



## International Journal of Current Research and Academic Review

ISSN: 2347-3215 Volume 2 Number 10 (October-2014) pp. 149-156

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### Beneficiary of Quit smoking (case study of Bone Bone communities)

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#### KEYWORDS

Quit smoking,  
Second hand smokers,  
Community and  
religious leaders

#### A B S T R A C T

The medical reports revealed that second hand smokers are much more risky than the smokers themselves. At present, there are about 1.3 billion smokers in the world and 84% of them came from the third world countries and 200 million of whom are women and no less than 700 million children are exposed to cigarette smoke as exposure to second hand smokers. The qualitative research approach is naturalistic setting, conducted to observe individually in the environment, interact with other people where they are trying to understand the language and interpretation of the world around it. Qualitative research conducted in the Bone-Bone village that covers 3 hamlets namely Buntu Billa, Bungin-Bungin and Pendokesan. Number of houses was 134 houses entirely. Currently, in the year of 2010 the population of the village is 797 people listed, data collected in this study focused on community and religious leaders in everyday life is seen as agents of change related to the smoking behavior of Bone-Bone citizens, before the advent of the idea of "Bone-Bone Smoke Free Hamlet", and thereafter. In a period of five years or more, that in fact after 2005, there are 2 residents who smoke, and at the end of 2007 until now, Bone-Bone really free of cigarette smoking. Result from focus group discussion concluded that from some respondents who stopping smoke give some benefits such as a. breath does not smell of cigarettes, b. the sound is not raucous, c. delicious, not dry throat, d. feel convenient, no coughing, e. loose, breathing felt more relieved, f. more powerful in physical activities and g. economical benefit, children can attain to the college as result of saving more money. This study has figure out of propositions as follow: 1. the effectiveness of community leadership is determined by the fit between what is proposed in the line of the conditions and aspirations of the people. 2. the idea conveyed by a trusted source that will generate a high level of public acceptance and 3. the deal would be if the collective behavior through the process of socialization, internalization and institutionalization among the communities.

### Introduction

Data the World Health Organization (WHO) recorded these are currently 1.3 billion in the

world and 84% of which came from the third world countries and more than 200

million of whom are women. In fact, every year no less than 700 million children were exposed to cigarette smoke and exposure to second hand smokers (Republika, 2005). In the medical records described that second hand smokers are much more risk than the smokers themselves. The term is used in developed countries are second hand smokers.

One of the important factors is environment that influencing a person to start smoking is an advertisement. Nichter *et al.* (2008) said that the cigarettes advertising in Indonesia are very aggressive and innovative in the world. In the ads depicted smoking behavior as a symbol of maturity, popularity and even a symbol of virility and beauty. The influence of cigarette advertising at sporting events involving women, such as tennis players and others. Misleading advertising, including linking cigarettes with masculinity, world of glamour, sporting and so on. The cigarette industry is often a sponsor at certain events such as sporting events activities, even giving scholarships to a number of students who are considered outstanding.

According to Hidayat and Thabrany (2008) in a Dynamic Model Specification Request Cigarettes: questioning it rational smokers Indonesia stated that there are 2 possibilities of interacting that caused the addictive nature of Indonesian smokers are irrational. First, smokers are less digest well about the negative effects of cigarettes information. They put the benefits of a virtual subjective and smoking activities such as and the avoidance of a higher pressure pleasure than the negative effects of cigarettes. Although information about the dangers of smoking from the government written on cigarette packs industrial products "Smoking can cause cancer, heart attacks, impotence and disorders of pregnancy and the fetus", a

warning which stated it does not change the behavior of smokers. The results of another study (Kristanti, 1995; Efendi, 2007) which takes a sample adolescents aged 13–19 years and study sites in the province of West Java (922 respondents) and Bali (1,189 respondents) concluded that 25.4% of adolescents in West Java who smoked 3.8% of whom are women, 18.8% whereas teenager in Bali who smoked 1.1% among female. Populations of the two regions were found, 35.2% of men and 5.7% of women smoking is known besides they also consume alcoholic beverages (Effendi, 2007).

Skinner (1976) (Walgito, 1994) distinguishes behavior into; (a) the behavior of natural (innate behavior), the behavior of organisms carried since birth, and (b) operant behavior (operant behavior), the behavior of which is formed through the process of learning. Being the formation of behavior can be either (1) the formation of the habit behavior, (2) formation with understanding behavior, and (3) formation by using a model of behavior. According to this view, smoking behavior is an operant behavior, i.e., behavior formed through a process of learning. This means that he learned, how to begin, become addicted and so on. In fact, that people who smoke, addiction and has become a habit in daily life, so it is difficult to stop this behavior.

A village that named Bone-Bone, on the other hand, for some time before the state government is the hamlet called Bone-Bone, then upgraded to be a village in 2007, base on the Indonesian governmental administrative view, a few of years ago most of the community was also a smoker, even found some of them who claimed that they smoked from an early age (six years). However, since 2000, an innovator rising, the head of the village, was then appointed

as the head of the village who initiated the hamlet villagers, "smoke-free village." He was assisted by the people in line with his mind, other community leaders and religious leaders who introduced the idea and successfully during work hard within five years. Today, the villagers of Bone-Bone smoke-free.

## **Materials and Methods**

### **A. Types and stages of research**

The research used a qualitative approach with naturalistic setting means that the study is conducted in a reasonable situation or in a "natural setting" in accordance with the actual situation found at the sites. A qualitative approach is essentially conducted to observe the individually in the environment, interact with other people where they are trying to understand the language and interpretation of the world around (Nasution, 1996).

### **B. Research location**

The research conducted in the Bone-Bone village that is located at the foot of the Latimojong mountain, District of Baraka, Enrekang. Bone-Bone Village covers 3 hamlets namely Buntu Billa, Bungin-Bungin and Pendokesan. Number of houses were entirely 134. Currently, in the year of 2010 the population was 797 people listed.

### **C. Object/target/source data**

Baseline data has been collected in this study focused on community and religious leaders in everyday life is seen as agents of change related to stop smoking behavior Bone-Bone citizens before the advent of the idea of "Bone-Bone Village Smoke Free", and thereafter. In a period of five years later, in fact that after 2005, the rest of smokers

there was 2 residents who smoke, and at the end of 2007, entirely Bone-Bone really free of cigarette smoke.

### **D. Focus Description**

This research focused on the role played by both community and religious leaders who help innovators to accelerate the acceptance of quit the habit for citizens and ended at the villagers of admitted Bone-Bone smoke-free.

Descriptions focus on the following matters;

1. How the role of community and religious leaders to change social behavior in terms of smoking habits to stop doing it.
2. How is the response community, the issue of behavior change to stop smoking.
3. How is the sustainability of quit smoking behavior in the future.

### **E. Data collection techniques**

Talking about the ways of collecting data, there are two main problems that needed to be answered: 1) how the study singled out and selected object, and 2) by means of what data about these objects are summarized and recorded. Since the object of health sociology of science is ultimately certain groups of human beings affect each other especially in healthy habit, and the device is self researcher when he can interact with people, with the principle that each person usually interested to communicate with other people, even strangers. Data were collected through interviews, focus group discussions and observation.

## **Result and Discussion**

In 2000 and earlier, the villagers of Bone-Bone partially smoked, for various reasons and views about smoking. Some psychological aspects also coloring the

reason that they like smoking, it has its own pleasure, to make it look manly, to dispel the cold, the loneliness in alone times, parents, father and family to do so, whether in the garden, in the rice fields or at home. Given the cold air, even at certain moments very cold in the night time with low temperature of 5°C, according to the people who had come there, the chill reaches 5°C in the Bone-Bone village. This has caused many people to dispel out of the chill by taking a cigarette and premises fire as a tool of body warmers.

In the preview time, people who smoked rolled his own cigarettes. Tobacco is purchased in the market of Baraka, located about 20 km from the village of Bone-Bone, the time taken by way of just walking. Tobacco is purchased along with a special paper for cigarette at that time. Tobacco rolled with cigarette paper, in fact about 30 years ago, parents roll tobacco with dried corn leaves, sliced with a sharp knife about the size of a 3 x 7 cm.

Example was Burhan, 54, who was left by her father since childhood, and his mother remarried, said he began smoking when he was a teenager. "... I smoked since I was little, at that time I was a 1<sup>st</sup> grade, and started smoking because of seeing people around me, again the influence of smoking it because my school friends are invited. Not only because of friends, but also at home I often saw my stepfather smoked" (Interview with Burhan, June 18, 2010).

### **B. Bone-Bone will free of smoke**

In 2000, new symptoms of smoking rise, namely the view that smoking is much more ugly than favorable. This view was born of a religious lecture in the month of Ramadan by Chairuddin, the Imam of al Hamra mosque of Cakke. It turns out that most

citizens intrigued with that view, then Idris, head of the village took the initiative to hold the opinion of the majority of its citizens about the habit of smoking behavior. Idris gather people who are agree with the content of sermon to stop smoking according to the evening lecture, followed by a lecture at dawn. Many people were curious about the burst of Chairuddin. Finally there is an agreement to prohibit smoking in the village.

"... The smoking ban was initiated in the year of 2000, is still limited to the time the agreement prohibited smoking in the village. People who want to smoke unwilling out of the Bone-Bone and go to neighborhood of the village. In the early stages, for guests from outside the village is still allowed to smoke" (Interview with Idris, May 20, 2010). Trying to community issues that catapult forward hamlets Bone-Bone will be smoke-free. This issue makes people who smoke when the restless, especially who disagree with the village head. Various negative comments and accusations against the issue, especially from relatives were arised.

In line with the idea of stop smoking for citizens, Idris was secretly doing approaches, using Green's theory (Ngatimin, 1987) who argued that the use of the process of education to change behavior, there are 3 ways that can be taken to change behavior, namely (1) way of communication, (2) how to exercise, and (3) a method of people organizing.

### **C. The perceived benefits**

Focused group discussion results revealed that some of the benefits felt by smokers who quit smoking after a few weeks of quit smoking. The majority focused group discussion participants felt there was a lack

in their life, namely smoking. Feeling of wanting to smoke is pressed, after a long time, they eventually forgot it. However, it was realized that it was not anything too after stopping, and starting to feel there is something better. The benefits are felt by people who are classified as heavy smokers, are revealed as follows:

### **1. Breath does not smell of cigarettes**

"... In the first when I was smoking, my breath smelled of cigarettes, it was bad. Now it has been free from smell like it. When gathering with others in the communities feel more confident no more cigarettes smelt" (Interview with Bahrum, August 20, 2010).

### **2. The sound is not raucous**

"... at the time when I still smoke, my voice was raucous, bad to hear, in the morning when my voice hoarse speech, especially when chanting the Koran, after quitting smoking was not hoarse voice anymore" (Interview with Tukan, August 20, 2010).

### **3. Delicious, not dry throat**

"... That night, before bed my throat a little dry, I often take drinking water, especially when it is night. After quitting smoking, the taste of dry throat was gone" (Interview with Kadang, August 20, 2010).

### **4. Convenient, no coughing**

"... People in the house often admonish me, that smoking and coughing. When I quit smoking, I lost my coughing. After quitting smoking, no longer coughing like previous days" (Interview with Abd. Hakim, August 20, 2010).

### **5. Loose, breathing felt more relieved**

"... Go into the garden early in the morning, once when I was still smoking, I have a little shortness of breath, although it is sometimes. Today, shortness of breath like the old is no more. Perhaps this is the effect of not smoking" (Interview with Sarrang, August 20, 2010).

### **6. More powerful in physical activities**

"... I believe that smoke damage the health, when I still smoked, I had to stop to rest for a few minutes just to be able to move on to the garden. Now no more stop on the way to the garden when carrying a load though" (Interview with Sukiman, June 18, 2010).

### **7. Economic benefits**

"... buying cigarettes was highly cost me, more than a half of my income burn just for smoking. While still smoking I used to be difficult to imagine whether I can fund children to Makassar for studying. Thank God I was able to send children to college" (Interview with Ruddin. July 16, 2010).

This study worked the theory of symbolic interaction as the main theory (Grand Theory) as set out in the framework of Herbert Blumer (2007) studied the use of social interaction of specific interaction approach, known as interactionist perspective. According to Henslin (2006) adherents of symbolic interaction study on how people use symbols to develop and share their views on the world and to communicate with each other. That way where Idris utilize what he calls, the Bone-Bone village can be done anything for the good, because no one else, a kinship, so that innovation can be adopted by not too long, so thought initially.

Behavior can be interpreted as an event psychophysics in some form as a result of the stimulation that comes from outside of an individual. In this sense the behavior can be shaped an idea, concept or idea that has not been actualized in the form of real activities. That starts with smoking behavior as experienced by Burhan, he watched his stepfather who smoke, and always smoking. In the shadow of smoking it turns out, does have its own favor, then he tried in accordance with the solicitation of his friends.

People often behave is influenced by motivation. Quinn (in Notoatmodjo, 2005) says that in the concept of motivation we will also study the phenomena that affect the nature, strength and determination of human behavior. School children who try smoking with high motivation, so it is considered more manly, not children anymore, so try smoking that eventually become addicted. The behavior described by Sarwono (1997) as a result instead of all kinds of human experiences and interaction with the environment is manifested in the form of knowledge, attitudes and actions. In the knowledge that novice smokers affected by smokers because, in this case the other person, then he is to be positive and do it.

The process of behavior change through the involvement of education (formal and informal), the first will raise awareness of the problem. The emergence of a fascination and desire to obtain much more information, instill confidence in the people, that there are really solving the problem, which in turn, can help a person to adjust to the needs of behavioral change. This will be successful if the people in the community directly involved creating a desire for changing, in this case the behavior.

At the time of the emergence of issues, Bone-Bone Smoke Free, appears also in the

mind of the smoker, wondering to their self, is there any truth in saying that encourages people to stop smoking, is that really possibly occur?, benefits and some of them try to quit smoking, and initially failed. Behavior change through education is not the only way to change behavior. As written by Notoatmodjo (2005) and Sarwono (1997) that in general the efforts to change behavior can be classified into 3 different ways: (1) use of power or force, (2) provide information and (3) discussion and participation. This is where Idris tried using in addition to power, also factor kinship with smokers. He gave information about the pros and cons of smoking, and even discusses it with smokers.

The concept of health behaviors, Kalangie (1994) has its own position because it is a fact that indicates the communication of new health ideas succeed not only because it has been received but is also adopted in the forms of behavior to meet the needs of the prevention of disease and health promotion. Behaviors that affect health can be classified in the form of:

1. Conscious behavior is done for the benefit of health. People quit smoking, at first, before the launching of a smoke-free.
2. The behavior which is prejudicial to the health conscious. Perceived as still smoking, is often coughing, hoarseness, in the morning was shortness of breath, and it was detrimental to health of smokers.
3. Behavior that is not prejudicial to the health conscious. Because people who smoke it at first just went along, seeing friends and invitations from them, seeing parents smoke at home and at the end realize that it is damaging the health of themselves and others.
4. Behavior is not favorable health conscious. Went along with not smoking,

quit smoking, it can be beneficial to the health of individuals and communities.

### **Propositions**

1. The effectiveness of community leadership is determined by the fit between what is proposed in line with the conditions and aspirations of the people.
2. The idea conveyed by a trusted source that will generate a high level of public acceptance.
3. The deal would be if the collective behavior through the process of socialization, internalization and institutionalization.

### **Conclusion**

1. The role of community leaders, business innovators in smoking cessation-Bone Bone citizens by way of a plan change:
  - a. Issues catapult, village of Bone-Bone will be smoke-free
  - b. organize supporting ideas
  - c. made a deal: a kind of social contract
  - d. announced the deal take place in a mosque, village-Bone Bone smoke-free with the following considerations:
    - 1) Smoking inhibits education ones
    - 2) Smoking damages the health of self and others
    - 3) Smoking is economically wasteful life
    - 4) Smoking is banned (*haram*) in Islam
2. The role of religious leaders in helping innovators do not change smoking behavior in the village of Bone-Bone by way of:
  - a. appealed to quit smoking
  - b. persuasive approach
  - c. conduct home visits
3. Response system of citizens as recipients of the message to quit smoking. Originally

there were rejected, but there is also readily agreed, that in the end all received.

4. Sustainability of smoking habits in the future for the citizens of Bone-Bone has been institutionalized into a system of norms.

### **Acknowledgments**

Author wish to express our acknowledgment to the Bone-Bone communities, especially to the community and religious leaders and the interviewee who were very cooperative in assisting collect the data and all our friends and well wishers who encourage and help us in our study, thank you very much.

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