

Pinisi Discretion Review

Volume 1, Issue 1, September, 2017 Page. 31-38 ISSN (Print): 2580-1309 and ISSN (Online): 2580-1317

Analysis of the Setting Agenda of Non-Smoke Areas in Sigi Regency

Siti Hartina¹, Rizali Djaelangkara², Muh. Rizal S³

Program Studi Administrasi Publik, Universitas Tadulako ³Universitas Negeri Makassar E-mail: ummuumair98@gmail.com

(Received: April-2017; Reviewed: May-2017; Accepted: June-2017;

Avalaibel Online: August 2017; **Published**: September-2017)

This is an open access article distributed under the Creative Commons Attribution License CC-BY-NC-4.0 ©2017 by author (https://creativecommons.org/licenses/by-nc/4.0/)

ABSTRACT

The purpose of this study was to determine the Agenda Setting Analysis of the establishment of a No Smoking Area Regulation in Sigi District, Analysis Model of Agenda Setting Policy proposed by John Kingdon. This type of research is Descriptive Research and the basis of research used is Qualitative. Informants were determined by purposive sampling with a total of 6 informants. Data collection techniques used are observation, in-depth informal interviews, and documentation to collect the required data in the form of primary and secondary data, triangulation / combined. Research instruments are researchers, a list of questions and supporting tools. Data analysis is done by reducing data, displaying data and drawing conclusions. Purposive or deliberate research location determination. The results of this study indicate that in the process of setting a regulation setting for no-smoking zones in Sigi Regency, it has run well and according to the procedure, while if seen through the results of tracing the three stages of the flow namely problem flow, policy stream, and political stream, the three streams consider problems due to the high smoking users in Sigi Regency and the lack of public awareness of the surrounding health.

Keywords: Public Policy; Setting Agenda; No-Smoking Area

INTRODUCTION

Cigarettes are not something foreign to Indonesian people. People smoke is inseparable from everyday life. Many people consciously smoke in front of people who don't smoke (August, 2016; Brown, 2016; McCammon-Tripp, 2010; Zealand, 2015). Two things are contradictory and both are rights. People who don't smoke have the right to breathe clean and healthy air. Whereas smokers also have the right to smoke (Bell, McCullough, Salmon, & Bell, 2010; Kostygina, Hahn, & Rayens, 2014; McCammon-Tripp, 2010; Tan, 2013).

Health is a human right and one of the elements of welfare that must be realized by the government. In the 1945 Constitution of the Republic of Indonesia, the protection of health is very clearly regulated where in the provisions of Article 28H paragraph (1) it is stated that every

person has the right to live in physical and spiritual prosperity, to live, and obtain a good and healthy living environment and has the right obtain health services.

According to Sigi Regency Regulation Number 8 Year 2016 Article 1 paragraph 8 "Cigarette is one of the tobacco products intended to be burned and inhaled its smoke including kretek cigarettes, white cigarettes, cigars or other forms produced from the plants of nicotiana rustica, nicotiana tabacum and other species whose smoke contains nicotine and tar with or additives including e-cigarettes".

According to the World Health Organization (WHO), the number of deaths from tobacco burning is estimated at six million deaths per year. WHO is projecting that the number of deaths due to tobacco will cause an increase in deaths to eight million people per year by 2030. (https: tirto.id/who-rokok- harm-ekonomi-global-cgR2.html).

WHO predicts that diseases related to smoking will become health problems in the world. Of every 10 adults who die, 1 person dies because of cigarette smoke, there will be 10 million deaths per year (Flouris et al., 2012). Seeing these problems, one effort that can be done to minimize the adverse effects of smoking on health is to regulate the behavior of smokers. To regulate does not mean to forbid (Byrne et al., 2010; Darlow & Lobel, 2012; Fisher, Knobelsdorf, Jaworska, Daniels, & Knott, 2013; Paul, Tzelepis, Bisquera, Noble, & Wiggers, 2016; Sangthong et al., 2012; Shoval et al., 2013). Only place smokers in a separate place from non-smokers so that the right of non-smokers to get clean air can be realized (Briggs et al., 2015; Lee, Gawron, & Goniewicz, 2015; Linke et al., 2016; Swayampakala et al., 2013; Thrul, Stemmler, Goecke, & Bühler, 2015; Woodward, Sondorp, Witter, & Martineau, 2016).

Central Sulawesi Province itself actually has legislation in the form of governor regulations (Pergub) and regional regulations (Perda). Central Sulawesi Governor Regulation which regulates cigarettes is Central Sulawesi Governor Regulation Number 06 Year 2014 concerning No Smoking Area and Central Sulawesi Province Regional Regulation Number 10 Year 2010 concerning Regional Health System and specifically in Sigi Regency Regional Regulation Sigi Regency Number 8 Year 2016.

The researcher took the focus of research on the agenda setting of the Sigi Regency Regulation No. 8 of 2016 to clarify the stages in the formulation of a policy, Kingdon's (1984) explained that the Agenda Setting is limited to a set of subjects that are the focus of attention from various groups, especially the government (Woodward et al., 2016), starting from the stage of the problem (problem stream) where the issue of cigarettes in Sigi Regency which is a sensitive issue and has become the subject of many discussions, including the Government of Sigi Regency especially the Health Office because most of the cigarette users are from teenagers to adults. in Sigi, the next policy stream (policy stream) which formulates the need to solve the problem with the issuance of the regulation.

METODE PENELITIAN

This type of research used in this research is descriptive qualitative. Data collection techniques, namely: 1) Observation, 2) interviews, 3) Documentation. Data Analysis Stages are: 1) Data Condensation, 2) Data Display, and 3) Conclusions Drawing (Ridder, Miles, Michael Huberman, & Saldaña, 2014).

RESULT AND DISCUSSION

The agenda setting becomes the most important and most crucial stage in the policy cycle. John Kingdon defines agenda setting as the process of narrowing down issues to become the focus of government attention (Kingdon, 1984). The concept illustrates the interaction between the three streams, namely the problem stream, the policy stream and the political stream in the agenda setting process (Edwards, 2017; Grossman, 2015; Hunsmann, 2012; Rushefsky, 1994; Schnellenbach & Schubert, 2015).

Problem Stream

Public problems can enter the government's agenda if policy makers put a serious and active attention to public problems (Akib, 2012; Daraba, Akib, Saggaf, Cahaya, & Salam, 2018; Haerul, Akib, & Hamdan, n.d.; Nasrullah, 2016; Simatupang & Akib, 2011; Sirajuddin, 2016). There are three requirements so that the policy issues can be entered or appear in the systemic agenda, namely: 1) The issue received wide attention or at least could raise public awareness, 2) There is a public perception and view that some actions need to be taken to solve the problem, and 3) The same perception from the community that the problem is a legitimate obligation and responsibility of several government units to be solved.

In seeing the benchmarks of the problem, the problem that arises and lies behind the stipulation of Regional Regulation (Perda) No. 8 of 2016 concerning No-Smoking Areas The establishment of No-Smoking Areas is an effective protection effort from the dangers of cigarette smoke, providing clean and healthy space and environment for the community and protecting public health in general from the direct and indirect adverse effects of smoking.

Based on the above, the dynamics of this problem stage is based on various reasons dominated by the initiators of the Health Service as the initiators of the formation of Perda No. 8 of 2016 concerning No Smoking Areas in Sigi Regency.

Policy Stream

John W. Kingdon analogizes the flow of policy as "Ancient Soup". Policy alternatives appear to be seen as a protest of selection. In this policy flow will be analyzed policy alternatives provided by various parties involved in overcoming problems that arise either from the government or non-government level. The involvement of non-government sources is permitted in our political system. Personal interests, public institutions, or other semi-government bodies can provide alternative solutions to problems (Daswati & Hattab, 2018; Ibrahim, 2018; Niswaty, Darwis, Alimuddin, & Salam, 2016).

At the stage of the flow of this policy has been running in accordance with the procedure of establishing a Perda in this case Perda No. 8 Regarding Non-Smoking Areas, this Regional Regulation Regarding Non-Smoking Areas itself has been submitted since 2014 by the Sigi Regency Health Office to be followed up by the authorities, the discussion process was carried out in December 2016 and for the enactment of this Local Regulation takes 1 year to testing until it is officially implemented in 2017, the actors involved are also very complex and the most dominant is the Health Office itself which is committed to implementing Regional Regulation No. 8 Regarding No Smoking Areas in Sigi Regency.

Political Stream

In the political stream there are people who behave and act politically organized politically by a group of interests and try to influence policy makers separately to formulate and implement policies that can raise their interests and put aside the interests of other groups (Aneta, 2012).

However, in this study what will be discussed is how the role of each actor involved in the formulation of public policy, at the stage of the policy flow above it has been mentioned who are the actors involved in the preparation of Regional Regulation No. 8 of 2016 concerning No Smoking Areas in Sigi Regency.

At this political stage, each actor has carried out a role in accordance with his field, only the obstacles faced also did not escape from the Agenda setting process of Regional Regulation No. 8 Regarding the No Smoking Area in Sigi Regency which comes from stakeholders in the District Head and Sigi Regional Parliament but apart from all that the political influence here is not so strong because it is known that the Regent and Chair of the DPRD strongly approve this Regional Regulation.

Windows Policy

The three streams namely Problem Flow, Policy Flow and Political Flow meet because there is an opportunity called the policy window. In this case, it will be known what the interests and strategies of each actor or agency involved in the formation of a policy is influential or not until a policy can be determined and implemented.

In addition to the unseen interests that show personal benefit because this is for the good and benefit of the people of Sigi Regency, so when it comes to strategies that are faced or carried out this is not too clear because this regulation refers to a strong legal basis, namely Law No. 36/2009 concerning Health, PP No.109 / 2012 concerning Safeguarding Materials Containing Addictive Substances in the Form of Tobacco Products for Health, as well as the Joint Minister of Health and Minister of Home Affairs Regulation No. 188 / Menkes / PB / I / 2011 and No. 7/2011 concerning Guidelines for the Implementation of No-Smoking Areas.

Entrepreneurship Policy

In the process of preparing the agenda there are parties called policy entrepreneurs (those who bring together) who are able to bring together the three streams so that an issue can become an agenda. This entrepreneurial policy can come from within the government bureaucracy itself or it can also come from the policy community outside the bureaucracy. They use the resources they have in the form of time, energy, reputation and funds, in order to fight for profit-based policy ideas in the future.

The role of the Policy Entrepreneur is very influential in policy formation and decision making, in this case the Policy Entrepreneur in the Agenda Process Setting Regulations on No Smoking Areas is the Health Office, the Sigi Regent who is represented by the Legal Bureau, the Secretary of the Sigi DPRD Council, the Special Committee IV represented by the Head of the District Court and Minutes of the Sigi Regional Parliament, Head of the PKM Sigi Health Office, and PTM Sigi Health Office Staff and some of the institutions mentioned above, here together working until the final stage of the birth process of the Sigi Regency KTR Regional Regulation is the issuance of Perda No. 8 of 2016 concerning No-Smoking Areas in Sigi Regency, which consists of 13 chapters 28 articles.

CONCLUSION

Based on the results of processing, discussion and analysis of research data, it can be concluded that in the process of Agenda Setting Regulation on No-Smoking Areas in Sigi Regency has been going well and in accordance with the process of formation until the enactment, while if seen through the results of tracing the three stages of the flow that is the flow problem (problem stream), policy flow (political stream), and political flow (political stream), the three streams consider the problem due to the high number of cigarette users in Sigi Regency and the lack of public awareness of the surrounding health.

In the process of forming a No Smoking Area policy, the stages of political stream (political stream) of the regional situation and the strength of regional interest organizations and the setting of agendas are the most dominant aspects in the work of the process of formulating this No Smoking Area Policy, while in the Agenda Setting process the constraints experienced only limited to the influence of the actors who delayed the process of making this Regional Regulation apart from that all the regional leaders in this case were the Regent himself who strongly agreed to this Regional Regulation. The three streams will not run properly without the assistance and participation of the Policy Entrepreneurs who are also backing up the process of drafting this Regional Regulation.

REFERENCES

- Akib, H. (2012). Implementasi kebijakan: Apa, mengapa dan bagaimana. *Jurnal Ilmiah Ilmu Administrasi Publik*, *I*(1), 1–11.
- Aneta, A. (2012). Implementasi Kebijakan Program Penanggulangan Kemiskinan Perkotaan (P2KP) Di Kota Gorontalo. *Jurnal Ilmiah Ilmu Administrasi Publik*, 1(1), 54–65.
- August, M. (2016). Revitalisation gone wrong: Mixed-income public housing redevelopment in Toronto's Don Mount Court. *Urban Studies*, *53*(16), 3405–3422.
- Bell, K., McCullough, L., Salmon, A., & Bell, J. (2010). 'Every space is claimed': smokers' experiences of tobacco denormalisation. *Sociology of health & illness*, 32(6), 914–929.
- Briggs, Z., O'Connor, M., Jollans, E. K., O'Halloran, L., Dymond, S., & Whelan, R. (2015). Flexible emotion-based decision-making behavior varies in current and former smokers. *Addictive Behaviors*, 45, 269–275. https://doi.org/https://doi.org/10.1016/j.addbeh.2015.02.011
- Brown, R. (2016). Poor foundations-Testing homes for meth gone awry. *Matters of Substance*, 27(3), 6.
- Byrne, M. M., Davila, E. P., Zhao, W., Parker, D., Hooper, M. W., Caban-Martinez, A., ... Lee, D. J. (2010). Cancer screening behaviors among smokers and non-smokers. *Cancer Epidemiology*, *34*(5), 611–617. https://doi.org/https://doi.org/10.1016/j.canep.2010.06.017
- Daraba, D., Akib, H., Saggaf, M. S., Cahaya, A., & Salam, R. (2018). Basic Public Service Partnership Model Based on Gender Perspective in Makassar City, Indonesia. *Journal of Legal, Ethical and Regulatory Issues*, 21(4), 1–12.

- Darlow, S., & Lobel, M. (2012). Smoking behavior and motivational flexibility in light and heavy smokers. *Addictive Behaviors*, *37*(5), 668–673. https://doi.org/10.1016/j.addbeh.2012.02.001
- Daswati, D., & Hattab, S. (2018). Behavior of Non-Governmental Organizations in Utilizing the Use of Loan Funds and Revenues of Urban Poverty Reduction Projects (P2KP). *Jurnal Ilmiah Ilmu Administrasi Publik*, 8(1), 53–60.
- Edwards, D. B. (2017). Policy formation in the context of global governance: Rational, organizational, and political perspectives on policymaking in El Salvador. *International Journal of Educational Development*, 52, 81–96. https://doi.org/https://doi.org/10.1016/j.ijedudev.2016.10.012
- Fisher, D. J., Knobelsdorf, A., Jaworska, N., Daniels, R., & Knott, V. J. (2013). Effects of nicotine on electroencephalographic (EEG) and behavioural measures of visual working memory in non-smokers during a dual-task paradigm. *Pharmacology Biochemistry and Behavior*, 103(3), 494–500. https://doi.org/https://doi.org/10.1016/j.pbb.2012.09.014
- Flouris, A. D., Poulianiti, K. P., Chorti, M. S., Jamurtas, A. Z., Kouretas, D., Owolabi, E. O., ... Koutedakis, Y. (2012). Acute effects of electronic and tobacco cigarette smoking on complete blood count. *Food and chemical toxicology*, *50*(10), 3600–3603.
- Grossman, P. Z. (2015). Energy shocks, crises and the policy process: A review of theory and application. *Energy Policy*, 77, 56–69. https://doi.org/https://doi.org/10.1016/j.enpol.2014.11.031
- Haerul, H., Akib, H., & Hamdan, H. (n.d.). Implementasi Kebijakan Program Makassar Tidak Rantasa (Mtr) Di Kota Makassar. *Jurnal Ilmiah Ilmu Administrasi Publik*, 6(2), 97315.
- Hunsmann, M. (2012). Limits to evidence-based health policymaking: Policy hurdles to structural HIV prevention in Tanzania. *Social Science & Medicine*, 74(10), 1477–1485. https://doi.org/https://doi.org/10.1016/j.socscimed.2012.01.023
- Ibrahim, I. (2018). The Effect of New Pattern of Level IV Leadership Training and Education Policy Implementation on Leadership Competence of Supervisory Officials in Gorontalo Provincial Government. *Jurnal Ilmiah Ilmu Administrasi Publik*, 8(2), 165–172.
- Kostygina, G., Hahn, E. J., & Rayens, M. K. (2014). 'It's about the smoke, not the smoker': messages that motivate rural communities to support smoke-free policies. *Health Education Research*, 29(1), 58–71.
- Lee, Y. H., Gawron, M., & Goniewicz, M. L. (2015). Changes in puffing behavior among smokers who switched from tobacco to electronic cigarettes. *Addictive Behaviors*, 48, 1–4. https://doi.org/https://doi.org/10.1016/j.addbeh.2015.04.003
- Linke, S. E., Strong, D. R., Myers, M. G., Edland, S. D., Hofstetter, C. R., & Al-Delaimy, W. K. (2016). The relationships among physical activity, sedentary behaviour, obesity and quitting behaviours within a cohort of smokers in California. *Public Health*, *141*, 232–240. https://doi.org/10.1016/j.puhe.2016.09.028
- McCammon-Tripp, L. E. (2010). Tenant perceptions of drifting environmental tobacco smoke in multi-unit dwellings. University of Waterloo.

- Nasrullah, M. (2016). Implementasi Sistem Informasi Manajemen Berbasis Teknologi Informasi Di Universitas Negeri Makassar. *Jurnal Ilmiah Ilmu Administrasi Publik*, 5(2), 53–63.
- Niswaty, R., Darwis, M., Alimuddin, W., & Salam, R. (2016). Pengaruh Penerapan Prinsip Good Governance terhadap Efektivitas Kerja Pegawai. *Jurnal Ilmiah Administrasi Publik* (*JIAP*), 95–100.
- Paul, C., Tzelepis, F., Bisquera, A., Noble, N., & Wiggers, J. (2016). Just how high-risk are ongoing smokers? Exploring clusters of health risk behaviours among current and exsmokers. *Preventive Medicine*, 93, 70–75. https://doi.org/10.1016/j.ypmed.2016.09.021
- Ridder, H. G., Miles, M. B., Michael Huberman, A., & Saldaña, J. (2014). Qualitative data analysis. A methods sourcebook. *Zeitschrift fur Personalforschung*. https://doi.org/10.1177/239700221402800402
- Rushefsky, M. E. (1994). Testing models of agenda building. *Applied Behavioral Science Review*, 2(2), 95–113. https://doi.org/https://doi.org/10.1016/1068-8595(94)90008-6
- Sangthong, R., Wichaidit, W., McNeil, E., Chongsuvivatwong, V., Chariyalertsak, S., Kessomboon, P., ... Aekplakorn, W. (2012). Health behaviors among short- and long-term ex-smokers: Results from the Thai National Health Examination Survey IV, 2009. *Preventive Medicine*, 55(1), 56–60. https://doi.org/https://doi.org/10.1016/j.ypmed.2012.04.022
- Schnellenbach, J., & Schubert, C. (2015). Behavioral political economy: A survey. *European Journal of Political Economy*, 40, 395–417. https://doi.org/https://doi.org/10.1016/j.ejpoleco.2015.05.002
- Shoval, G., Mansbach-Kleinfeld, I., Farbstein, I., Kanaaneh, R., Valevski, A., Apter, A., ... Zalsman, G. (2013). Gender differences in emotional and behavioral disorders and service use among adolescent smokers: A nationwide Israeli study. *European Psychiatry*, 28(7), 397–403. https://doi.org/https://doi.org/10.1016/j.eurpsy.2012.06.004
- Simatupang, P., & Akib, H. (2011). Efektivitas Implementasi dan Dampak Kebijakan dalam Konteks Desentralisasi Pemerintahan. *Jurnal Ilmiah Ilmu Administrasi Publik*, 2(1), 1–9.
- Sirajuddin, I. A. (2016). Implementasi Kebijakan Pemerintah Daerah Dalam Pelayanan Publik Dasar Bidang Sosial Di Kota Makassar. *Jurnal Ilmiah Ilmu Administrasi Publik*, 4(1), 1–14.
- Swayampakala, K., Thrasher, J., Carpenter, M. J., Shigematsu, L. M. R., Cupertio, A.-P., & Berg, C. J. (2013). Level of cigarette consumption and quit behavior in a population of low-intensity smokers—Longitudinal results from the International Tobacco Control (ITC) survey in Mexico. *Addictive Behaviors*, 38(4), 1958–1965. https://doi.org/https://doi.org/10.1016/j.addbeh.2012.12.007
- Tan, Q. H. (2013). Smell in the city: Smoking and olfactory politics. *Urban Studies*, 50(1), 55–71.
- Thrul, J., Stemmler, M., Goecke, M., & Bühler, A. (2015). Are you in or out? Recruitment of adolescent smokers into a behavioral smoking cessation intervention. *Addictive Behaviors*,

38 |

Pinisi Discretion Review

Volume 1, Issue 1, September, 2017. Pages 31-38

- 45, 150–155. https://doi.org/https://doi.org/10.1016/j.addbeh.2015.01.030
- Woodward, A., Sondorp, E., Witter, S., & Martineau, T. (2016). Health systems research in fragile and conflict-affected states: a research agenda-setting exercise. *Health research policy and systems*, 14(1), 51.
- Zealand, S. N. (2015). Measuring housing quality: Potential ways to improve data collection on housing quality in New Zealand. *Wellington: Statistics New Zealand www. stats. govt. nz.*