

## ADOLESCENT SMOKING HABITS IN REVIEW OF EXPERIENCE WITH THERAPY SPIRITUAL EMOTIONAL FREEDOM TECHNIQUE (SEFT)

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### ABSTRACT

**Background:** All over the world, the impact caused by smoking continues to increase until it reaches 6 million people who are active or passive smokers, resulting in health problems and death. In Indonesia, the prevalence of smokers at the age of 15 years and over has increased, namely in 2010 as much as 34.7%, 2013 to 36.3% while in 2017 it returned to from 34.2% (Dasar Riset Kesehatan, 2013). Riskesdes 2018, the prevalence of smokers aged > 15 years reached 62, 9% for men and women as much as 4.8%. Whereas in Kendari City, based on a study by the Central Statistics Agency, the percentage of the population aged > 15 years in 2017 who has the habit of smoking tobacco, especially men, reaches 38.17%. To reduce smoking intensity, one method that will be used is SEFT therapy (Spiritual Emotional Freedom Technique).

**Objective:** To find out the smoking habits of adolescents from the experience of undergoing SEFT therapy in Punggaloba Village, Kendari City. **Method:** This type of research is quantitative with a descriptive design and was conducted in August-September 2020. The total population of adolescents aged 15-25 years was 39 respondents using the Saturated Sample Technique. **Results:** There was a change in smoking habits in adolescents, namely a decrease in smoking intensity in terms of the respondent's experience after undergoing SEFT therapy 4 times with an average of 10.33 cigarettes a day, whereas before undergoing therapy the average respondent smoked 18.23 cigarettes. **Conclusion:** Adolescent smoking habits have changed with the reduced smoking intensity of respondents in the moderate category, namely by consuming enough cigarettes with an interval of 31-60 minutes starting to wake up in the morning and changing to the light category, namely consuming cigarettes rarely with an interval of 60 minutes from wake up in the morning.

**KEYWORDS:** SEFT therapy, Smoking, Adolescents.

### BACKGROUND

Smoking is one of the biggest problems for health. Six million 6 million active smokers worldwide die, then every 600 thousand passive or active smokers die from inhalation of cigarette smoke continuously. (Riset Kesehatan Dasar, 2018). In the United States, about 40 million people smoke, an estimated 480,000 people die, and 16 million suffer from smoking-related diseases (American Cancer Society, 2019). The prevalence of smoking in Indonesia is 67% or 57.6 million male population and 2.7% or 2.3 million female population. The prevalence of smoking in Indonesia aged 15 years and over increases every year, in 2010 as much as 34.7%, in 2013 it increased by 36.3%, then slightly decreased in 2017, namely to 34.7%. (Dasar Riset Kesehatan, 2013). Stopping the smoking habit is not an easy effort, especially for smokers in Indonesia. The results of the

Institute for the Management of the Smoking Problem (LM3) survey found that 66.2% of smokers had tried to quit smoking but were unsuccessful (Lembaga Menanggulangi Masalah Merokok, 2014). The habit of smoking in adolescents is that it occurs at night in a hangout. Smokers find it difficult to leave cigarettes because the pleasures caused by nicotine are addictive. This means that smoking forces smokers to become addicted. When a smoker quits, he feels unwell, but causes pain and discomfort called withdrawal (Subagyo Pertodiharjo, 2010).

Smoking in adolescents starts from a tendency or attitude that leads to more smoking activities. Looking at the aspects of attitudes that adolescents have towards smoking, it is necessary to instill the concept of thoughts and feelings that are right, be anticipating, and preventing smoking. Cognitive and emotional processes

can lead to a tendency to behave towards an object, especially in smoking. a feeling of control and a calm mind can motivate a person to act more productively and effectively. (Sulifan Y,2016).

Usually, the efforts made are only in the form of a preventive program through health education, but there is one method that is effectively applied, namely SEFT therapy, where SEFT therapy (Spiritual Emotional Freedom Technique) is one of the psychological therapy methods in the form of Therapeutic method development (SEFT) which emphasizes more on Mind Control and emotions so focus and light moment wiretapping is done. (Zainuddin, 2013). Strengthened by the opinion of experts who argue that self-control or mind control is a preventive intervention that can reduce preventive psychological effects and can reduce the negatives psychological effects of environmental stressors (Ghufron & Risnawita, 2011).

In line with research conducted by Janwar (2018) which shows that after doing therapy to heavy smokers there is a change that is no longer consuming cigarettes while at work, after eating, calming thoughts, and don't even consume cigarettes anymore. (Janwar, 2018). Based on the existing phenomena it can be seen that Today's teens put cigarettes as a measure teenage boy where if the boy doesn't smoke, then he is can't be said to be a real man. Also, the cause of adolescents smoking is the environment or peers. To reduce adolescent smoking habits, seft therapy is a therapy that can prevent adolescents from becoming addicted to smoking by controlling thoughts and emotions. This therapy is carried out 4 times within a month. This study aims to determine the effectiveness of SEFT therapy in reducing smoking intensity and to determine smoking habits in adolescents after undergoing SEFT therapy in Punggaloba Village, Kendari City, South east Sulawesi, Indonesia.

## METHODS

### Study Design

The design in this research is descriptive with quantitative research type.

### Participants

The population in this study were all teenagers in Punggaloba village in RW 03 RT 07 aged 15 to 25 years as many as 39 people. Sampling using Saturated Sample Technique.

### Instrument

The research instrument used a questionnaire and observation sheet to record the number of cigarettes consumed in terms of experience before and after undergoing seft therapy.

### Data Collections

Data collection techniques sourced from primary and secondary data, the study was conducted from August to September 2020. The subjects in this study were adolescents who had undergone Seft therapy for two months. Smoking habits were measured to determine the amount of cigarette consumption before and after undergoing therapy

### Data Analysis

Data were analyzed using descriptive statistics and presented in the form of a frequency distribution table of mean, median, and mode.

### Ethical Consideration

This study was approved by the Research Ethics Committee of IAKMI Pengda Sultra with number: 131/KEPK-IAKMI/VII/2020. This agreement is informed and signed by each of the study participants.

## RESULTS

Below is a table of smoking a habits in andolescents in terms of experience undergoing seft therapy.

**Table 1: Adolescent smoking habits were reviewed from the experience of undergoing SEFT therapy.**

Adolescent smoking habits were reviewed from the experience of undergoing seft therapy	Mean (cigarette)	Median	SD	Min-max (cigarette)
<b>Therapy I</b>				
<i>Before undergoing therapy</i>	18,23	19	1,404	15-20
<i>After undergoing therapy</i>	17,46	18	1,232	15-20
<b>Therapy II</b>				
<i>Before undergoing therapy</i>	17,46	18	1,232	15- 20
<i>After undergoing therapy</i>	16,33	16	1,221	14-19
<b>Therapy III</b>				
<i>Before undergoing therapy</i>	16,38	16	1,161	14-19
<i>After undergoing therapy</i>	11,41	11	2,500	8-17
<b>Therapy IV</b>				
<i>Before undergoing therapy</i>	11,38	8	2,477	8-17
<i>After undergoing therapy</i>	10,33	7	2,101	7-15

Sourced : Primary Data 2020

Table 1. Average of respondents to the first therapy performed, namely the results average number of respondents smoked was 18.23 cigarettes, before undergoing therapy and after undergoing therapy the figure was 17.46, the second therapy was the averages number of smoking respondents was 17.46 cigarettes before being given therapy, and it became 16.33 after given SEFT therapy, while in the third therapy before being given therapy, the averages respondent smoked 16.38 cigarettes, and decreased to 11.41 after given SEFT therapy. The last therapy showed the results before therapy of respondents who smoked an average of 11.38, after undergoing therapy, respondents smoked an average of 10.33 cigarettes.

## DISCUSSIONS

The results of this study are that the smoking habit of adolescents shows a change in the respondent's experience after undergoing SEFT therapy 4 times with an average of 10.33 cigarettes a day, whereas before undergoing therapy the average respondent smoked more cigarettes that in the range of 18.23 cigarettes a day. The smoking habits of adolescents in this study also experienced a change with the decrease in the intensity of smoking in respondents who were in the moderate category, namely before undergoing therapy by consuming cigarettes with an interval of 31-60 minutes starting to wake up in the morning, while in the mild category, namely after undergoing therapy with consuming cigarettes rarely with an interval of 60 minutes from waking up in the morning.

The results of this study are in line with existing research conducted by Christine Sihombing in 2018, previously given SEFT therapy intervention, the intensity of the respondents light smokers as much as 45.5%, moderate smokers 9.1% while heavy smokers are 45.5% (Sihombing, 2018).

Efforts that can be made to reduce the intensity of smoking are by doing SEFT therapy because SEFT therapy is a combination of spiritual power which has main principles, namely sincerity, confidence, gratitude, sincere patience and energy psychology, which are a set of principles and techniques to utilize the body's energy system to improve the state of the mind., emotions and behavior (Zainudin, 2012).

According to Rusdijati and Mashar in 2016, said that a smoker with high smoking intensity is because they tend to continue the smoking habit which is caused by decreasing concentration in activities and often drowsiness. Meanwhile, adolescents quit smoking because they do not have a strong interest in quitting smoking and are still developing self-actualization. (Rusdijati, R., Mashar, R., KM, J. M. B. S., & Magelang, 2016).

By doing Spiritual Emotional Freedom Technique (SEFT) therapy, emotional problems and physical

problems experienced by a person, for example students to change the frequency of smoking, will reduce what they feel. This is because the Spiritual Emotional Freedom Technique (SEFT) emphasizes the elements of spirituality (prayer) and the body's energy system using the tapping method at certain points on the body. In addition to the body's energy system, there is also a relaxation method involving the respondent's belief factor (Husaini, 2015).

Therapy is the provision of directions or suggestions, solutions, and solutions to counseling problems that are given after the counselor clearly knows the problems experienced by counseling. In this process, counseling is helped to overcome the problem by using Spiritual Emotional Freedom Technique (SEFT) therapy. (Husaini, 2015).

When the respondent underwent SEFT therapy, the activity was carried out in a quiet room without noise in order to make the respondent focus on the therapy given. The first therapy is carried out in the first week by providing guidance to counseling regarding the points of the body to be treated, sentences to be pronounced and keeping the Handphone away from the respondent. Before being given therapy, the average respondent smoked 23 cigarettes because the respondent had not undergone a series of therapy and was still influenced by the environment and after being given therapy the average respondent smoked 17.46 cigarettes, which decreased it was because the subject had started realize that smoking too often is bad for health. After undergoing a second therapy to reduce smoking intensity, average There were 16.33 cigarettes consumed by adolescents, that is, it had decreased, this second therapy was decreased because the subjects always remembered the bad effects of smoking. Subject stated what had been said while doing the therapy, there subject begins to reduce the number or smoking intensity, while undergoing therapy adolescents feel comfortable and slowly controlled negative desire to consume cigarettes excessively. while the third therapy experience shows the same response to the subject. Therapy was carried out 4 times and there was an increase in smoking intensity before undergoing and after undergoing therapy. In the fourth (last) therapy, the average respondent smoked 11.38 cigarettes (before therapy) and an average of 10.33 cigarettes (after therapy). From the therapy process, the intensity of smoking has decreased drastically if it is done continuously and repeatedly and is able to change the mindset of adolescents to be positive. From the results obtained, based on the experience of adolescents while undergoing SEFT therapy, cigarette consumption has decreased to the moderate smoking category because the smoking intensity has decreased below 11 cigarettes per day, which was previously in the mild category above 11 cigarettes per day to 20 cigarettes / day.

Likewise with research conducted by Arif and Dwi (2015), the smoking intensity of respondents before

SEFT therapy had decreased, namely that most were moderate smokers (71.4%) and after SEFT therapy half were light smokers (50.0%) (Arif Nurma Etika). & Dwi Septian Wijaya, 2015). Also reinforced by the hierarchy of needs theory (Maslow) theory, namely food, shelter, including socializing, security, compassion, actualization, and self- esteem. (Notoatmodjo, 2016).

This study is in line with research conducted by Komariah in 2012, which states that SEFT therapy is effective in reducing smoking behavior in college students. Students who were given SEFT therapy experienced a decrease in the smoking behavior scale compared to students who were not given SEFT therapy. SEFT therapy can affect smoking intensity because SEFT therapy can neutralize the psychological problems that smokers have. SEFT therapy consists of set up, tune in, and tapping (Komariah, 2012).

Research conducted by Muthia et al in 2015 found that the smoking habits of students were included in the category of light smokers (<10 cigarettes / day) as many as 34 respondents (42%), who were included in the moderate smoking category (10-20 cigarettes / day) there were as many as 25 respondents (35.8%) and those included in the category of heavy smokers (> 20 cigarettes / day) were 18 respondents (22.2%) (Muthia Vaora, 2017).

## CONCLUSION

It is concluded that the smoking intensity has decreased quite drastically where the average of respondents smoking after undergoing SEFT therapy is 10.33 cigarettes on average in terms of smoking habits after undergoing SEFT therapy.

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