

Religious Education, Smoking Laws and Islamic Organisations with Mosque Worshipers Smoking Behaviour

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Abstract

There are differences in fatwas about smoking by Islamic organizations, which will impact worshipers' smoking behavior. Behaviors like smoking will be linked to internal factors like being part of an Islamic group, getting religious education, and knowing about the smoking law. Smoking is an activity carried out by many people in Indonesia. Even though smoking is dangerous to health, it is triggering non-communicable diseases, which cause an increase in disability and death. This study follows a cross-sectional design by interviewing 530 Muslims who have prayed in the mosque for the last 14 days. This study used a pre-prepared closed questionnaire. Frequency distribution and cross-tabulation were carried out using JAPS 16 software. The results of this study show that people with religious education are less likely to smoke (12.1% at boarding schools and 36.7% at madrasah aliyah). Mosque worshipers who think smoking has a haram law tend never to smoke (34.1%), while among those who view smoking as a makruh law, many still smoke (4%). The results of this study indicate that Muhammadiyah organizations tend never to smoke (5.8%), Salafi organizations tend not to smoke (1.7%), and Nahdatul Ulama organizations tend not to smoke (80.8%). Many members of the Nahdatul Ulama organization still smoke cigarettes (5.5%). There is a strong link between smoking and things that happen on the inside, like religious education, smoking laws, and Islamic groups. Islamic organizations and smoking laws are factors that have an impact on the smoking behavior of mosque congregations.

Keyword: Islamic Organisations, Mosque Worshipers, Religious Education, Smoking Behaviour

INTRODUCTION

Smoking is an activity carried out by many people in Indonesia. Even though smoking is dangerous to health, it is triggering non-communicable diseases, which cause an increase in disability and death (WHO, 2019; Nasution, 2022). The dangers of smoking behavior do not reduce the number of smokers in Indonesia. This number increased until 2018, and Indonesia was estimated to have 61.4 million smokers. Various age groups have carried out smoking behavior, namely children, adolescents, adults, and the elderly. Smoking behavior is also carried out by men and women (Kementrian Kesehatan RI, 2018). Smokers always have reasons to smoke, for example, because some types of cigarettes do not cause health problems, smoking can trigger support from friends and family, and smoking can relieve

loneliness (Shpakou, 2018; Mirnawati, 2018; Sutha, 2016).

The European community introduced smoking behavior to Muslims in 1000 Hijriah (Sulaiman, 2013). European cigarette companies increased the number of cigarette advertisements in various Muslim countries to introduce smoking behavior to Muslims so that Muslims are addicted to smoking behavior.

The smoking frequency carried out by Muslims is still very high, and this is due to differences in the views of Islamic scholars regarding smoking law in Islam. Many Islamic scholars in Indonesia found that it is forbidden to smoke. However, some justify, specify between the three, and some others remain silent (tawagguf) or do not decide on the law (Prasetiya, 2020). The differences in methods of determining the law used by experts and differences in interpreting the texts caused Fuqaha to have different views regarding the law of smoking (Satria, 2020; Yusuf, 2020).

Islamic scholars have not found any evidence that forbids smoking, so they only carried out Ijtihad to solve this issue using various legal methods of legal Istinbat (Sabani, 2022). Some Islamic scholars view smoking behavior as unlawful, but some others express a tendency towards Makruh law. Islamic scholars in Indonesia have various views regarding the law of smoking. Islamic scholars of Nahdlatul Ulama (N.U.) believe that smoking behavior is Makhruh while Islamic scholars of Muhammadiyah mentioned that the fatwa of smoking is haram after studying the benefits and harms of smoking (Auton, 2012).

Indonesia seeks to improve air quality from cigarette smoke by implementing a smoke-free policy in various provinces and districts/cities. The Indonesian government issued the Regulation of the Minister of Health Number 70 of 2011 concerning Guidelines for the Implementation of Non-Smoking Areas, which was then followed by regional regulations in various provinces and districts/cities regarding non-smoking areas.

The non-smoking areas in various provinces in Indonesia is still poorly implemented. Facility compliance in implementing the smoke-free Policy is still low, such as 17% in Jayapura in 2018, 78% in Bogor in 2011, 38% in Bengkulu, and 30% in Medan in 2020 (Wahyuti, 2019; Asyary, 2018); Yunarman, 2020; Nasution, 2022).

Medan is a large city in North Sumatra province with a population of 15.6% (Badan Pusat Statistik, 2020). Medan has 1.6 million inhabitants, of which 65% of the population in Medan is Muslim. Medan currently has the slogan "Medan Berkah" (Medan Blessing) with the hope that Medan will become a multicultural, competitive, humanist, prosperous, and religious city. One form of religiosity in Medan can be seen in several houses of worship in

Medan, namely 1110 mosques to support Muslim worshipers (Badan Pusat Statistik, 2020).

Medan has implemented a non-smoking policy since 2013 through the Regional Regulation Number 3 of Medan regarding Non-Smoking Areas. The Smoke-Free Policy in Medan covers banning the selling, advertising, promotion, and smoking tobacco of tobacco products in various facilities, including health facilities, educational facilities, offices and places of worship.

The mosque is one of the facilities where the Smoke Free Policy should be implemented, but it is easy to find violations of the Smoke-Free Policy in the mosque. The violations of the Smoke-Free Policy (Indonesian: Kawasan Tanpa Rokok [KTR]) in mosques can still be seen in various provinces in Indonesia, such as Bengkulu (66.6%) and Bogor (20%) (Yunarman, 2020); (Handayani, 2020).

Many mosques do not provide information about the prohibition of smoking in the mosque area even though cigarette ashtrays with cigarette butts can be seen behind the mosque walls. When several religious studies were conducted in the mosque, it was common to find people smoking in the mosque's yard. However, we did not find any warnings from other worshippers or mosque administrators regarding the smoke behavior in the mosque. The mosque administrators and worshippers mentioned that they did not know the mosque was one of the places included in the smoke-free Policy (Handayani, 2021).

The smoking behavior of worshipers in the mosque is a concern because this interferes with the health of other worshipers who want to pray there. Cigarette smoke in the mosque will make worshippers become secondhand and thirdhand smokers. Public awareness about the dangers of smoking is an important component of not smoking in the smoke-free Policy (Veruswat, 2020; Hidayat, 2015).

METHODS

This research is descriptive with a cross-sectional design. This research was conducted on 531 worshipers in mosques in Medan City. This study was conducted from March to April 2022 in Medan, North Sumatra province.

The researchers interviewed 531 worshipers in mosques to see how religious education, smoking laws, and Islamic organizations affected mosque worshipers' smoking behavior. Researchers talked to people in public using a structured questionnaire to find out what they thought about the smoking habits of mosque worshipers in the last two weeks. The researchers analyzed the data using the JAPS version 19.

RESULTS

Table 1: Cross-tabulation of Religious Education, Smoking Laws and Islamic Organisations with Mosque Worshipers Smoking Behaviour.

Variable (N=531)	Never Smoke	Quit Smoking	Still Smoking
•	%	%	%
Boarding School (Pesantren)	12.1	1.1	2.4
Madrasah Aliyah	36.7	2.6	3.2
Haram Smoking	34.1	1.9	1.7
Makruh Smoking	42	2.8	4
Mubah Smoking	12.2	0.4	0.9
Muhammadiyah Organisation	5.8	0.4	0.8
Salafi Organisation	1.7	-	0.4
Nahdatul Ulama Organisation	80.8	4.7	5.5

The results of this study show that people with religious education are less likely to smoke (12.1% at boarding schools and 36.7% at madrasah aliyah). Mosque worshipers who think smoking has a haram law tend never to smoke (34.1%), while among those who view smoking as a makruh law, many still smoke (4%). The results of this study indicate that Muhammadiyah organizations tend never to smoke (5.8%), Salafi organizations tend not to smoke (1.7%), and Nahdatul Ulama organizations tend not to smoke (80.8%). Many members of the Nahdatul Ulama organization still smoke cigarettes (5.5%).

DISCUSS

There are differences in the views of Islamic scholars in viewing the smoking policy because smoking behavior is not specially mentioned in the Qur'an and Hadith, so Islamic scholars have various views (Prasetiya, 2020; Ferizal, 2016). Islamic scholars who forbid smoking mentioned that smoking does more harm than benefit.

Mosque worshipers who think smoking has a haram law tend never to smoke (34.1%), while among those who view smoking as a makruh law, many still smoke (4%). Cigarettes should be forbidden because of the dharár element within them. Besides, smoking can cause another dharár, namely dharár mali (danger to Property) (Yunus, 2009).

The prohibition of smoking is muwafaqah bil maqashid asy-syariah (according to the objectives of the Shari'a), namely maintaining the five cases mentioned above. Allah SWT says that "the characteristics of believers are and those who keep the mandates (which they carry) and their promises" (Q.S. al-Mu'minun: 8).

An Islamic scholar named Qaradhawi (2001) mentioned strictly that smoking is haram because cigarettes can cause various kinds of dharar (diseases), both dharar that comes immediately or dharar that comes gradually and can also be a waste of wealth. Smoking is also often identified as harming a person's psychology and morals.

Syehk Al-Bujairami (1995), in a book entitled "Hasyiyah" stated that "as for the cigarettes these days are called "natin", may Allah curse the person who made it for the first time, in fact is a bad bid'ah. Leaving the act of carrying "mafsadát" as mafsadát of smoking. Allah SWT mentioned that "do not squander (your wealth) extravagantly" (Q.S. Al-Isra': 26).

The views of the Indonesian Ulema Council (MUI), Nahdlatul Ulama (N.U.), and Muhammadiyah can be understood that the point of difference that arises among laws that forbid or allow smoking behavior is from the perspective of the arguments used and the impact of mafsadat (positive) and harm (negative) from smoking. The tendency to consider the prohibition of smoking is the achievement of maqasid sharia, namely to maintain personal health (hifz al nafs) and also to maintain Property (hifz al mal).

The smoke-free Policy is an effort to control smokers and protect non-smokers (Lubick, 2011; Wipfli, 2011). The smoke-free policy in the Regional Regulation Number 4 in Medan is an effort made by the government in Medan to reduce the risk of worshipers in the mosque being exposed to cigarettes. The results of this study indicate that of 305 mosques observed, many mosques still have violations related to the smoke-free policy (75.1%). The violations found in the application of the Smoke-Free Policy were cigarette butts in the mosque yard (68.2%), and worshipers who were found smoking inside the mosque yard (30.5%).

The results of this study show that taqwa mosque (muhammadiyah mosque) is still found to have violations of the area without cigarettes, muhammadiyah mosques are still found many cigarette butts to smoking behavior in mosques. Worshippers who prayed at muhammadiyah mosques did not comply with the haram smoking fatwa from the perceptive muhamadiyah organization. Scholars from Muhammadiyah have often preached in various studies about avoiding smoking behavior because it endangers themselves and others (Ilham,

2021). When worshippers smoke in the mosque, it will endanger others around them and even make worship activities carried out in the mosque uncomfortable.

Nahdatul Ulama organizations tend not to smoke (80.8%), many members of the Nahdatul Ulama organization still smoke cigarettes (5.5%). Nahdatul Ulama mosque has many cigarette butts, cigarette ashtrays, and cigarette butts and worshippers who smoke in the mosque area. Worshippers of nahdatul ulama mosque still assume the law of smoking makruh and even mubah so that they are not awkward to smoke. Scholars from Nahdatul ulama still think smoking is a makruh act, even mubah; some scholars from Nahdatul Ulama do not want to give haram fatwas for smoking behavior, and they tend to give fatwas makruh and even mubah. Smoking to various studies, states will have a bad impact on health, but behind the hope, it turns out that smoking can arouse the spirit of thinking and morale. The smoking law can be included in mubah (Faishal, 2009).

Smokers who smoke in public places included as Non-Smoking Areas are considered damaging to the objectives of maqashid sharia. The mosque is one of the places categorized as Non-Smoking area. From the perspective of Maqashid Sharia, the worshipers smoking in the mosque have violated two pillars, and one of them is 1) *hifz al din* (taking care of themselves. In the context of health, it is agreed that smoking has no benefits. On the contrary, smoking is detrimental to health. An active smoker has a risk of various health problems, such as respiratory issues and the risk of lung cancer (Islami, 2015; O'Keeffe, 2018; Rahal, 2017), a risk of periodontal disease and oral cancer (Zhang, 2019); Warnakulasuriya, 2005; Esfahrood, 2015) and various other cancer risks.

In addition, worshipers smoking in the mosque harm themselves and other worshipers who can become secondhand and thirdhand smokers from such action. Inhaling cigarette smoke impacts future damage to the person concerned (*hifz al nafs*). Exposure to cigarette smoke causes health problems, such as causing low birth weight and premature birth in pregnant women (Trisnowati, 2016;Nurhayati, 2022; Andriani,2021; Jaddoe, 2008; Nadhiroh, 2020), increasing the risk of developing asthma in children (Tanaka, 2017; Burke, 2012; Dekker, 2015), causing various periodontal diseases (Zhang, 2019; Tsz Kin Ng, 2015).

Regarding *Hifz al Mal* (Maintaining Property), the head of a smoking family must share his income to meet family needs by buying cigarettes (Oktaviasari, 2012). The expenditure on the purchase of cigarettes became the largest expenditure after basic food needs, education, and health investment (Sari, 2017). Many smokers have admitted that they do not find the benefits of smoking at all. Smoking behavior should be forbidden, not in

terms of its use, but it's waste (Satria, 2020).

The head of a family who is a smoker can maintain the Property well if the money spent on cigarettes is used to meet the nutrition his family needs, which is more beneficial. Allah S.W.T mentions in the Qur'an: (2:195) And spends in the way of Allah and do not throw [yourselves] with your [own] hands into destruction [by refraining]. Moreover, do good; indeed, Allah loves the doers of good.

In principle, the worshipers smoking in the mosque have violated two things, namely 1) violating the regional regulation issued by the Mayor of Medan in that it explains that smoking is not allowed in the non-smoking area (including mosques) through regional regulation number 3 of 2014 regarding the smoke-free policy, which includes the places of worship, such as mosques, prayer rooms, recitation places, and other similar places.

The results of this study indicate that there are still many community leaders who smoke in the mosque (19.4%), mosque administrators smoking in the mosque (39.2%), and even Islamic scholars smoking in the mosques (14.3%). This smoking behavior occurs because the community leaders and religious teachers are still smoking in the mosque area.

Ustadz (religious teachers) and community leaders are role models for the community, so their behavior will impact the community's smoking behavior in mosques. Many worshipers in the mosque smoke inside the mosque because they imitate the community leaders and the Islamic teachers also smoke in the mosque. It is very likely that the choice of smoking law in classical fiqh, which considers smoking as makhruh becomes why worshipers in the mosque keep smoking and ignoring the fatwa issued by the Indonesian Ulema Council (Indonesian: Majelis Ulama Indonesia [MUI]).

Cigarettes should be forbidden because of the dharár in smoking. Besides, smoking can cause another dharár, namely dharár mali (danger to Property) (Yunus, 2009). The prohibition of smoking is muwafaqah bil maqashid ash-syariah (according to the objectives of the sharia), namely maintaining the five cases as mentioned above. Allah S.W.T mentioned in the Qur'an that the characteristics of believers is "And they who are to their trusts and their promises attentive" (Q.S.: Al-Mukminun:8).

Smoking in the mosque can be understood as the decision made by the Indonesian Ulema Council that prohibits the behavior of smoking in public places, so the smoke-free Policy is carried out as a form of embodiment and implementation of the fatwa issued by the Indonesian Ulema Council. Furthermore, the fatwa issued by the Indonesian Ulema Council related to smoking applies to all leaders and administrators of the Indonesian Ulema Council

as a consequence of the fatwa. Therefore the behavior of community leaders smoking in public places, especially in mosques, is counterproductive to the fatwa issued by the Indonesian Ulema Council. On that basis, the smoke-free policy is an alternative solution to the legal dynamics of smoking in public places.

CONCLUSIONS

The Indonesian Ulema Council and the Muhammadiyah issued a fatwa saying Muslims cannot smoke publicly because it can hurt others. Nonetheless, many Muslims continue to smoke in public places, including mosques. One way Islam keeps its followers from endangering the lives and health of others is by telling them they cannot smoke around them. Cigarette smoke can cause worshippers to become second and third-hand smokers, putting them at risk for developing health problems.

Every citizen is responsible for following the rules set by the government so that everyone can be happy and healthy. According to the rules of Ushul Fiqh, "the government policy aims to benefit (maslahat)." It is very important to follow the fatwa from the central MUI (Indonesian Ulema Council) that says pregnant women and children cannot smoke in public places.

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REFERENCE

Al-Bujairami, S. (1995). Hasyiyah Al-Bujairami 'ala Al-Khatib. Dar al-Fikr.

Andriani, H. (2021). Second-Hand Smoke Exposure inside the House and Adverse Birth Outcomes in Indonesia: Evidence from Demographic and Health Survey 2017. *MedRxiv*, 11(20), 1–10. https://doi.org/https://doi.org/10.1101/2021.11.20.21266641

Asyary, A. (2018). Compliance study of hotel and nightclub smoke-free zones in Bogor City, Indonesia. *Tob Prev Cessat*, 4(25), 1–3. https://doi.org/https://dx.doi.org/10.18332%2Ftpc%2F92483

Auton, A. R. (2012). Fatwa Haram Smoking Majlis Tarjih Muhammadiyah. *IN RIGHT Jurnal Agama Dan Hak Azazi Manusia*, *1*(2), 311–342.

- Badan Pusat Statistik. (2020). Sumatera Utara Province in Figures 2020.
- Burke. (2012). Prenatal and passive smoke exposure and incidence of asthma and wheeze: systematic review and meta-analysis. *Pediatrics*, *129*(4), 735–744. https://doi.org/https://doi.org/10.1542/peds.2011-2196
- Dekker, H. T. de. (2015). Tobacco Smoke Exposure, Airway Resistance, and Asthma in School-age Children: The Generation R Study. *Chest*, 148(3), 607–617. https://doi.org/https://doi.org/10.1378/chest.14-1520
- Esfahrood, Z. R. (2015). The Effect of Nicotine and Cotinine on Human Gingival Fibroblasts Attachment to Root Surfaces. *Journal of Basic and Clinical Physiology and Pharmacology*, 26(5), 517–522. https://doi.org/https://doi.org/10.1515/jbcpp-2014-0120
- Faishal, A. (2009). *Bahtsul masail tentang hukum merokok*. Islam Nu. https://islam.nu.or.id/syariah/bahtsul-masail-tentang-hukum-merokok-70mqA
- Ferizal, I. (2016). Legal Testing Mechanism By Scholars In Establishing Haram Fatwa Against Cigarettes. *Jurnal Hukum Samudra Keadilan*, 11(1), 55–64.
- Handayani, N. (2020). Tobacco-Free Areas in Semarang City (Observational Study of TFA Regulation). *An-Nadaa: Jurnal Kesehatan Masyarakat*, 7(2), 115–121. https://doi.org/DOI: 10.31602/ann.v7i2.3671
- Handayani, N. (2021). The Implementation of Semarang City Local Government Regulation Number 3 of 2013 Concerning Tobacco-Free Areas. *Annals of Tropical Medicine and Public Health*, 24(1), 1–10. https://doi.org/http://doi.org/10.36295/ASRO.2021.24114
- Hidayat, R. A. (2015). Cigarette Law Controversy in the Book of Irsyād Al-Ikhwān by Sheikh Ihsan Muhammad Dahlan. *International Journal Ihya' 'Ulum Al-Din*, 17(2), 189–208. https://doi.org/DOI: 10.21580/ihya.16.2.1652
- Ilham. (2021). *Majelis Tarjih Ajak Semua Pihak untuk Kampanye Anti Rokok*. Muhammadiyah. https://muhammadiyah.or.id/majelis-tarjih-ajak-semua-pihak-untuk-kampanye-anti-rokok/
- Islami, F. (2015). Global Trends of Lung Cancer Mortality and Smoking Prevalence. *Transl Lung Cancer Res*, 4(4), 327–338. https://doi.org/doi: 10.3978/j.issn.2218-6751.2015.08.04
- Jaddoe. (2008). Active and passive maternal smoking during pregnancy and the risks of low birthweight and preterm birth: the Generation R Study. *Paediatr Perinat Epidemiol*, 22(2), 162–171. https://doi.org/https://doi.org/10.1111/j.1365-3016.2007.00916.x
- Kementrian Kesehatan RI. (2018). Basic Health Research 2018.
- Lubick. (2011). Smoking and secondhand smoke: Global Estimate of SHS Burden. *Environ Health Perspect*, 119(2), 66–69. https://doi.org/doi:10.1289/ehp.119-a66
- Mirnawati. (2018). Smoking Behavior in Teenagers Age 13-14 Years. *HIGEIA* (*Journal of Public Health Research and Development*), 2(3), 396-405. https://doi.org/https://doi.org/10.15294/higeia.v2i3.26761
- Nadhiroh. (2020). The Association Between Secondhand Smoke Exposure And Growth Outcomes Of Children: A Systematic Literature Review. *Tob Induc Dis*, *18*(12), 1–10. https://doi.org/https://doi.org/10.18332/tid/117958
- Nasution, F. (2022). Implementation of the smoke-free policy in Medan City, Indonesia: Compliance and challenges. *International Journal of Preventive Medicine*, 13(30), 1–6. https://doi.org/10.4103/ijpvm.IJPVM_106_20
- Nurhayati. (2022). Exposure to Outdoor Tobacco Advertisements Near Home is Associated with Smoking among Youth in Indonesia. *The Asian Pacific Journal of Cancer Prevention* (*APJCP*), 23(7), 2179–2183. https://doi.org/10.31557/APJCP.2022.23.7.2179
- O'Keeffe, L. M. (2018). Smoking as A Risk Factor for Lung Cancer in Women and Men: A

- Systematic Review and Meta-Analysis. *BMJ Open*, 216(8), 1–12. https://doi.org/doi:10.1136/bmjopen-2018-021611
- Oktaviasari, D. I. (2012). Relationship Between Large Family Spending On Cigarettes With Toddler Nutritional Status In Poor Families. *The Indonesian Journal of Public Health*, 9(1), 10–18.
- Prasetiya, N. H. (2020). Analysis of MUI Fatwa on Haram Cigarettes in Knives Shádz Ad-Dzáriyát Fikih Through Tafsir Ibn Katsir: Comparative Study of the Third Indonesian Fatwa Commission in 2009. *Al-Tadabbur: Jurnal Ilmu Al-Qur'an Dan Tafsir*, *5*(1), 137–164. https://doi.org/10.30868/at.v5i1.828
- Qaradhawi, Y. (2008). Contemporary Fatwas. Gema Insani Press.
- Rahal, Z. (2017). Smoking and Lung Cancer: A Geo-Regional Perspective. *Frontiers in Oncology*, 194(7), 1–7. https://doi.org/https://doi.org/10.3389/fonc.2017.00194
- Sabani, R. F. A. (2022). Analysis of Hadith Lā Dharara Walā Dhirāran as The Basis of fatwa on cigarette ban. *Jurnal Penelitian Ilmu Ushuluddin*, 2(2), 268–293. https://doi.org/DOI: 10.15575/jpiu.v2i2.13693
- Sari, H. (2017). Factors Affecting Cigarette Consumption Expenditure in Poor Households In Aceh Province. *Jurnal Perspektif Ekonomi Darussalam*, 3(2), 117–133. https://doi.org/https://doi.org/10.24815/jped.v3i2.8226
- Satria, O. (2020). The Fatwa Of Smoking In The Kerinci Manuscripts. *Jurnal PENAMAS*, 33(2), 277–292.
- Shpakou. (2018). Traditional smoking and e-smoking among medical students and students-athletes –popularity and motivation. *Fam Med Prim Care*, 20(1), 61–66. https://doi.org/doi: 10.5114/fmpcr.2018.73705
- Sulaiman, A. A. (2013). An Evaluation of the Causes and Effects of Smoking among Muslim Youths in Keffi Local Government Area, Nasarawa State, Nigeria: Islamic Perspective. *Research on Humanities and Social Sciences*, *3*(4), 76–82.
- Sutha. (2016). Social environmental analysis of adolescent smoking behavior in pangarengan district of Sampang Madura regency. *Jurnal Manajemen KesehatanSTIKES Yayasan RS. Dr. Soetomo*, 2(1), 43–59.
- Tanaka, K. (2017). Secondhand smoke exposure and risk of wheeze in early childhood: a prospective pregnancy birth cohort study. *Tobacco Induced Diseases*, 15(30), 1–7. https://doi.org/10.1186/s12971-017-0138-7
- Trisnowati, H. (2016). Exposure to Cigarette Smoke In The House and Low Birth Weight (Study At Hospital In Wonosari, Yogyakarta). *The 3rd Indonesian Conference on Tobacco or Health*, 1–7.
- Tsz Kin Ng. (2015). Cigarette Smoking Hinders Human Periodontal Ligament-Derived Stem Cell Proliferation, Migration And Differentiation Potentials. *Scientific Reports*, *5*(1), 1–7. https://doi.org/DOI: 10.1038/srep07828
- Veruswat, M. (2020). Perceived community support about the implementation of a smoke-free environment regional regulations in the Tegal municipality. *Family Medicine & Primary Care Review*, 22(3), 222–227. https://doi.org/https://doi.org/10.5114/fmpcr.2020.98250
- Wahyuti, W. (2019). Monitoring Compliance and Examining Challenges of a Smoke-free Policy in Jayapura, Indonesia. *J Prev Med Public Health*, 52(6), 427–432. https://doi.org/https://doi.org/10.3961/jpmph.19.240
- Warnakulasuriya, S. (2005). Tobacco, oral cancer, and treatment of dependence. *Oral Oncology*, 41(3), 244–260. https://doi.org/doi:10.1016/j.oraloncology.2004.08.010
- WHO. (2019). WHO report on the global tobacco epidemic 2019. https://www.who.int/tobacco/surveillance/policy/country_profile/en/

- Wipfli. (2011). Second-hand smoke's worldwide disease toll. *Lancet.*, *377*(9760), 101–102. https://doi.org/doi:10.1016/S0140-6736(10)61922-8
- Yunarman, S. (2020). Compliance with Smoke-Free Policy and Challenges in Implementation: Evidence from Bengkulu, Indonesia. *Asian Pac J Cancer Prev*, 21(9), 2647–2651. https://doi.org/10.31557/APJCP.2020.21.9.2647
- Yunus, M. (2009). Books of Cigarettes, Favors and Madarat That Legalize or Forbid. CV Kutu Wacana.
- Yusuf, R. M. (2020). Transactional Aspects in the Use of Cigarettes as a Means of Circumcision Invitation in Urf Perspective. *Journal of Islamic Business Law*, 4(3), 1–8.
- Zhang, Y. (2019). Effect of Tobacco on Periodontal Disease and Oral Cancer. *Tobacco Induced Diseases*, 17(40), 1–15. https://doi.org/doi: 10.18332/tid/106187