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STUDENTS' OPINION ABOUT SOCIAL MARKETING MIX INTERVENTION TOWARDS STUDENTS' CHANGE BEHAVIOR ON SMOKING IN ACEH

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ABSTRACT

Background: Smoking behavior kills up to half of its users. The prevalence of adolescents aged 16-19 years who smoke increased 3 times from 7.1% in 1995 to 20.5% in 2014. In 2018, the age at first smoking per day was highest in Aceh, namely 15-19 years (53,5%). Interventions using an Islamic-based marketing mix are still rarely done to change smoking habits in adolescents. This study aims to examine students' opinions about the marketing mix intervention on the materials and media used to change students' smoking behavior in Aceh. Methods: This study used a quasi-experimental method without control group design. The sample in this study were 132 smokers who were selected using a purposive sampling technique. To collect data used a questionnaire. Univariate analysis was conducted to determine the percentage of each question for each given intervention. The results of the study: students' assessment of the presenters and media from each theme showed satisfactory results and was very acceptable for students to change smoking behavior. Conclusions and Suggestions: According students, module design based on marketing mix method were easily accepted to change smoking behavior. For this reason, it is hoped that the intervention can be used to determine the effectiveness of students' smoking behavior.

KEYWORDS: Social Marketing Mix Intervention, Student Opinion, Smoking Behavior

1. INTRODUCTION

Smoking behavior among adolescents is very concerning. Smoking behavior kills up to half of its users. More than 7 million deaths are caused by direct smoking and about 1.2 million are caused by exposure to secondhand smoke (1). According to WHO data, Indonesia occupies the first position with the highest smoking incidence in the world, which is 76.2%, followed by Jordan (70.2%), Kiribati (63.9%) and Sierra Keone (60%). The prevalence of smoking in the population aged 10-18 years increased from 7.2% in 2013 to 9.1% in 2018. The average number of cigarettes smoked per day by more than half (52.3%) of smokers is 1 -10 sticks (2).



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Aceh Province occupies the first position with the age of smoking for the first time, namely 15-19 years (53.3%). The average smoker in Aceh smokes 21-30 cigarettes per day (2). According to data on healthy family visits conducted by public health center officers until December 2018, there were 56.41% of family members who smoked, both male and female (3).

The prevalence of adolescents aged 16-19 years who smoked increased 3 times from 7.1% in 1995 to 20.5% in 2014. In 2018, the age at first smoking per day was highest in Aceh, namely 15-19 years (53.5%) (2). Statistically, the level of religiosity is not related to smoking behavior, but as many as 65.2% of religious people have smoking behavior (4).

Educational interventions using mass media by applying health belief models and health literacy are effective in promoting smoking prevention behavior among students (5). Intervention by peer education is also used as an intervention to prevent smoking initiation (6). Social marketing campaigns can strengthen knowledge and attitudes in favor of smoke-free laws, so interventions help establish smoke-free norms in Mexico (7).

Intervention marketing mix Islamic-based is one that can be done for adolescent smoking habits. This concept consists of 4 elements consisting of product, price, place and promotion (8). This marketing mix is carried out in a mutually supportive manner between elements to show totality (9).

This marketing mix concept is designed to increase students' knowledge and smoking behavior as seen from the average number of cigarettes smoked. The methods offered are in the form of product (socialization of qanun and legal fatwas on smoking), price (health and psychological consultation), promotion (providing educational media) and place (signs of smoking ban). The intervention given in the model is marketing mix combined with Islamic materials such as the dangers of smoking according to the law in the Qur'an and Hadist, fatwa MUI, and smoking warnings in the use of several languages.

This study refers to previous research conducted at traditional Acehnese pesantren where the results showed that the pesantren and santri agreed to apply a social marketing mix intervention to change smoking behavior (10). It is hoped that the interventions carried out simultaneously can change smoking behavior. Therefore, this study aims to examine students' opinions about the marketing mix intervention on the materials and media used to change students' smoking behavior in Aceh.

2. RESEARCH METHODS

2.1 Design

This study used a quasi-experimental method without control group design to find out students' opinions about the marketing mix intervention on changes in student smoking behavior in Aceh.



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2.2 Research Sample

Social marketing mix intervention was conducted on 132 students in 2 Islamic schools in Aceh. Sample selection was done by using purposive sampling technique. The criteria that were sampled in this study were students who were willing to be respondents, students who had smoked, and students who were in grade 1 and grade 2.

2.3 Intervention Process

Social marketing mix intervention was carried out with 2 interventions with a time interval between the first intervention and the intervention. The second is 1 week. Four methods of social marketing mix consisting of product, price, promotion, and plate are given simultaneously for each intervention. The intervention is given using a module that has been designed by the researcher and consulted with each expert who is an expert in their field before the trial is carried out.

a. Product

In this method, students get socialization about smoking laws. In the first intervention, students were given socialization of smoking laws according to the Quran and Hadist, as well as the Fatwa MUI delivered by representatives from the MPU. The socialization was given for 30 minutes then continued by giving students the opportunity to ask questions. Likewise in the second intervention. The intervention provided was in the form of socialization of the no smoking area Qanun delivered by representatives of the Aceh Qanun formulation party.

b. Price

In this method, students get socialization about the dangers of smoking. However, in this method, students are more active in intervention activities. In the first intervention, students were given socialization about the dangers of smoking in terms of health. The socialization was given for 20 minutes then continued by giving role play to students to interact with each other. This intervention was carried out by a pulmonary specialist. Likewise in the second intervention. The intervention provided was in the form of socialization of respondents to their smoking peers delivered by child psychologists.

c. Plate

In this method, the intervention provided is in the form of utilizing the intervention site as a forum for not smoking in the school area. In the first intervention, students were invited together to reduce smoking behavior by installing planks and banners prohibiting smoking in the school area. In the second intervention, the media used to ban smoking was to put up a banner about the dangers of smoking in the school area.





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d. Promotion

In this method, the intervention provided is in the form of distributing educational media to students that can be used to increase students' knowledge about smoking laws and smoking. In the first intervention, the media used was in the form of distributing leaflets with the theme of smoking laws according to the Quran and Hadist, as well as the Fatwa MUI. In the second intervention, the media used was a sticker with the theme of the dangers of smoking to health.

2.4 Data Collection

Collection was carried out by distributing questionnaires to students 1 week after the second intervention. The questions asked consisted of 2 different questionnaires. The questionnaire used to determine students' assessment of the delivery of material in each intervention consisted of 5 statements, namely: (1) the presenters conveyed information that was well received by students; (2) presenters convey information using easy-to-understand media; (3) presenters are able to listen or help solve problems and complaints expressed by students; (4) the speaker is able to communicate in a language that is easily understood and understood by students; (5) presenters are able to convey information according to the problems faced and needed by students. The answer choices given on a Likert scale are very difficult to accept, difficult to accept, less acceptable, acceptable and very acceptable.

The questionnaire used to determine students' assessment of each of the media used consisted of 4 questions, namely: (1) The appearance of the media looked attractive; (2) The writing on the media looks clear, attractive and easy to read; (3) The image on the media looks clear and attractive to quit smoking; (4) The material presented in the media reminds students to stop smoking. The answer choices given are yes and no.

Then, the data that has been collected is analyzed using SPSS to determine the frequency and percentage of each question for each given intervention.

3. RESEARCH RESULTS

Table 1. Characteristics of Respondents

No	Characteristics	f	%
1	Age		
	a. 11 Years b. 12 Years	4	3.00
	c. 13 Years	24	18.20
	d. 14 Years	47	35.60



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No	Characteristics	f	%
		57	43.20
2	Parents		
	a. Yes b. No	47	64.40
	b. No	85	35, 60
3	Smoker Friends		
	a. Yes b. No	108	81.80
	b. No	24	18.20
4	Smoking Behavior		
	a. Yes, every day	18	13.60
	b. Yes, not every day	114	86.40
5	Age of first smoking		
	a. 10 years	17	12.90
	b. >10 years	115	87 ,10
6	Smoking Areas		
	a. Home	1	0.80
	b. Outdoors or Schoolsc. Schools and Homes	129	97.70
		2	1.50
7	Types of		
	a. Cigarettes Kretek	26	19.70
	b. Cigarettes Whitec. Cigarettes Electronic	102	77.30
		4	3.10



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No	Characteristics	f	%
8	Number of Cigarettes Smoked		
	a. < 5 Rodsb. 5 Rods	111	84.10
	U. J Kous	21	15.90

Based on Table 1. shows the highest respondent age category is 14 years as much as 43.20%. The highest percentage of smoking parents' category is smoking as much as 64.4%. The highest percentage of the category has friends who smoke as much as 81.80%.

The highest percentage of the category of smoking behavior of the highest students is smoking not every day as much as 86.4%. The highest percentage of the first smoking age category was >10 years as much as 87.1%. The highest percentage of respondents' smoking area category is outside the home or outside school as much as 97.7%. The highest percentage of the category of the highest types of cigarettes smoked by respondents was white cigarettes as much as 77.3%. The highest percentage in the category of the highest number of cigarettes smoked was <5 cigarettes as much as 84.1%.

Results of Student Assessment of Submission of Material

Table 2. Distribution of Frequency of Student Assessment of Submission of Material by MPU on Smoking Laws According to Al-Quran, Hadist and Fatwa MUI

No	Aspect of Assessment	Very difficult to accept	Difficul t to accept	Less acceptable	Acceptable	Very acceptable
		f (%)	f (%)	f (%)	f (%)	f (%)
1	The presenter conveys information that is well received by students	1 (0.8%)	3 (2.3%)	9 (6.8%)	11 (8.3%)	108 (81.8%)
2	Speakers convey information using easy-to-understand media	4 (3.0%)	3 (2.3%)	4 (3.0%)	14 (10.6%)	107 (81.1%)
3	Speakers are able to listen or help solve problems and complaints expressed by students	3 (2.3%)	4 (3.0%)	6 (4.5%)	9 (6.8%)	110 (83.3%)
4	Speakers are able to communicate in a language that is easily understood and understood by students	4 (3.0%)	2 (1.5%)	5 (3.8%)	9 (6.8%)	112 (84.8%)



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Speakers are able to convey information according to the problems faced and needed by students	2 (2 3%)	1 (0	8 (6,1%)	8 (6,1%)	112 (84,8%)
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Based on Table 2. shows the respondents' assessment of the presenters who delivered material on smoking laws according to the Quran, Hadist and Fatwa MUI. The highest category of presenters conveys information that can be well received, which is very acceptable (81.8%). The highest category of presenters conveys the information conveyed using media that is easy to understand, which is very acceptable (81.1%). The highest category of presenters is able to listen or help solve the problems and complaints expressed, which is very acceptable (83.3%). The highest category of presenters is able to communicate in a language that is easy to understand and understand, which is very acceptable (84.8%). The highest category of presenters is able to convey information according to the problems faced and needed, which is very acceptable (84.8%).

Table 3. Distribution of Student Assessment Frequency Against Submission of Material by the Formulator of the No Smoking Area Qanun

No	Aspects of Assessment	Very difficult to accept	Difficul t to accept	Less acceptabl e	Acceptable	Very acceptable
		f (%)	f (%)	f (%)	f (%)	f (%)
1	The speaker delivered information that was well received by the students	2 (1.5%)	1 (0.8%)	7 (5.3%)	7 (5.3%)	115 (87.1%)
2	The speaker delivered information using easy-to-understand media	1 (0.8%)	2 (1.5%)	9 (6.8%)	9 (6.8%)	111 (84.1%)
3	Speakers are able to listen or help solve problems and complaints expressed by students	2 (1.5%)	5 (3.8%)	4 (3.0%)	5 (3.8%)	116 (87.9%)
4	Speakers are able to communicate in easy-to-understand language and understood by students	1 (0.8%)	5 (3.8%)	4 (3.0%)	7 (5.3%)	115 (87.1%)
5	Speakers are able to convey information according to the problems faced and needed by students	1 (0.8%)	3 (2.3%)	8 (6.1%)	12 (9.1%)	108 (81.8%)



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Based on Table 3. material that conveys material on the no smoking area Qanun. The highest category of presenters conveys information that can be well received, which is very acceptable (87.1%). The highest category of presenters conveyed the information conveyed using media that was easy to understand, which was very acceptable (84.1%). The highest category of presenters is able to listen or help solve problems and complaints that are expressed, which is very acceptable (87.9%). The highest category of presenters is able to communicate in a language that is easy to understand and understand, which is very acceptable (87.1%). The highest category of presenters is able to convey information according to the problems faced and needed, which is very acceptable (81.8%).

Table 4. Frequency Distribution of Student Assessment of Submission of Material by Lung Specialists about the Dangers of Smoking for Health

No	Aspects of Assessment	Very difficult to accept	Difficul t to accept	Less acceptable	Acceptabl e	Very acceptabl e
		f (%)	f (%)	f (%)	f (%)	f (%)
1	The presenter conveys information that is well received by students	1 (0.8%)	3 (2.3%)	10 (7.6%)	14 (10.6%)	104 (78.8%)
2	Speakers convey information using easy-to-understand media	3 (2.3%)	3 (2.3%)	7 (5.3%)	18 (13.6%)	101 (76.5%)
3	Speakers are able to listen or help solve problems and complaints expressed by students	1 (0.8%)	4 (3.0%)	9 (6.8%)	13 (9.8%)	105 (79.5%)
4	Speakers are able to communicate with language that is easily understood and understood by students	5 (3.8%)	1 (0.8%)	5 (3.8%)	14 (10.6%)	107 (81.1%)
5	Speakers are able to convey information according to the problem faced and needed by students	0 (0.0%)	0 (0.0%)	8 (6.1%)	13 (9.8%)	111 (84.1%)

Based on Table 4. shows the respondent's assessment of the presenters who convey material about the dangers of smoking to health. The highest category of presenters conveys information that can be received well, which is very acceptable (78.8%). The highest category of presenters conveys the information conveyed using media that is easy to understand, which is very acceptable (76.5%). The





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highest category of presenters is able to listen or help solve the problems and complaints expressed, which is very acceptable (79.5%). The highest category of presenters is able to communicate in a language that is easy to understand and understand, which is very acceptable (81.1%). The highest category of presenters is able to convey information according to the problems faced and needed, which is very acceptable (84.1%).

Table 5. Distribution of the Frequency of Student Assessment of Submission of Material by Psychology on Peer Responses who Smoke

T by chology of T cer responses who smoke										
No	Aspects of Assessment	Aspects of Assessment Very difficult t to to accept accept		Less acceptable	Acceptable	Very acceptable				
		f (%)	f (%)	f (%)	f (%)	f (%)				
1	The presenter conveys information that is well received by students	3 (2.3%)	2 (2.3%)	11 (8.4%)	16 (12.1%)	100 (75.8%)				
2	Speakers convey information using easy-to-understand media	1 (0.8%)	1 (0.8%)	12 (9.1%)	16 (12.1%)	102 (77.3%)				
3	Speakers are able to listen or help solve problems and complaints expressed by students	1 (0.8%)	1 (0.8%)	10 (7.6%)	14 (10.6%)	106 (80.3%)				
4	Speakers are able to communicate in English which is easy to understand and understand by students	0 (0.0%)	2 (1.5%)	11 (8.3%)	10 (7.6%)	109 (82.6%)				
5	Speakers are able to convey information according to the problem faced and needed by students	1 (0.8%)	4 (3.0%)	10 (7.6%)	15 (11.4%)	102 (77.3%)				

Based on Table 5. me shows the respondent's assessment of the presenter who conveys material about the response of peers who smoke. The highest category of presenters conveys information that can be received well, which is very acceptable (75.8%). The highest category of presenters conveys the information conveyed using media that is easy to understand, which is very acceptable (77.3%). The highest category of presenters is able to listen or help solve the problems and complaints expressed, which is very acceptable (80.3%). The highest category of presenters is able to communicate in a language that is easy to understand and understand, which is very acceptable (82.6%). The highest category of presenters is able to convey information according to the problems faced and needed, which is very acceptable (77.3%).



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Results of Student Assessment of Interventional Media

Table 6. Frequency Distribution of Student Assessment of the Use of Interventional Media

No	Aspects of	Signt	ooard		ner	Ban	iner	ner Leaflet		Sticker	
No	Assessment	Yes	No	Yes	No	Yes	No	Yes	No	Yes	No
		f (%)	f (%)	f (%)	f (%)	f (%)	f (%)	f (%)	f (%)	f (%)	f (%)
1	The media display looks attractive	110 (83.3)	22 (16.7)	120 (90.9)	12 (9.1)	120 (90.9)	12 (9.1)	113 (85.6)	19 (14.4)	117 (88.6)	15 (11.4)
2	The writing on the media looks clear, attractive and easy to read	124 (93.9)	8 (6.1)	121 (91.7)	11 (8.3)	114 (86.4)	18 (13.6)	118 (89.4)	14 (10.6)	118 (89.4)	14 (10.6)
3	The image on the media looks clear and attractive to quit smoking	125 (94.7)	7 (5.3)	115 (87.1)	17 (12.9)	122 (92 ,4)	10 (7.6)	119 (90.2)	13 (9.8)	109 (82.6)	23 (17.4)
4	The material presented in the media reminds students to stop smoking	119 (90.2)	13 (9.8)	117 (88.6)	15 (11.4)	120 (90.9)	12 (9.1)	109 (82.6)	23 (17.4)	108 (81.8)	24 (18.2)

Based on Table 6. shows the response assessment nden to media signage prohibiting smoking. The highest category of signage displaying the smoking ban looks attractive, namely yes (83.3%). The highest category of writing on the signpost is clear, attractive and easy to read, namely yes (93.9%). The highest category of color on the signposts looks clear and attractive, namely yes (94.7%). The highest category of installing signage in the school area reminds not to smoke, namely yes (90.2%).



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Respondents' assessment of banner standing media. The highest category of banner display about the dangers of smoking looks attractive, namely yes (90.9%). The highest category of writing on banners is clear, attractive and easy to read, namely yes (91.7%). The highest category of images on banners that are clearly visible and attractive for quitting smoking is yes (87.1%). The highest category. The material presented on the banner reminds students to stop smoking, namely yes (88.6%).

Respondents' assessment of banner media. The highest category of the display of the smoking ban banner looks attractive, namely yes (90.9%). The highest category of writing on banners is clear, attractive and easy to read, namely yes (86.4%). The highest category of colors on banners looks clear and attractive, namely yes (92.4%). The highest category of installing banners in the school area reminds not to smoke, which is yes (90.9%).

Respondents' assessment of leaflet media. The highest category of leaflets about the dangers of smoking looks attractive, namely yes (85.6%). The highest category of writing on leaflets is clear, attractive and easy to read, namely yes (89.4%). The highest category of color in the leaflet looks clear and attractive, namely yes (90.2%). The highest category of how to use leaflets and the material presented in the leaflets is easy to understand, namely yes (82.6%).

Respondents' assessment of sticker media. The highest category of sticker display on KTR looks attractive, namely yes (88.6%). The highest category of writing on stickers about KTR is clear, attractive and easy to read, namely yes (89.4%). The highest category of color on the sticker looks clear and attractive, namely yes (82.6%). The highest category of using the KTR sticker is easy to remind the smoking ban, which is yes (81.8%).

4. DISCUSSION

The results showed as many as 13.6% of students smoked every day and 86.4% smoked occasionally. As many as 87.1% of students started smoking at the age of >10 years. The results of data collection from 2 schools in Aceh Besar show a concerning matter. The percentage of the results of this study is higher than the research conducted in 7 public junior high schools in Aceh Besar District which showed that 5.5% of students smoked almost every day and 38.1% of students smoked occasionally, and 39.5% never smoked (11).

Smoking behavior can be avoided if the individual instills the intention or desire in him not to smoke. Social or marketing mix is an approach to developing health, environmental, and social change campaigns that aim to influence target audiences to voluntarily accept, reject, modify, or abandon behavior for the benefit of individuals, groups, or society. The marketing mix consists of 4 elements, namely product, price, place and promotion which are carried out in a combined manner that supports each other between elements to show totality (9).



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Social marketing mix intervention can be done to change smoking behavior. According to previous research conducted at traditional Acehnese Islamic boarding schools, they agreed to intervene with the use of social marketing to change the smoking behavior of students (10).

In this study, researchers developed a social marketing mix module to change students' smoking behavior. The module design consists of 4 elements including product (providing counseling about smoking laws based on the Al-Quran, Hadist and Fatwa MUI, and Qanun KTR), price (socialization about the dangers of smoking for health and responses to peers who smoke), promotion (giving leaflets and stickers), and place (installation of no smoking signage, banner standing, and banners). Each element of the social marketing mix was consulted with each expert and revised.

The results of trials conducted on students showed that students' assessment of the presenters of each theme showed satisfactory results and was very acceptable to students, both in terms of the information conveyed, the use of media, the speaker's response to student questions, the use of language that is easy to understand and information. presented in accordance with the problems faced by students.

Mass media is a medium that has a very important position, especially in the context of the information age as it is today. Mass media institutions are believed to have the ability to significantly organize the production, reproduction and distribution of knowledge. A series of symbols that give meaning to the reality of "being" and experiences in life can be transformed by the mass media in the public environment. So that it can be accessed by members of the community at large (12).

The use of gruesome images on no smoking signs increased students' intention to quit smoking. This is in line with research conducted on Pamulang University students which showed that there was a significant relationship between the perception of pictorial health messages and the intention to quit smoking (p = 0.000; OR 43.5) (13). The message to stop smoking is mostly done by showing pictures of damaged lungs or people with nasopharyngeal cancer. This pictorial message causes smokers to dislike smoking cessation advertisements because it is too clear without the disease caused by smoking (14). Illustrated health warnings on cigarette packaging can increase youth motivation to quit smoking (15).

In addition, the delivery of information about the smoking fatwa can also reduce students' smoking behavior. Fatwas on smoking and shisha, which are haram, as well as scholars have a complementary role in reducing tobacco use and even play a role in motivating people to quit smoking (16). Knowledge of the fatwa forbidden to smoke that does not affect a person not to smoke is suspected because the nature of the fatwa is only morally binding and the decision to follow or not is an individual choice (17).



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Social marketing campaigns should involve key stakeholders, including policy makers, health care providers, and the public (18). The effectiveness of social marketing is highly dependent on the effectiveness of communication in inviting students to behave in a healthy manner, providing health education about the dangers of smoking, and smoking laws. So that the trials conducted on students to determine students' assessment of the presenters and the media used in the social marketing mix intervention on smoking behavior change provide information that the module formed can be used to change students' smoking behavior.

5. CONCLUSIONS AND SUGGESTIONS

The results of the student's opinion towards 4 presenters of marketing mix intervention, showing that students agree and the material presented is acceptable to change smoking behavior. In addition, students' opinions on the media used are also interesting and easy to be understand. For this reason, it is hoped that the intervention can be used to determine the effectiveness of students' smoking behavior, and can be used as an intervention module to change smoking behavior.

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