The Meaning of Smoking for Lecturers

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Abstract

Smoking is a serious problem and needs immediate solutions in Indonesia. The solution comes from knowledge that aims at changing smoking habit. Knowledge, however, does not have the ability to change this smoking habit. This study is performed to identify the meaning of smoking for medical lecturers who have the knowledge regarding the dangers of smoking but continue doing it because of what they take as logically acceptable reasons. This study employs descriptive-qualitative method with 4 lecturers at STIKES Bahrul Ulum as the informants. The data collection method is through observation, and deep interview using interview guidelines. The data analysis takes qualitative analysis technique. The results obtained from the 4 informants revealed that they started smoking since young age as a sign of respect to their friends or people around them. They said that smoking provided more advantages compared to the disadvantages; thus, their smoking is supported by this knowledge. They argue that the negative impacts occurred due to other factors besides the smoking itself. Every informant excerpts that smoking becomes their way of releasing stress, relaxation and refreshing medium, wasting time activity, friendship expression, and inspirations for brilliant ideas. Smoking is just a snack, a business, a sharing medium instead of wastefulness, and worshipping medium to God (by gathering with others, facilitating introspection to get closer to God).

Keywords: meaning, smoking, lecturers.

Introduction

The number of smokers in Indonesia increases every year. According to the data released by Public Health Office in 2016, Indonesia is number one in the world for smokers under 15 years of age. At this age, the data shows that two out of three boys in Indonesia are smokers. There are variety of ways through propaganda that the government and private sector have done to decrease the number of smokers although there does not seem to be successful outcome. The government has several policies such as the rules concerning smoking area in public facilities to lessen the bad effects of smoking for both active and passive smokers. There is also a warning about the danger of smoking in the form of writing and pictures of diseases caused by smoking on the cigarette packs. Another way is to increase cigarette tax. Despite those efforts, the number of smokers in Indonesia does not seem to decrease.

The data implies how serious the smoking issue in Indonesia is which requires immediate solving actions. The number of child smokers in Indonesia is also very high. A survey by Lentera NGO revealed that in Indonesia, 13-to-19 year old teenagers already began smoking. Indonesian Child Protection Commission mentioned that the number of under 10 year old smokers has already reached 239 thousand children. Thus, in order to prevent the increase of the number of smokers, there have to be serious efforts started from family and educational institutions in the hope of changing the smoking habit. Early education is expected to be able to reconstruct values people have about smoking and make them start healthy lifestyle as early as possible.

Table from Indonesian Public Health Office about smokers in several countries.

Table 1: Data of smokers in several countries.

No	Country	15 and above smokers	
1	Indonesia	66%	
2	Russia	60%	
3	China	53%	
4	The Philippines	48%	
5	Vietnam	47%	
6	Malaysia	44%	
7	India	24%	
8	Brazil	22%	

Source: public health office 2016

In the society, in fact, smoking is considered as a normal thing to do and becomes an important need for men. Smoking is never actually taken as a deviant behavior because of its possibility to disturb the non-smokers although in reality, smoking does not only affect the smokers themselves but also affect the people around them, commonly known as passive smokers. Passive smokers are people who inhale cigarette smoke from smokers around them. Association of Indonesian Public Health Experts stated that the danger of cigarette smoke was proven higher for passive smokers compared to the active smokers themselves. This occurs because only 25% of the dangerous substances in cigarettes will enter the active smokers' body through cigarette filter while the other 75% of them will be spread freely in the air and inhaled by passive smokers.

Regarding to this condition, some people categorize smoking habit as a deviant behavior. Deviant behavior refers to actions that deviate from the characteristics of common people. This kind of behavior can be divided into three groups, i.e. (1) Individual with deviant behavior that causes disadvantages for other people, (2) Individual with deviant behavior that causes problems for him, and (3) Individual with deviant behavior that causes problems for both other people and himself.

There are only two theoretical approaches in connection with deviant behavior of smoking, which are psychological and sociological theories. Psychological theories highlights the deviant behavior from its psychological aspect; hence, people act against the existing social norms from various causes such as intelligence, personality traits, thinking process, motivation to get certain satisfaction, wrong life attitude, wrong self-internalization, and emotional conflicts. In terms of smoking, the factor that psychologically affects this behavior is motivation to get certain satisfaction. A research in England showed that female teenagers smoked to make them look more mature by building more self-confident and being able to control their body weight, which in turns, made them smoke more frequently.

The fact is that although everyone understands the negative impacts of smoking from different point of views like religious, social, and health point of views about how detrimental smoking habit is, the number of smokers tends to increase and the smokers also comes from younger ages.

The final hope to change smoking habit lies on knowledge. Enough knowledge on this issue will be able to shift not only one's behavior but also his perception, values, norms, and attitude. This final hope, however, also faces a dead-end when the fact distinctively shows that having sufficient amount

of knowledge cannot change one's behavior, which in this case is smoking. The present study was performed at College of Health Science (STIKES) Bahrul Ulum Jombang. There was an interesting fact emerging from this campus that someone who started smoking in his teen without realizing the dangers began studying health and learnt about various diseases triggered by smoking habit but he was unable to change this bad habit. The following table contains the data about active male smokers at STIKES Bahrul Ulum Jombang in 2016.

Table 2. Active male smokers at STIKES Bahrul Ulum Jombang in 2016

No	Category	Smokers	Non-smokers
1	Lecturers (Male)	4	2
2	Students (Male)	37	14

Data Source: STIKES Bahrul Ulum

College of Health Science provides knowledge and science about health. The impact of smoking habit to lungs and other physiological systems in human's body must already be well understood by the lecturers and the students; yet, they still do something against their knowledge, smoking. Normally, when one understands the medical science about the dangers of smoking, he will not smoke. Unfortunately, the reality shows different fact which is an antithesis of the theory saying that knowledge will affect one's behavior.

The fact that there is a disharmony between smoking habit and knowledge, which means that knowledge loses its power to change one's behavior, attracts the researcher to try to uncover this phenomenon in more detail to obtain better understanding over this fact. Since this difficult-to-stop-smoking-habit condition also takes place in STIKES Bahrul Ulum Jombang, this study is performed to get more distinct description about "the meaning of smoking for health lecturers in STIKES Bahrul Ulum Jombang." The aim of this study is to understand the meaning of smoking for health lecturers who completely understand about health issues but still choose to smoke instead.

Method

This study is a descriptive-qualitative research. The collection of qualitative data in this study was presented in words not in numbers. The subject of this study was the lecturers at STIKES Bahrul Ulum Jombang. The informants in this study were four (4) male smoker lecturers. The object of the study focused on the informants' current smoking habit. The data collection technique was performed in three ways, i.e. observation, deep interview with interview guidelines. The data analysis technique used in this study was qualitative analysis meaning that the obtained data was collected, selected and analyzed qualitatively according to the thinking framework presented to provide clear picture on the discussed issue.

Research Findings and Discussion

The data analysis in this study employed social phenomenology theory that attempted to gain understanding by putting its focus on "meaningfulness" using *verstehen* approach that started by assuming that in doing an action, someone does not only do it, but also puts himself in others' thinking environment and behaviors. This approach leads to motivated actions to reach the desirable purpose or order to motive.

The current phenomenological study was started with subjectivism that does not only see something from the visible phenomenon but also tries to understand the meaning beyond.

The first smoking experience and smoking motives

When we try to understand the awareness on certain behaviors, then we talk about the awareness related to knowledge because basically, awareness is knowledge. Thus, awareness is closely related to knowledge although it does not mean that awareness must contain objective values. In other words, awareness is characterized by subjectivity. The point is that knowledge (equipped with awareness) is not always objective. Objectivity can be simply translated as the truth related with the object. Objectivity itself can be understood as the separation of ideas and the object while subjectivity is related to involvement, commitment, and intensity.

The health lecturers had started their smoking habit form very early age, between the age of 11 to 16 with friendship as their main motive and purpose. An informant said that he started smoking at the age of 11 when he was studying in grade 5 of Madrasah Ibtidaiyah (a level with elementary school). Another informant said that he learnt to smoke at Islamic Boarding School (Pondok Pesantren) in grade 3 of Madrasah Tsanawiyah (a level with junior high school) while the other two informants stated that they began smoking at the age of 16 in senior high school level. Everyone had the same motive behind their smoking habit, which was environmental factor since their friends gave them cigarettes for them to smoke. Three of the informants said that they did not have difficulties in their first smoking experience and only one informant mentioned the difficulties due to the unpleasant taste. However, he was able to put this unpleasant taste aside and seemed to enjoy it because he was too shy to show it in front of his friends. This is suitable with the interview result with the informant who said: "When I started smoking in the first grade of senior high school, I tried it only because I wanted to respect my friends. Although it tasted bad at first, I seemed to enjoy it before my friends. I did not want to be mocked." This fact is in line with the understanding from verstehen approach proposed by Weber which comes from the assumption that someone acts not only to do the action but also to put him in others' thinking environment and behaviors. This approach leads to motivated actions to reach the desirable purpose or order to motive. In his condition, the informant's action was triggered by a motive of respecting his friends and feeling too shy and afraid of being mocked if he did not try the cigarette offered. He became an individual who put himself in his friends' thinking environment and behaviors.

The meaning of smoking and the diseases for health lecturers

Health lecturers who understand that smoking causes impacts and dangerous diseases not only for himself but also for other people around him still face difficulties in quitting the habits. They had different reasons about why the continued smoking, for example informant 1 said, "Although I totally understand the dangers of smoking, I still do not want to quit because I have the knowledge. As far as I know, 45 is the age when human's body starts to weaken and cannot regenerate its cells. That's exactly the time for me to stop. Since I haven't reached that age, I will continue smoking because there are positive effects of smoking I can get. It means that by using my knowledge, I can manage our behaviors including my smoking." Meanwhile, informant 2 stated that smoking is an adult behavior and in bigger picture, for him, smoking actually helps to save many people by providing jobs for them. If people stop smoking because of health or rules, many people will lose their income for a living and many children will not be able to finish their study. Informant 3 said, "Smoking is not good for health but it's not the only threat to our health. A lot of diseases are claimed to emerge because of smoking habit but to tell you the truth only a little percentage is caused by other factors. I see it from a bigger picture that smoking has more advantages compared to the

fear of diseases that we can actually anticipate so that they won't happen to us." Finally, the last informant said, "Smoking is a matter of habits. If I want to quit, it's easy because for me, smoking is like snacks for women. When they are hungry or bored, they will crave for them. On the other hand, sickness is a fate. I believe that smoking is one of the factors for it. The wrong thing is when we can't control it. Smoking is fine as long as it's not too much."

From the data obtained from the informants above, it can be concluded that their awareness over smoking habits revealed their experiences underlying their behaviors. Sufficient knowledge about smoking and health has caused an intentional awareness that leads to certain understanding on particular objects. Hence, the truth that the informant perceives about smoking makes them continue smoking.

This fact is in harmony with what Edmund Husserl, commonly known as the founder of phenomenology, who stated that awareness is the most important thing in understanding the world.

The informants' understanding about cigarette packs with disease pictures

When asked about the correlation between the pictures of diseases in cigarette packs and their willingness to quit smoking, they have variety of opinions. Informant 1 said, "To tell you the truth, I just saw it once. It's just normal and obviously have no impact for me." Informant 2 said that the pictures of diseases caused by smoking on cigarette packs was not fair because if cigarette indeed caused diseases, other things such as salt must have pictures of people with stroke or sugar must have pictures of people with diabetes on the packs as well. Meanwhile, informant 3 stated that the pictures were meaningless. They did not represent the factors causing the diseases on the cigarette packs. All factors causing those diseases should be printed on the packs as well. Finally, informant 4 described the pictures as impact less. The pictures did not scare him because he believed in fate. When it was time to get sick, then everyone would be sick because everything happening in this world was already scripted by God and there would be signs before those things occurred. When he felt a sign that he smoked too much, he would stop smoking on that particular day, not forever.

Pictures of diseases printed on cigarette packs is a way to decrease the number of smokers but the information obtained from the informants above revealed that they cannot evoke people's awareness about smoking. The awareness imprinted in people's mind about smoking is that it is not the only cause of negative impacts such as diseases since there are other factors that can be blamed as the probable cause. The informants' awareness is, of course, supported by their knowledge about the issue. It means that one's awareness over certain matter is difficult to change once he really believes it.

The meaning of smoking for health lecturers

Informant 1. For me, smoking can release my stress. The calming effect is amazing to me. I can focus on different things and get good solutions to the problems I face in the office.

Informant 2. For me, smoking means to share sustenance with others. By smoking, we share our income to cigarette companies that later provides a living for the workers so that they can send their children to school and do other things.

Informant 3. For me, smoking is like refreshing. It does not have to be far, but I can always feel the effect of smoking due to the relaxing effect from nicotine, a psychoneurotic substance. I always feel comfortable, relaxed, and fresh when smoking. Happy smoking is like pleasant friendship. It is nice to enjoy and never leaves us. By smoking, friendship becomes more "savory" as in food, chatting is more "fun" and can last a long time because there is no such thing called running out of ideas.

Informant 4. For me, smoking is worship. By smoking, friendship is more "fun". So, the host will be more satisfied. Making others happy is very rewarding, you know. Smoking also makes me smarter because by smoking, I feel more relaxed and my brain can think so much better like a genius.

Smoking also makes me closer to God. Normally, by smoking, my contemplation to search for the essence of the truth about this life is more understandable. Self-evaluation about what I have done is also easier to do. Thus, thinking about my future becomes more comfortable for me. Basically, smoking gives a lot of positive effects. Besides, as a father, I do not smoke anywhere I want. It is impossible for me to share the cigarette some with my beloved people.

The domination of positive sides that one understands as he has been through various experiences is the result of perceptions and interpretations he has on certain activities he had performed before. This is frequently used as knowledge that is interacted with others through socializing. Hence, in our country, the number of smokers always increases every year because the awareness obtained from life experiences is collaborated with scientific knowledge makes smoking become a more positive activity for the doers. This kind of awareness focuses on the positive sides they can get from smoking and in their social life, they continue spreading this knowledge through interaction and socialization.

Conclusion

All informants had started smoking since very early age. The reason they used when began smoking was as a sign of respect to their environment and friends. All of them did the activity not only to do it, but also to put themselves in others' thinking environment and behaviors. All also believed that smoking had more positive effects compared to the negative ones. The negative effects emerged not mainly because of smoking but there were other causing factors. Those health lecturers understood smoking from different sides, for example smoking can release stress, it is a relaxation and refreshing, it is a way to waste the time, it is friendship, it is the source of inspiration, it is a snack, it is a business, it is a share of sustenance, and it is worship to God (making friendship closer and easier in self-introspection to get closer to God). Their knowledge about health is incapable of changing their smoking habits because every one of them said that they could manage their health and they said that they would continue smoking.

References

Blummer H (1969) Symbolic Interaction, Englewood Cliffs. NJ Prentice.

Bruder KA (1989) Monastic Blessings: Deconstrukcting and Reconstrukcting The Self, Symbolic Interaction.

Cooley CH (1964) Human Nature and Social Ordes. New York: Suribner Cooper Derek.

Davidson GC & Neale JM (1990). Abnormal Psychology. New York John Willy & Son Press. 56

Goffman E (1968) Presentation Of Self in Everyday Life. Garden City: NYAchor.

Haryanto P (2016) Analisa Faktor Kinerja Kader Jumantik dalam Pemberantasan DBD di Kelurahan Kadipiro Kota Surakarta. Indonesian Journal on Medical Science 3 (2).

Indarwati (2016) Analisa Faktor Kinerja Kader Jumantik dalam Pemberantasan DBD di Kelurahan Kadipiro Kota Surakarta.STIKES 'Aisyiyah Surakarta. Jurnal Kesehatan. 3(2).

Kartini K (2007) Skripsi Penyebab Merokok Pada Remaja. UNAIR: Surabaya.

Manning P & Goffman E (2000) Encyclopedia Of Social Theory. Thousand Oaks Calif.

Moleong LJ (2005) Metodologi Penelitian Kualitatif Edisi Revisi.Bandung: PT. Remaja Rosdakarya.

Mulyana D (2002) Interaksionisme Simbolik : Paradigma Baru Ilmu Komunikasi dan Ilmu Sosial Lainnya. Bandung: PT Remaja Rosdakarya.

Nawaw H (1992) Instrumen Penelitian Bidang Sosial. Yogyakarta: Gajah Mada Press.

Theodorus. (2000) Ciri Perokok di Kalangan Mahasiswa Universitas Sriwijaya. Jurnal JEN (3):19-24.