

The Effect of Resources and Bureaucratic Structure on the Implementation of Non-Smoking Areas in the Maros Regent Office

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Abstract: *This study aims to analyze the relationship of resources and the relationship of bureaucratic structures to the implementation of regional policies without smoking. The design of this study used a descriptive analytical design with a cross sectional study approach to determine the relationship of resources and bureaucratic structure to the implementation of regional policies without smoking. The sample in this study uses a total sampling technique so that the entire population is sampled as many as 196 respondents. The research data were analyzed using univariate analysis and bivariate analysis with the help of SPSS version 21 software. The results showed that: (1) sufficient resources had no relationship to the successful implementation of regional policies without smoking, and (4) a good bureaucratic structure had no relation to successful implementation of regional policies without cigarettes.*

Keywords: *resources, organizational structure, implementation of policies, areas without cigarettes.*

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I. Introduction

Tobacco use has increased in developing countries (Demir et al., 2015), where Indonesia is also in it. Data on Sustainable Development Goals (SDGs) shows that the number of smokers in Indonesia is in the top three in the world after China and India. The data also shows that Indonesia is a country with the highest prevalence of adult male smokers in the world, amounting to 68.8%. Young smokers should also not be ignored, where Indonesian youth participation is quite high when compared to the average level of world youth participation, which is 24.10% and 21.44% (WHO, 2017).

Tobacco use does not only have a negative impact on its own users, in this case active smokers, but also for people who are around it or commonly called passive smoking. Passive smoking is now a public health problem in the world (Berg et al., 2016 and Intarut et al, 2016). Some studies show that there are 600,000 deaths or about 1% of deaths occur in passive smokers worldwide (Ravara et al, 2013).

Indonesia is one of the countries that does not sign a Framework Convention of Tobacco Control (FCTC) cooperation agreement, so it does not have the obligation and responsibility to prohibit or control the circulation of cigarettes in its country (Hakam, 2015). However, the government is also trying to protect its citizens from exposure to cigarette smoke. This is indicated by a policy that prohibits smoking in public places. On this basis, the protection effort needs to be carried out by the state. In addition to providing education to the public on the effects of smoking, one of the most important forms of protection is the existence of policies that regulate the area without smoke.

Currently regulations regarding tobacco use or more specifically controlling the problem of smoking in Indonesia are available in the form of Government Regulations and Regional Regulations. This can be seen in Law Number 36 of 2009 concerning Health in article 115 paragraph 1 and 2, which explains that health service facilities, places of teaching and learning processes, places for children to play, public transportation, workplaces, public places and other places that determined is a Non-Smoking Area, and the regional government must establish a Non-Smoking Area in its area.

Some research results show that most people have been aware of the Non-Smoking Area. Research conducted by Fatmasari on the behavior of city transportation drivers in Makassar showed that some of the respondents already knew about Non-Smoking Areas (58.8%), public transportation as one of the Non-Smoking Areas (51.2%) (Fatmasari, 2015). Whereas Sitanggang's research in Kabanjahe and Muliku General Hospital in Monginsidi General Hospital in Manado showed that the lack of commitment and compliance of hospital

directors and their ranks and unspoken sanctions led to the implementation of Non-Smoking Areas unsuccessful (Sitanggang et al, 2018 and Muliku et al, 2016).

This is in accordance with the results of research conducted in Argentina which shows that the implementation of Non-Smoking Areas (KTR) has not been maximized because the application of tobacco control laws has not been implemented comprehensively such as the restrictions on cigarette advertising and promotion, and the price of cigarettes is still affordable. Therefore, strong advocacy is needed on the executive board to implement tobacco control laws comprehensively (Konfino et al, 2014). Research in Brazil and Australia shows the unsuccessful implementation of the Non-Smoking Area (KTR) policy because in the area designated as a smoke-free area there is still a special room for smoking, where cigarette smoke can still spread in the surrounding area and is felt by passive smokers (Thomas & Richmond, 2017 and Almeida et al, 2012).

Some research results show that the policy of Non-Smoking Areas can have a positive impact, including: reduction in exposure to cigarette smoke (Yang et al., 2018), (Macnaughton et al., 2017), (Sureda et al., 2015). Awareness and support of the Non-Smoking Zone rules (Peruga et al., 2018), (Qureshi & Kania, 2018), (Weishaar et al., 2016), (Jancey et al., 2014). Reduced respiratory symptoms and decreased incidence of heart attacks (Barnoya & Navas-acien, 2013), (Burns et al., 2013). An increasing number of smokers who want to quit (Feliu et al., 2019), (Kang & IlCho, 2018), (Burns et al., 2013). Limiting marketing, raising customs and cigarette prices (Lando et al., 2018), (Mistry et al., 2018), (Ross et al., 2018), and (Weishaar et al., 2016),

As a form of concern for the community, the Maros Regency Government made the Maros Regency Regional Regulation Number 11 of 2014 concerning Non-Smoking Areas which regulate areas or rooms that are declared prohibited for smoking activities, and are one of the health policy public products. The implementation of the No Smoking Area at the Maros Regent Office requires the involvement of various parties. These parties are regents, government officials, employees, and the public. These parties took part in the implementation of this policy. Without their involvement, the implementation of Non-Smoking Areas will not work well.

Maros Regency Regional Regulation Number 11 of 2014 concerning Non-Smoking Regions Article 10 paragraph 1 reads: "Every person is prohibited from smoking in the workplace as referred to in Article 8 paragraph 2 (point b) which includes government and private offices, as well as industries, except in special place for smoking "(Maros, 2014). This regulation also contains the obligation for the person in charge of the Non-Smoking Area to put up a warning against smoking and must admonish people who violate this regulation. This is found in Article 7 paragraph 1 and 4. In fact, this rule is only partially implemented, namely there is indeed a smoking ban sign or warning at the Maros Regent Office, but there are still many employees and people who come to take care of their needs while still smoking and no one forbid it. This fact certainly presents the question why this happened. Why policies that have been established and ratified since four years ago then have no power in the implementation process.

One model of policy implementation was developed by George C. Edward III called the policy implementation model with the terms Direct and Indirect Impact on Implementation. In this approach the variables that can determine the success of implementing a policy are resource factors and bureaucratic structures. Resources are the source of drivers and implementers. The resources here include humans as implementing policies and supporting resources such as skills, information, facilities and infrastructure. Whereas the bureaucratic structure is the characteristics, norms, and patterns of relationships that occur repeatedly in executive bodies that have both potential and real relationships with what they have in carrying out policies. Bureaucracy is one element in policy implementation. A policy will not be implemented well if it is not supported by a bureaucratic structure. There are two main characteristics in the bureaucracy, namely standard standard work procedures or Standard Operating Procedure (SOP) and fragmentation. SOPs or implementation instructions can facilitate the implementation of policies, while fragmentation is more about the dissemination of responsibilities in carrying out tasks.

To find out how far the success of this policy implementation is certainly by looking at the variables that influence it. Likewise with the implementation of the No Smoking Area in the Maros Regent Office. The success of policy implementation is certainly influenced by several variables. When using the policy implementation model developed by George C. Edward III, the implementation of the Non-Smoking Area policy at the Maros Regent Office is at least influenced by resources and bureaucratic structures.

II. Literature Review

Resource

Resources are a potential value possessed by a certain material or element in life. Resources are not always physical, but also non-physical (intangible). Resources can change, either large or missing, and there are also resources that are always available. In addition, also known resources that can be recovered or renewable and non-renewable resources. Another understanding of resources is a potential possessed by matter or other elements in life, where these resources can improve human well-being.

Bureaucratic Structure

Bureaucratic structure is a characteristic, norms and patterns of relationships that occur repeatedly in executive bodies that have a relationship, both potential and real with what they have in carrying out policies. Van Meter and Van Horn show some elements that might influence an organization in policy implementation (Suratman, 2017), namely: (1) competency and size of an agency's staff, (2) hierarchical level of supervision of sub unit decisions and internal processes implementing agency, (3) political sources of an organization (support of legislative and executive members), (4) the vitality of an organization, (5) the level of "open" communication namely free and horizontal communication networks and relatively high levels of freedom in communication with individuals outside the organization; and (6) formal and informal links between a body and decision-making bodies or decision makers.

Implementation Policy

The definition of implementation according to Van Meter and Van Horn (1975) is that actions are carried out either by individuals, officials or government or private groups directed at achieving the objectives outlined in the policy decision. These actions include efforts to convert decisions into operational actions in a certain period of time or in the context of continuing efforts to achieve large and small changes that have been determined by policy decisions (Suratman, 2017).

Public policy is a series of decisions involving the public interest, which are conscious, directed, and measurable carried out by the government that involve interested parties in certain fields that lead to specific goals. While the implementation of policy is a stage of activity/activity/program in implementing policy decisions made by individuals/officials, government groups, communities, and/or the private sector in order to achieve the objectives set in policy decisions that will affect the final outcome of a policy.

If the definition of implementation is coupled with public policy, then the word implementation of public policy can be interpreted as the activity of completing or implementing a public policy that has been determined or approved with the use of means (tools) to achieve policy objectives. Thus, in the public policy process, policy implementation is a practical stage and is distinguished from policy formulation which can be seen as a theoretical stage (Dewi, 2016).

III. Methodology

This study used a descriptive analytic design with a cross sectional study approach to determine the relationship of communication, resources, disposition and bureaucratic structure to the implementation of the No Smoking Area policy. The population is all employees within the Maros Regent Office with a total of 196 people. Sampling in this study used the Total Sampling technique so that the entire population in the Maros Regent Office was 196 respondents. The data in this study come from primary data obtained directly through observations to respondents using questionnaires, and observations using the check list aim to collect primary data related to supporting facilities in the implementation of the No Smoking Area, as well as secondary data obtained from the Maros Regency Regional Secretariat , namely data on the number and names of employees with the status of Civil Servants in each part of the Maros Regent Office. The research data were analyzed using univariate analysis and bivariate analysis with the help of SPSS version 21 software.

IV. Results

1. Univariate Analysis

In this study univariate analysis was conducted to see the frequency distribution of the general characteristics of respondents which included: gender, age group, respondent education level and frequency distribution of each variable measured both the dependent variable and the independent variable in the implementation of the No Smoking Area policy.

Characteristics of Respondents

The general characteristics of respondents included gender, age group, education level, smoking status can be seen in the following table..

Table1 Distribution of Respondents Based on Characteristics of Respondents in the Office of the Regent of Maros in 2019

Characteristics of Respondents		n	%
Gender	Man	99	52,7
	Women	89	47,3
Age group	<30 year	11	5,9
	30 - 39 year	77	40,9

	40 - 49 year	78	41,5
	>49 year	22	11,7
Last education			
	Senior High School	18	9,6
	Diploma	20	10,6
	Bachelor	128	68,1
	Master	22	11,7
Ever smoked			
	Yes	74	39,4
	No	114	60,6
Still smoking			
	Yes	51	68,9
	No	23	31,1

Source: Primary Data

Table 1 above shows that the highest number of respondents were men, namely 52.7% and female respondents 47.3%. The age group of the respondents who were the most was 40 - 49 years, namely 41.5%, differing slightly from the age group 30 - 39, which was 40.9%. For the education level, it was found that respondents with S1 education level were 68.1% and high school education level was 9.6%. Respondents who had smoked were 39.4% and still smoked 68.9%.

Resources in the Implementation of Non-Smoking Areas

The resources in implementing the KTR policy at the Maros Regent Office were assessed from several factors, namely staff, information, authority and facilities, as shown in the following table.

Table2 Resources in the Implementation of KTR Policies at the Office of the Maros Regent in 2019

	Variable	n = 188	%
Staff	Enough	169	89,9
	Less	19	10,1
Information	Enough	173	92,0
	Less	15	8,0
Authority	Enough	176	93,6
	Less	12	6,4
Facilities	Enough	172	91,5
	Less	16	8,5
Resources	Enough	132	70,2
	Less	56	29,8

Source: Primary Data

Based on table 2, it can be seen that the resources in implementing the KTR policy at the Maros Regent Office are generally sufficient. For staff factors, it was found that 89.9% of respondents stated that they were sufficient and the remaining 10.1% stated they were lacking. For information factors, it was found 92.0% of respondents stated that the KTR information received was sufficient and the remaining 8.0% stated that the information was lacking. For the authority factor, it was found 93.6% of respondents stated enough and the rest 6.4% of respondents stated less. For supporting facilities, it was found that 91.5% of respondents stated that facilities were sufficient and the remaining 8.5% stated that they were lacking. For resource variables, it was found that 70.2% of respondents stated that resources were sufficient and the remaining 29.8% stated they were lacking.

Bureaucratic Structure in the Implementation of Non-Smoking Areas (KTR)

The bureaucratic structure in implementing KTR policies at the Maros Regent Office can be seen in the following table.

Table3: Bureaucratic Structure in the Implementation of KTR Policy in the Office of the Maros Regent in 2019

Variable	n = 188	%
Standard Operating Procedure		
Good	169	89,9
Not Good	19	10,1
Fragmentation		
Good	156	83,0
Not Good	32	17,0
Bureaucratic Structure		
Good	150	79,8
Not Good	38	20,2

Source: Primary Data

Based on the table above, it can be seen that the bureaucratic structure in implementing the KTR policy at the Maros Regent Office is generally good. For the SOP factor, it was found 89.9% which stated that the SOP was good and the remaining 10.1% stated that it was not good. For the fragmentation factor, it was found that 83.0% stated that fragmentation was good and the remaining 17.0% said it was not good. For the bureaucratic structure variable, it was found that 79.8% stated that the bureaucratic structure was good and the remaining 20.2% stated that the bureaucratic structure was not good.

Non-Smoking Area Policy Implementation

The implementation of the No Smoking Area (KTR) policy at the Maros Regent Office can be seen in the following table.

Table4 Distribution of Respondents Based on Assessment of KTR Policy Implementation in the Office of the Maros Regent in 2019

Implementation of Non-Smoking Area Policy	N	%
Succeeded	107	56,9
Less successful	81	43,1
Total	188	100,0

Source: Primary Data

Based on the table above, there were 6.9% of respondents who stated that the implementation of the No Smoking Area (KTR) policy had been successfully implemented at the Maros Regent Office and the remaining 43.1% stated that it was less successful.

Bivariate Analysis

1. Resource Relations for the Implementation of Non-Smoking Area Policies

The relationship of resources to the implementation of the Non-Smoking Area policy at the Maros Regent Office can be seen in the following table.

Table5 Relationship of Resources to the Implementation of KTR Policy in the Office of the Regent of Maros in 2019

Resource	Implementation of Non-Smoking Area Policy				n	%	p-value
	Succeeded		Less successful				
	N	%	n	%			
Enough	74	56,1	58	43,9	132	100,0	0,716
Kurang	33	58,9	23	41,1	56	100,0	
Total	107	56,9	81	43,1	188	100,0	

Source: Primary Data

The table above shows that out of 132 respondents who stated sufficient resources, 56.1% of them stated that the implementation of the No Smoking Area policy was successful and the remaining 43.9% stated that they were less successful. While from 56 respondents who stated lack of resources, 58.9% stated that the implementation of KTR policies was successful and the remaining 41.1% stated that they were not successful. Based on the results of the analysis of the chi square test obtained p value (0.716) > α (0.05), it means that there is no relationship between the resources for the implementation of the Non-Smoking Area policy at the Office of the Regent of Maros.

2. Relation of the Bureaucratic Structure to the Implementation of Non-Smoking Area Policies

The relationship of the bureaucratic structure to the implementation of the Non-Smoking Area policy at the Maros Regent Office can be seen in the following table.

Table6: Relationship between the Bureaucratic Structure of KTR Policy Implementation in the Office of the Maros Regent in 2019

Bureaucratic Structure	Implementation of Non-Smoking Area Policy				N	%	p-value
	Succeeded		Less successful				
	n	%	N	%			
Enough	85	56,7	65	43,3	150	100,0	0,891
Kurang	22	57,9	16	42,1	38	100,0	
Total	107	56,9	81	43,1	188	100,0	

Source: Primary Data

The table above can be seen that of the 150 respondents who stated that the bureaucratic structure was good, 56.7% of them stated that the implementation of the KTR policy was successful and the remaining 43.3% stated that it was less successful. Whereas from 38 respondents who stated that the bureaucratic structure was not good, 57.9% of them stated that the implementation of KTR policies was successful and the remaining 42.1% stated that they were not successful.

Based on the results of the chi square test analysis obtained p value (0.891) > α (0.05) means that there is no relationship between the bureaucratic structure of the implementation of the Non-Smoking Area (KTR) policy at the Maros Regent Office....

V. Discussion

Relation of Resource Relations Against Implementation of Non-Smoking Area Policy (KTR)

Success in policy implementation is also determined by available resources. Resources are the source of drivers and implementers. The resources here include humans as implementing policies and supporting resources such as information, authority and facilities.

This is in line with the study conducted by Azkha (2013) which states that the availability of facilities and infrastructure to support the implementation of programs related to the Non-Smoking Area (KTR) policy is basically very necessary. Facilities needed include the provision of promotional media such as billboards, banners, stickers, billboards, and attributes. Likewise with the research conducted by Monica and Pambudi, about the implementation of Non-Smoking Areas in the City of Yogyakarta which states that the implementation of the Non-Smoking Area policy has been supported by adequate resources (Monica & Pambudi, 2017).

The results of a cross table between resources and KTR policy implementation indicate that only 56.4% of respondents with sufficient resources stated the successful implementation of KTR policies at the Maros Regent Office. From the results of the chi square test obtained p value (0.637) > α (0.05), it means that there is no relationship between the resources and the implementation of the No Smoking Area (KTR) policy at the Maros Regent Office.

Relation of Bureaucratic Structure to the Implementation of Non-Smoking Area Policy (KTR)

Bureaucratic structure is a characteristic, norms and patterns of relationships that occur repeatedly in executive bodies that have both potential and real relationships with what they have in carrying out policies. According to Edward III, two characteristics that can boost the performance of bureaucratic structures in a better direction, namely the Standard Operating Procedure (SOP) and implementing Fragmentation.

The characteristics of the implementers are closely related to the performance of policy implementation. Implementing characteristics include bureaucratic structures, norms and patterns of relations that occur in the bureaucracy. A bureaucratic structure that is too long will tend to weaken supervision and lead to complex and complex bureaucratic procedures which in turn will cause organizational activities to be inflexible.

In carrying out the policy implementation process, it can be seen that there must be a clear and directed mechanism for implementing policies. The policy implementation mechanism is usually determined through work procedures called the Standard Operating Procedure (SOP). A good SOP should include a clear, systematic, uncomplicated, easy to understand framework and become a reference in the operation of the implementation team. SOP is a guideline for each implementor in acting so that the implementation of the policy does not deviate from the policy goals and objectives.

The results showed that 89.9% of respondents stated that the Standard Operating Procedure was categorized as good in the implementation of the KTR policy at the Maros Regent Office. However, the results

of the respondents' questions found that only 93.6% of respondents stated that there was a Standard Operating Procedure (SOP) in the implementation of KTR policies and as many as 89.9% of respondents stated that the KTR policy watchdog carried out duties in accordance with the Standard Operating Procedure (SOP)

This is in line with the research conducted by Viralista (2018) in the implementation of the Non-Smoking Area policy in the Government Office of Serdang Bedagai Regency, where the SOP for implementers in the implementation of the No Smoking Area policy is in the Regional Regulation without Cigarettes itself and has been implemented well by the implementation team. Then for the delivery of rules such as prohibitions and sanctions to all employees in the office environment, namely by conveying to all employees in the regent's office to take part in socialization activities about Non-Smoking Areas, then by personal delivery, or personal reprimand to people who violate such smoking in any place.

Related to fragmentation, it was found that 83.0% of respondents with fragmentation were categorized as good in implementing the Non-Smoking Area policy at the Maros Regent Office. It is seen that as many as 90.4% of respondents stated that the supervisor of the Non-Smoking Area already knew their roles and responsibilities in implementing the Non-Smoking Area policy.

VI. Conclusion

Based on the results of the research related to the Implementation of Maros Regency Regional Regulation Number 11 of 2014 concerning Non-Smoking Areas (KTR) at the Maros Regent Office, the conclusions from this study are as follows:

1. Sufficient resources have no connection with the successful implementation of the Non-Smoking Area (KTR) policy at the Maros Regent Office.
2. A good structure of bureaucracy has no relation to the successful implementation of the Non-Smoking Area (KTR) policy at the Maros Regent Office.

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