

# Smoking Behavior of Adolescents in Public High Schools in Bantaeng District, South Sulawesi, Indonesia.

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## Abstract

The most at risk in adolescents is smoking which can be related to smoking behavior in students such as there are several factors behind adolescents becoming smokers, including knowledge, attitudes and environment this study used the Chi Square statistical test which aims to determine the factors related to smoking behavior in students of SMAN 6 Bantaeng. This type of research was observational with the cross *sectional* analytical study approach. The study population was class XI and XII students at SMAN 6 Bantaeng with a sample of 35 respondents selected using *purposive sampling*. Data collection was carried out by the method of using questionnaires. In the research test, the environmental variable obtained a p value = 0.002 smaller than the value of  $\alpha = 0.05$  so it can be said that there is a relationship between the environment and smoking behavior. From the results of the study, this research was used as input to nurses and other health workers the importance of providing information and counseling to respondents about smoking so that respondents could determine a good attitude towards their smoking behavior in order to provide input for the school to better control students not to smoke. It is necessary to impose smoking ban regulations in the school environment and impose sanctions on students who are branded.

**Keywords:** Knowledge, attitudes, environment, smoking behavior, Student.

## Background

In the midst of the competition for the development of a modern and luxurious lifestyle as it is today, one of the groups that are vulnerable to being carried away by the developmental current itself is adolescents. Adolescence is a transition period from childhood to adulthood so that adolescents experience many changes, both physically and psychically (Balan, Widodo & Lasri, 2018). In 2016 about 1.2 billion adolescents aged 10-19 years made up 16% of the world's population. More than half of the world's adolescents are in Asia with the highest number in South Asia at around 340 million followed by East Asia and the Pacific at around 277 million (Unicef, 2019).

In this era of globalization, adolescence is an age that is widely required to get to know various new things. This new thing can be obtained from the surrounding environment. Smoking is one of the habits that are becoming a common phenomenon among adolescents today. A number of studies have found smoking first begins at the age of 11-13, and this is preceded by curiosity. The increase in smoking behavior has an impact on the increasing burden of diseases caused by cigarettes and the increase in mortality, it is estimated that the mortality rate from cigarettes will reach 70% by 2030 and half of it has an impact on the productive age population. In 2016 the number of smokers aged 15 years and over in the world was 19.9% with the highest prevalence in male smokers, namely 33.7% and in female smokers, which was 6.2% (WHO, 2019).

Based on data obtained from the world Health Organization (WHO, 2021), Europe is the continent with the highest smoking prevalence in adolescents aged 15 years and over, namely 29.4%, followed by the State of the Southwest Pacific region which is 24.5%, then Southeast Asia and America which is 16.9%, followed by Africa and others.

Based on data from the World Health Organization (WHO, 2014), there are six million cases of death each year estimated to be due to cigarettes worldwide. In 2014, Indonesia itself ranked fourth as the country with the most cigarette consumers after China, Russia and the United States with estimated 1,000-1,499 cigarettes consumed by people over the age of 15 years each year with a total of 34.8% who smoked. Data obtained from (Ministry of Health, 2016), the prevalence of smoking in Indonesia has increased from 27% in 1995 to 36% in 2013 with the prevalence of smoking adolescents aged 16-19 years died 3 times from 7.1% (1995) to 20.5% (2014). In 2013, the average number of cigarettes smoked per day was 12.3 cigarettes (equivalent to one pack). The largest proportion of daily active smokers is the productive age group (25-64 years) with a range of 30.7%. 32.2% and there was an increase in the proportion of smokers aged  $\geq 10$  years (36.3%) (Ministry of Health, 2013).

The results of the Basic Health Research (Riskesdas, 2013), show that nationally the percentage of the population aged  $> 15$  years who smoke is 33.6%, which consists of 28.2% of daily smokers and 5.4% of occasional smokers. The proportion of the population aged 10-14 years who smoke is 1.4% which consists of 0.5% of daily

smokers and 0.9% of occasional smokers. Meanwhile, the proportion of smokers aged 15-19 years is 18.3% which consists of 11.2% of daily smokers and 7.1% of occasional smokers. This condition shows that the average Indonesian population has smoked cigarettes at a young age (Ministry of Health RI, 2010).

Results from Basic Health Research (Riskesmas, 2010), South Sulawesi Province is a province with a fairly high smoking prevalence in Indonesia (31.6%) equal to the prevalence in Yogyakarta (31.6%) and cigarette use according to (Riskesmas) in men reaches (65.9%) while women (4.2%). Smoking is more in high school teenagers, in teenagers who live in villages than in cities, as well as in lower economies.

In addition, data from Riskesmas (2010) the prevalence of South Sulawesi residents who smoke in the age group of 45-54 years is 32.2%. Meanwhile, in the male population aged 15 years and over, 54.1% were smokers. The highest prevalence of smoking was first at the age of 15-19 years (43.3%) and by 1.7% of the population began to smoke for the first time at the age of 5-9 years (Qadafi, Fajriansi & Darwis, 2014). In Makassar, around 62.5% obtained information on adolescents with attitudes that tend to be negative towards cigarettes has a significant relationship with smoking behavior (Alamsyah & Nopianto, 2017). Bantaeng Regency is one of the areas with the highest prevalence of smoking in adolescents (66.4%) namely aged 10-12 years (2.3%), aged 13-15 years (20.0%), aged 16-18 years (62.4%) while aged 19-24 years (83.5%) (Balitbangkes, 2016).

Cigarettes are known to contain more than 4000 substances/chemicals that are harmful to health, of which 43 substances are carcinogenic. Its main components are nicotine, a dangerous substance that causes addiction; tar which is carcinogenic, and CO that can lower the oxygen content in the blood. Cigarettes are a risk factor for the emergence of non-communicable and deadly diseases, such as coronary heart disease, stroke, and cancer. In addition to threatening the health of smokers, cigarette smoke is also harmful to people around who are exposed to cigarette smoke. The higher the level of harmful materials in a cigarette, the more likely it is to suffer from these diseases in the future (Center for Health Protocols of the Ministry of Health of the Republic of Indonesia, 2013).

Many studies have proven that smoking can have adverse effects on health, including it can cause heart disease, lung disease, lung cancer and other cancers, diabetes, impotence, causing blindness, oral diseases, and fetal disorders (Baharuddin, 2017; Oktaviani, Avianty, & Mawati, 2021). Although smoking has many bad / negative effects, smoking also has some positive impacts. The positive impact of smoking is to reduce stress, cause a sense of favor and strengthen associations between friends (Wati, Bahtiar & Anggraini, 2018).

In the research of Ahmad Rifai (2017), there are several reasons for adolescents to start smoking because of various things, including imitating adults, seeing people older than them smoking makes teenagers affected and want to do similar things so that it becomes a habit that is difficult to get rid of. The family problems of a teenager whose family conditions are not good then tend to stress thinking about it, peers in the environment have a big influence on a teenager who has not smoked, because friends will always influence to smoke because usually if they don't smoke someone is considered unmanly or timid. After teenagers start smoking, they always feel addicted to continuing the habit so it is difficult to stop it.

## Method

This study uses an observational type of research with a *cross-sectional* analytical study approach that aims to determine the factors that influence smoking behavior in adolescents (Sugiyono, 2013). The sample is part of the population studied (Nursalam, 2017). According to *Gay*, the minimum acceptable sample size is based on the research design used. The sample size in the experimental method, at least 15 subjects per group (Sugiyono, 2009; Hidayat, 2018) tag. The sample in this study was 67 students from classes X and XI at SMAN 6 Bantaeng.

In this study, researchers used *purposive sampling* which is a technique for determining samples with certain considerations (Sugiyono, 2017). The reason for selecting samples using *Purposive sampling* is because not all samples have criteria according to what the author has determined. Therefore, the selected sample is deliberately determined based on certain criteria that have been determined by the author in order to obtain a representative sample.

In this study, the instrument used was in the form of a questionnaire. The questionnaire was made by the researcher himself with adoptions from (Nursalam, 2017) and previous researchers consisting of:

- a. Demographic data on the characteristics of smoker students, namely name, age, and class.
- b. The second questionnaire is a questionnaire on the knowledge of smoker students consisting of 10 questions related to smoking behavior. In this study, knowledge measurement used the Guttman scale with category 2 = Yes, 1 = No (for positive questions) and the opposite category for negative questions.
- c. The third questionnaire is a questionnaire on the attitudes of smoker students consisting of 10 questions related to smoking behavior. In this study, attitude measurement used the Likert scale with categories 4 = SS, 3 = S, 2 = TS, and 1 = STS (for positive questions) and the opposite category for negative questions.

- d. The fourth questionnaire is a questionnaire on the environment of smoker students consisting of 12 questions related to smoking behavior. In this study, environmental measurements used the Guttman scale with categories 4 = SS, 3 = S, 2 = TS, and 1 = STS (for positive questions) and the reverse category for negative questions.
- e. The first questionnaire is a questionnaire on smoking behavior consisting of 10 questions related to smoking behavior. In this study, smoking behavior measurements used the Guttman scale with categories 2 = Yes, 1 = No (for positive questions) and the opposite category for negative questions.

## Result

This research was carried out at SMAN 6 Bantaeng from July 29 to August 2, primary data collection based on questionnaire sheets for all students who were male in class XI and XII. This study used the *Chi Square* statistical test which aimed to determine the factors related to smoking behavior in students of SMAN 6 Bantaeng. Data collection was carried out on May 22, 2021 with a total of 35 respondents using *purposive sampling* techniques. The results of this study were obtained from primary data, namely by using questionnaires.

After data collection, the researcher then carried out data processing with several stages, including *Editing*, namely the questionnaire was checked again for completeness to avoid errors that had an impact on the possibility of biased data, *coding*, namely providing code on the questionnaire to facilitate data input, then conducting data *entry* with the help of the SPSS system and the final stage of *tabulation* data to be easily analyzed so that it can conclude or find out whether there is a relationship between independent and dependent variables using the *Chi-Square Tests* test with a significance level  $p < \alpha = 0.05$ .

### 1. Characteristics of Respondents

#### a. Age

Table 5.1

Frequency Distribution of Respondents by Age at SMAN 6 Bantaeng, Bonto Tallasa Village', Uluere District, Bantaeng Regency in 2021

| Age   | n  | %    |
|-------|----|------|
| 15    | 4  | 11,4 |
| 16    | 13 | 37,1 |
| 17    | 15 | 42,9 |
| 18    | 3  | 8,6  |
| Total | 35 | 100  |

Source: Primary Data July 2021

Based on table 5.1, it shows that of the 35 respondents at SMAN 6 Bantaeng with the highest number of respondents, there were 17 respondents aged 17 years, namely 15 respondents (42.9%), 16 years as many as 13 respondents (37.1%), 15 years old as many as 4 respondents (11.4%) and 18-year-old respondents as many as 3 respondents (8.6%).

#### b. Classes

Table 5.2

Frequency Distribution of Respondents by Class at SMAN 6 Bantaeng, Bonto Tallasa Village', Uluere District, Bantaeng Regency in 2021

| Class   | n  | %    |
|---------|----|------|
| XI IPA  | 8  | 22,9 |
| XI IPS  | 12 | 34,3 |
| XII IPA | 5  | 14,3 |
| XII IPS | 10 | 28,6 |
| Total   | 35 | 100  |

Source : Primary Data July 2021

Based on Table 5.2, it shows that of the 35 respondents at SMAN 6 Bantaeng with the highest number of respondents, there are class XI social studies, namely 12 students (34.3%), class XII social studies respondents, namely 10 students (28.6%), class XI science respondents, namely 8 students (22.9%) while class XII science respondents are 5 students (14.3%).

### 2. Univariate Analysis

#### a. Knowledge

Table 5.3

Frequency Distribution of Respondents based on Student Knowledge at SMAN 6 Bantaeng, Bonto Tallasa Village', Uluere District, Bantaeng Regency in 2021

| Knowledge | n  | %    |
|-----------|----|------|
| Good      | 33 | 94,3 |
| Less      | 2  | 5,7  |
| Total     | 35 | 100  |

Source: Primary Data July 2021

Based on Table 5.3, it shows that of the 35 respondents at SMAN 6 Bantaeng with the highest number of respondents, they were those with good knowledge, namely 33 respondents (94.3%), while respondents who had less knowledge were 2 respondents (5.7%).

b. Attitude

Table 5.4

Frequency Distribution of Respondents based on Student Attitudes at SMAN 6 Bantaeng, Bonto Tallasa Village', Uluere District, Bantaeng Regency in 2021

| Attitude | n  | %    |
|----------|----|------|
| Good     | 26 | 74,3 |
| Bad      | 9  | 25,7 |
| Total    | 35 | 100  |

Source: Primary Data July 2021

Based on Table 5.4, it shows that of the 35 respondents at SMAN 6 Bantaeng with the highest number of respondents, they were those with good attitudes, namely 26 students (74.3%), while respondents who had bad attitudes were 9 students (25.7%).

c. Environment

Table 5.5

Frequency Distribution of Respondents based on Student Environment at SMAN 6 Bantaeng, Bonto Tallasa Village', Uluere District, Bantaeng Regency in 2021

| Milieu | n  | %    |
|--------|----|------|
| Good   | 16 | 45,7 |
| Bad    | 19 | 54,3 |
| Total  | 35 | 100  |

Source: Primary Data July 2021

Based on Table 5.5, it shows that of the 35 respondents at SMAN 6 Bantaeng with the highest number of respondents, they were those with a bad environment, namely 19 students (54.3%), while respondents who had a good environment were 16 students (45.7%).

d. Smoking Behavior

Table 5.6

Frequency Distribution of Respondents based on Student Smoking Behavior at SMAN 6 Bantaeng, Bonto Tallasa Village', Ulu ere District, Bantaeng Regency in 2021

| Milieu   | n  | %    |
|----------|----|------|
| Positive | 23 | 65,7 |
| Negative | 12 | 34,3 |
| Total    | 35 | 100  |

Source: Primary Data July 2021

Based on Table 5.6, it shows that of the 35 respondents at SMAN 6 Bantaeng with the highest number of respondents, there were positive smoking behaviors, namely 23 students (65.7%), while respondents with negative smoking behaviors were 12 students (34.3%).

1. Bivariate Analysis

a. Relationship of Student Knowledge to Smoking Behavior

Table 5.7

The Relationship of Knowledge with Smoking Behavior at SMAN 6 Bantaeng, Bonto Tallasa Village', Uluere District, Bantaeng Regency in 2021

| Pengetahaun | Smoking Behavior | Total | P |
|-------------|------------------|-------|---|
|-------------|------------------|-------|---|



|       |    |      |    |      |    |      |       |
|-------|----|------|----|------|----|------|-------|
| Good  | 15 | 42,9 | 1  | 2,9  | 16 | 45,7 |       |
| Bad   | 8  | 22,9 | 11 | 31,4 | 19 | 54,3 | 0,002 |
| Total | 23 | 65,7 | 12 | 34,3 | 35 | 100  |       |

*Primary Data Sources July 2021*

Based on table 5.7, the results of the analysis of the relationship between the environment and smoking behavior obtained that out of 35 students there were 16 respondents (45.7%) who had a good environment with positive smoking behavior as many as 15 respondents (42.9%) and negative smoking behavior as many as 1 respondent (2.9%). Meanwhile, those with a bad environment were 19 respondents (54.3%) with positive smoking behaviors of 8 (22.9%) and negative smoking behaviors of 11 (31.4%). The results of the statistical test with the *Chi-Square Tests* test obtained a value of  $p = 0.002$  where  $p > \alpha$  ( $\alpha = 0.05$ ), it can be concluded that there is a significant relationship between the environment and smoking behavior in class XI and XII students at SMAN 6 Bantaeng.

### Discussion

This research was conducted by collecting primary data using questionnaires; in addition, secondary data was taken from schools that supported this study by looking at the number of male students in class XI and XII at SMAN 6 Bantaeng Kec. Uluere, Bantaeng Regency. This study aims to see factors related to smoking behavior in students of SMAN 6 Bantaeng. After that, data processing and data analysis will be discussed as follows:

#### 1. Relationship of Knowledge about Smoking Behavior

Based on the results of research with the *Chi-Square Tests* test shown in Table 5.7, it is known that the  $p$  value = 1,000 and the value of  $\alpha = 0.05$ , which shows  $p > 0.05$  which means  $H_0$  is rejected and  $H_a$  is accepted which has no significant relationship between knowledge and smoking behavior in students at SMAN 6 Bantaeng, so it can be concluded that the hypothesis that states there is a significant relationship between knowledge and behavior smoking in students at SMAN 6 Bantaeng was rejected.

This research is in line with research conducted by Muammar Qadafi et al (2014) on factors related to smoking habits at SMK NEGERI 2 Bungoro said that the results of the analysis using statistics looking for the relationship of respondents' knowledge with smoking habits obtained a probability value of  $0.247 > 0.05$ , it can be concluded that there is no relationship between knowledge and smoking habits. The results of another study are research conducted by Anisa Maulidea Binita, et al (2016) on the Relationship between Smoking Perception and Smoking Behavior Type in SMK "X" Students in Semarang City which showed that  $H_a$  results were accepted and  $H_0$  was rejected, meaning that there was no relationship between respondents' knowledge about cigarettes and smoking behavior. This is also in line with Harsa's (2014) research which states there is no relationship between the level of knowledge and adolescent attitudes about smoking.

The results of this study are also in accordance with Rina Yulviana's (2015) research on Factors Related to Smoking Habits in Class X and XI Young Men at SMA Negeri 6 Pekanbaru which shows that there is no relationship between adolescent knowledge and smoking behavior. According to Wahyuni (2010), before a person adopts behaviors inside the person, there is a successive process, namely awareness, feeling interested, weighing, trying, adoption where a person has behaved newly in accordance with his knowledge, awareness and attitude towards the stimulus.

Notoatmodjo (2010) in his book "Health Behavioral Sciences", mentions that knowledge is the result of human sensing which is mostly obtained through the sense of hearing (ear) and sense of sight (eye). A person's knowledge of objects has different intensities or levels, this we can find in research carried out at SMA Negeri 6 Bantaeng.

The period of adolescent ambivalence, which is filled with hesitant attitudes when making a decision, encourages vocational high school teenagers to tend to prefer friendship relationships compared to the choice to live a healthy life without smoking. His fear of the indifference of his group mates, made vocational high school teenagers want to look more present by mingling with the habit of friends in their environment, namely smoking, even though they were aware of the dangers they caused. In adolescence a

person has a strong sense of attachment to his group. The interest to be recognized in his group can also be another reason for the ineffectiveness of attitudes in suppressing smoking behavior among adolescents.

The choice to be unkind or to disagree with various factors related to smoking habits could not be chosen because it was not able to beat the pharmacological, social, and psychological factors he needed. This means that in terms of pharmacological factors, the effect of nicotine has controlled feelings and habits. Judging from social factors, the importance of feeling more accepted in a friend's environment and looking mature, and feeling more comfortable dominates than choosing.

The social world of teenagers who include smoking as one of the builders of self-existence can give rise to an attitude of indifference towards various things caused by cigarettes. This condition can arise due to a social environment that tends to be indifferent various information about the dangers of smoking for the sake of its recognition to be accepted by its group. The consequences of maintaining his existence in the social environment in his group can encourage immature intellectual changes. Whereas at this age is according to Piaget the teenagers should get the perfect intellectual development.

According to Green's theory that individual behavior is influenced by the knowledge gained after sensing certain objects that are mostly obtained through the eyes and ears. Knowledge or cognitive is the most important thing that shapes a person's behavior (overt behavior) towards understanding health behavioral attitudes. Good knowledge will support good behavior (Notoadmodjo, 2010). The more health information obtained can influence and improve one's knowledge, so that it can generate awareness that in the end a person will behave and behave according to the knowledge he has (Balqis Annisa Ramdhani, 2017).

The gap in the study can be seen in table 5.7 that there is no relationship between knowledge and smoking behavior, good knowledge and positive smoking behavior as many as 22 respondents (62.9%) because of the knowledge gained. Then it was considered by respondents as negative, so that their smoking behavior was more negative and knowledge was less with positive smoking behavior as many as 1 respondent (2.9%) because respondents did not really ignore the information obtained both from print media, mass media and counseling about smoking. This shows that good knowledge can reduce negative behavior. Meanwhile, lack of knowledge can increase a person to smoke because of lack of information.

## 2. Relationship of Attitudes about Smoking Behavior

Based on the results of the study with *the Chi-Square Tests* shown in Table 5.8, it is known that the value of  $p = 0.685$  and the value of  $\alpha = 0.05$ , which shows  $p > 0.05$  which means that there is no significant relationship between attitudes and smoking behavior in adolescents at SMAN 6 Bantaeng, so it can be concluded that the hypothesis that states there is a significant relationship between attitudes and smoking behavior in adolescents at SMAN 6 Bantaeng is rejected.

This research is in line with research conducted by Ati Siti Rochyati (2016) on factors that influence smoking behavior in Vocational High Schools in Kabupaten Kapupaten Kabumen stated that adolescents who have the habit of smoking with a heavy category are more commonly found in the group of adolescents who have a bad attitude, namely as many as 162 people, this number is higher when compared to heavy smokers from the group of adolescents who have good attitudes of smoking behavior, which was 84 people. To determine the influence of adolescent attitudes on smoking behavior in vocational school adolescents in Kuningan Regency, testing was carried out using a statistical analysis of the chi square test, obtained  $X^2 = 1.180$ ,  $p$  value = 0.227,  $\alpha = 0.05$ , and Odd Ratio value = 0.756 (95% = 0.422–1.321) The  $p$  value obtained was greater than  $\alpha = 0.05$  (0.227 > 0.05), it can be interpreted that there is no influence of adolescent attitudes towards the smoking behavior of adolescents of SMK Kuningan Regency.

Likewise, the results of research by Muammar Qadafi, et al (2014) on factors related to smoking habits in students of SMK Negeri 2 Bungoro, Pangkep Regency, showed that ha results were rejected and  $H_0$  was accepted, so that there was no relationship between attitudes and smoking behavior in students of SMK Negeri 2 Bungoro, Pangkep Regency.

The results of another study are research conducted by Novi Hariyanti, et al (2018) on the relationship of attitudes and self-confidence with smoking behavior in adolescent high school students x surabaya which shows that the results of  $H_a$  are accepted and  $H_0$  is rejected, meaning that there is no relationship between attitudes and smoking behavior in high school X students in Surabaya.

Attitude is as a level of tendency of a positive or negative nature related to the object of psychology, which includes symbols, words, slogans, people, institutions, ideas and so on. Individuals are said to have a positive attitude towards a psychological object if they like or have a favorable attitude, on the contrary, individuals who are said to have a negative attitude towards psychological objects if they do not like it or their attitude is unfavorable towards psychological objects (Notoatmodjo, 2007).

The attitude in Green's theory is one of the predisposing factors for the formation of a new behavior, to get a good attitude towards smoking behavior requires training on the dangers of smoking and how to overcome the consequences of smoking specifically and it is necessary to always have a refresher. Therefore, to improve the attitude of respondents who are still lacking in order to be good, regular health education is needed. Adolescence is a period of transition from childhood to adulthood followed by various problems that exist due to physical, psychic and social changes. The transition period caused many difficulties in adjusting to him and to the social environment. Various difficulties in self-adjustment have an impact on attitudes that appear as a reflection of his still labile personality. The desire to be recognized as an adult is often followed by imitating the habits of adults without being accompanied by careful thinking.

In fact, various choices made in adolescence are important things that can have direct repercussions for attitudes and behaviors and have long repercussions. The period of adolescent ambivalence, which is filled with hesitant attitudes when making a decision, encourages vocational high school teenagers to tend to prefer friendship relationships compared to the choice to live a healthy life without smoking. His fear of the indifference of his group mates, made vocational high school teenagers want to look more present by mingling with the habit of friends in their environment, namely smoking, even though they were aware of the dangers they caused. In adolescence a person has a strong sense of attachment to his group. The interest to be recognized in his group can also be another reason for the ineffectiveness of attitudes in suppressing smoking behavior among adolescents.

The choice to be unkind or to disagree with various factors related to smoking habits could not be chosen because it was not able to beat the pharmacological, social, and psychological factors he needed. This means that in terms of pharmacological factors, the effect of nicotine has controlled feelings and habits. In terms of social factors, the importance of feeling more accepted in a friend's environment and looking mature, and feeling more comfortable dominates than choosing to be unkind to smoking. Judging from psychological factors, adolescent smokers believe that smoking can improve appearance and cause psychological comfort.

From the previous question that most students were found to be negative about smoking behavior, this was due to a lack of information, understanding and there had never been health education counseling in schools. After the information and counseling on health education about the dangers of cigarettes, there are differences in attitudes in students which are shown by students' answers have increased in a positive direction.

According to Notoatmodjo's theory, (2012) that an attitude is a reaction or response that is still closed from a person to a stimulation or object, belief, emotional life and the tendency to act together to form a whole attitude. Attitudes as a collection of beliefs that always include an aspect of evaluation, namely attitudes can be assessed in positive and negative terms. In the research conducted by Alamsyah (2016) on determinants of smoking behavior in adolescents in relation to attitudes in his research showed that attitudes are very important things related to smoking behavior, because in essence attitudes will determine a person behaves towards something object whether consciously or unconsciously the attitude is influenced by knowledge, beliefs and emotions.

The results of another study, namely the research conducted (Widiansyah 2014: Alamsyah & Nopianto, 2017), showed that there was a significant relationship between cigarette advertising and smoking behavior in adolescents. Cigarette advertisements are packaged as attractive as possible with the theme of friendship, friendship and togetherness. Cigarette advertisements are made very attractively and creatively touching the psychological side that shows the image of bold, macho trendy, cool, togetherness, relaxed, optimistic, manly, adventurous, creative, and critical as well as various other things that are proud and represent the conscience of young people and teenagers. This shows that it effectively influences students' behavior to behave smoking (Ministry of Health, 2011).

The gap in this study can be seen in table 5.8 obtained that there was no relationship between attitudes and smoking behaviors, good attitudes and positive smoking behaviors as many as 18 respondents (51.4%). Based on the results of the study, this was considered by respondents as a positive thing, so that for respondents smoking did not interfere with their good attitude and respondents continued to smoke. For bad attitudes with positive smoking behavior as many as 5 respondents (14.3%), bad attitudes with negative smoking behavior as many as 4 respondents (11.4%) because respondents did not really ignore the information obtained both from print media, mass media and counseling about smoking. This shows that a good attitude can reduce negative behavior, whereas the attitude is less than increasing a person to smoke because lack of information.

### 3. Environmental relationships about Smoking Behavior.

Based on the results of the study with the *Chi-Square Tests* test shown in Table 5.8, it is known that the  $p$  value = 0.002 and the value of  $\alpha = 0.05$ , which shows  $p > 0.05$  which means that there is a significant relationship between the environment and smoking behavior in adolescents at SMAN 6 Bantaeng, so it can be concluded that the hypothesis that states there is a significant relationship between the environment and smoking behavior in adolescents at SMAN 6 Bantaeng is accepted.

This research is in line with the research of Muammar Qadafi, et al (2014) on which states that there is a relationship between the environment and smoking behavior. The results of another study, namely research conducted by Iceu Amira, et al (2021) stated that the environment (parents, friends, and advertisements) is one of the factors related to smoking behavior.

Likewise, research conducted by Ardy Widya Pangestu, et al (2017) on factors related to Shisha smoking behavior in HIGH SCHOOL X students in Semarang City which showed that his results were accepted and  $H_0$  was rejected, meaning that there was a relationship between friends and smoking behavior in HIGH SCHOOL X students in Semarang City. Another research is also a study conducted by Alamsyah, et al (2017) which states that there is a meaningful relationship between cigarette advertising and smoking behavior ( $p = 0.000$ ).

This is in line with the theory of Rita Sri Maryati Purba and Ana Faizah the relationship between the influences of parents and smoking behavior in adolescents in sungai lekop village, sagulung district, Batam City, parents have a very large influence in the behavior of their teenage children. This is due to factors such as the family environment which is very dominant in adolescent behavior, where adolescents are still always regulated by their parents and sometimes parents always force their teens to do things that teenagers do not want to do. And also the factor of adolescent parents who are always working so it is rare to supervise their teenage children.

This is in line with the article for DINKES (2010), where the factors that influence adolescents to smoke are the first factor is the influence of parents where adolescents who come from unhappy households such as parents do not pay attention to their children and provide harsh physical punishments are easier to become smokers than teenagers. Who come from happy families and also the behavior of parents who smoke so that teenagers follow suit. The second factor is the influence of friends. The third factor is the personality factor, and the fourth factor is the influence of advertising.

The family is a very influential environment for the development of children who are responsible for the cultivation of values and norms in the formation of children's behavior. Parents become role models for their children both positive and negative behaviors. The wrong parenting of parents can cause their children to fall into deviant acts such as smoking, using illegal drugs, promiscuity (King, 2013). In a family if one of the family members smokes, it is likely to influence them or other family members to participate in smoking, especially in children; they smoke to show their identity so that they can look more mature like their father or other siblings (Septian, syahrul & hermansyah, 2016). The results of a study conducted by Theodorus (2014) explained that the smoking family greatly influenced the smoking behavior of their children compared to non-smoker families.

In a study conducted by Yeni Riza and Erwin Ernadi (2021) on external factors of adolescents with smoking behavior in class Xi students at SMK Syuhada stated that adolescents generally associate with their fellows, the characteristics of adolescent friendships are influenced by similarities: age, gender and race. Similarities in using drugs, smoking are very influential in the selection of friends. Teenagers are more out of the house with their peers. If it is understandable that the attitudes, talks, interests, appearance and behavior of peers have a greater influence than that of the family.

According to Tarwanto (2010), the more teenagers who smoke, the more likely it is that their friends are smokers, at the age of 12-13 years old pressure from peers and other influences is more difficult to resist. If peers of the same age in school smoke, then younger teenagers will be tempted to join friends who smoke. This is also reinforced by the statement that the living environment is the environment in which the child or adolescent rests, a child is born and is formed by the social environment in which he lives, so that the living environment also affects the formation of the personality of the child or adolescent. The poor quality of the living environment will greatly affect deviant behavior towards adolescents such as juvenile delinquency and bad smoking habits.

The gap in the study was seen from table 5.9, it was obtained that there was a relationship between the environment and smoking behavior, the good environment with positive smoking behavior as many as 15 respondents (42.9%), the good environment with negative smoking behavior as many as 1 respondent (2.9%) and the bad environment with positive smoking behavior as many as 8 respondents (22.9%), the bad environment with negative smoking behavior as many as 11 respondents (31.4%). Here the results of the

author's study found that there were several teenagers who smoked as a result of the influence of old people, the influence of friends and the influence of advertisements. This shows that adolescents must be given awareness from within themselves to quit smoking because smoking behavior will have a negative impact on the health of their bodies and it is necessary to be given supervision of smoking by parents and adolescents as well as parents who smoke must be given health education about the dangers of smoking for health in order to reduce the smoking rate in adolescents at SMAN 6 Bantaeng.

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