup>8</sup>	4.2	5.7	2.6
<b>TOBACCO USE (smoked and/or smokeless)</b>			
Current tobacco users <sup>9</sup>	20.3	36.2	4.3
Ever tobacco users <sup>10</sup>	34.0	55.9	11.1
<b>SUSCEPTIBILITY</b>			
Never tobacco users susceptible to tobacco use in the future <sup>11</sup>	8.8	14.2	6.0
Never smokers who thought they might enjoy smoking a cigarette <sup>12</sup>	4.5	6.0	3.7

**Current Cigarette Smokers  
Among Students Aged 13-15 Years --  
Indonesia, GYTS 2009-2014**



## CESSATION

	OVERALL (%)	BOYS (%)	GIRLS (%)
Current smokers who tried to stop smoking in the past 12 months	81.8	81.5	84.4
Current smokers who want to stop smoking now	88.2	87.8	94.0
Current smokers who thought they would be able to stop smoking if they wanted to	91.8	91.8	90.5
Current smokers who have ever received help/advice from a program or professional to stop smoking	24.0	23.0	39.7

## SECONDHAND SMOKE

	OVERALL (%)	BOYS (%)	GIRLS (%)
Exposure to tobacco smoke at home <sup>††</sup>	57.3	61.7	52.7
Exposure to tobacco smoke inside any enclosed public place <sup>††</sup>	60.1	62.1	57.8
Exposure to tobacco smoke at any outdoor public place <sup>††</sup>	63.9	66.3	61.3
Students who saw anyone smoking inside the school building or outside on school property <sup>†</sup>	69.0	67.8	70.3

## ACCESS & AVAILABILITY

	OVERALL (%)	BOYS (%)	GIRLS (%)
Current cigarette smokers who obtained cigarettes by buying them from a store, shop, street vendor, or kiosk <sup>13</sup>	64.9	65.4	63.5
Current cigarette smokers who were not prevented from buying cigarettes because of their age <sup>14</sup>	64.5	64.4	--
Current cigarette smokers who bought cigarettes as individual sticks <sup>15</sup>	74.3	74.1	--

## MEDIA

TOBACCO ADVERTISING	OVERALL (%)	BOYS (%)	GIRLS (%)
Noticing tobacco advertisements or promotions at points of sale <sup>16</sup>	60.7	64.5	56.5
Students who saw anyone using tobacco on television, videos, or movies <sup>17</sup>	62.7	66.1	59.1
Students who were ever offered a free tobacco product from a tobacco company representative	7.9	12.6	3.0
Students who own something with a tobacco brand logo on it	9.0	11.9	5.9
<b>ANTI-TOBACCO ADVERTISING</b>			
Noticing anti-tobacco messages in the media <sup>1</sup>	70.1	70.6	69.6
Noticing anti-tobacco messages at sporting or community events <sup>18</sup>	47.3	50.5	43.3
Current smokers who thought about quitting because of a warning label <sup>19</sup>	71.3	70.0	85.6
Students who were taught in school about the dangers of tobacco use in the past 12 months	69.3	70.5	68.0

## KNOWLEDGE & ATTITUDES

	OVERALL (%)	BOYS (%)	GIRLS (%)
Students who definitely thought it is difficult to quit once someone starts smoking tobacco	35.5	37.6	33.4
Students who thought smoking tobacco helps people feel more comfortable at celebrations, parties, and social gatherings	8.9	11.2	6.7
Students who definitely thought other people's tobacco smoking is harmful to them	72.5	67.6	77.6
Students who favor banning smoking inside enclosed public places	89.4	87.6	91.3
Students who favor banning smoking at outdoor public places	80.9	78.0	83.9

<sup>1</sup> Smoked tobacco anytime during the past 30 days. <sup>2</sup> Smoked cigarettes anytime during the past 30 days. <sup>3</sup> Smoked cigarettes on 20 or more days of the past 30 days. <sup>4</sup> Ever smoked any tobacco, even one or two puffs. <sup>5</sup> Ever smoked cigarettes, even one or two puffs. <sup>6</sup> Ever smoked tobacco other than cigarettes, even one or two puffs. <sup>7</sup> Used smokeless tobacco anytime during the past 30 days. <sup>8</sup> Ever used smokeless tobacco. <sup>9</sup> Smoked tobacco and/or used smokeless tobacco anytime during the past 30 days. <sup>10</sup> Ever smoked tobacco and/or used smokeless tobacco. <sup>11</sup> Susceptible to future tobacco use includes those who answered "Definitely yes", "Probably yes", or "Probably not" to using tobacco if one of their best friends offered it to them or those who answered "Definitely yes", "Probably yes", or "Probably not" to using tobacco during the next 12 months. <sup>12</sup> Those who answered "Agree" or "Strongly agree" to the statement: "I think I might enjoy smoking a cigarette". <sup>13</sup> How cigarettes were obtained the last time respondents smoked cigarettes in the past 30 days. <sup>14</sup> Of those who tried to buy cigarettes during the past 30 days. <sup>15</sup> Based on the last purchase, of those who bought cigarettes during the past 30 days. <sup>16</sup> Among those who visited a point of sale in the past 30 days. <sup>17</sup> Among those who watched television, videos, or movies in the past 30 days. <sup>18</sup> Among those who attended sporting or community events in the past 30 days. <sup>19</sup> Among those who noticed warning labels on cigarette packages in the past 30 days. <sup>†</sup> During the past 30 days. <sup>††</sup> During the past 7 days.

**NOTE:** Students refer to persons aged 13-15 years who are enrolled in school. Data have been weighted to be nationally representative of all students aged 13-15 years. Percentages reflect the prevalence of each indicator in each group, not the distribution across groups.

--Estimates based on unweighted cases less than 35 are suppressed.

Findings from Indonesia Global Youth Tobacco Survey (GYTS) 2014 provide important indicators of tobacco control among youth in Singapore at the national level. These findings will be useful for programme managers, researchers, tobacco control advocates and other relevant stakeholders for generating credible evidence to promote tobacco control.

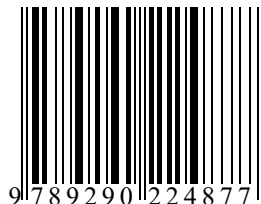
The rich data contained in this document can help Member States to plan further epidemiological studies as per their need and formulate strategies for tobacco control interventions among youth.



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ISBN 978 92 9022 487 7



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