

The Relationship of Peer Group and Perception with the Intention of Smoking in Young Men

Fifa Nasrul Ummah¹, Yuni Sufyanti Arief^{1*}, Iqlima Dwi Kurnia¹

¹ Faculty of Nursing, Universitas Airlangga, Surabaya, Indonesia.

ABSTRACT

The prevalence of smoking among adolescents increases annually. Smoking behavior in males is a behavior that is considered normal by the people of Indonesia, and even smoking behavior in males is regarded as a symbol of virility. Smoking intentions that occur in adolescents are caused by factors from inside and outside the individual. The purpose of this study was to analyze the relations of peer groups and perceptions with the intention of smoking in male students. This research used a correlational design with a cross-sectional approach. Respondents in this research were male students of class VII and VIII in junior high school. The population in this research was 535 male junior high school students, taken using the cluster random sampling technique, and obtained a total sample of 186 junior high school students. Independent variables of this research were peer groups and perception. The dependent variable was the intention to smoke. Data was collected using questionnaires and analyzed by Spearman's Rho with a significance level of $\alpha = 0.05$. The results showed a significant relationship between peer groups ($p = 0.000$) and perceptions ($p = 0.000$) of smoking in adolescents. The more negative peer group and perception, it would increase smoking intentions. Researchers expected to conduct further research among young women. Also, it is necessary to modify the questionnaire, which can cover all components but with smaller numbers of questionnaires and provided the nursing intervention to adolescents in a better direction.

Keywords: peer group, perception, smoking intention

Correspondance:

Yuni Sufyanti Arief
E-mail: yuni_sa@fkip.unair.ac.id

INTRODUCTION

The adolescent phase is a transitional phase from childhood to adulthood and is characterized by physical, social, and emotional changes (Ikhsan, Siregar, & Muharam, 2017; Paramitasari & Alfian, 2012). In this phase, adolescents are very vulnerable to the influence of harmful things such as smoking, drinking, abuse of drugs, and engaging in free sex. Smoking behavior at the age of fewer than 15 years is still low, and most of them only have the desire to smoke. At the age of more than 15 years, cigarette consumption in adolescents increases and peaks at the age of 19 years (Latiang, Nasir, & Masni, 2019; Palallo, Syafar, Amiruddin, Indar, & Yani, 2019; Zhang et al., 2018).

Men dominate the highest number of smokers in Indonesia. In 2013, the prevalence of male smokers was 66%, while the prevalence of female smokers was 6.7% (Kemenkes RI, 2018). Smoking behavior in men is a behavior that is considered normal by the Indonesian people even smoking behavior in men in Indonesia is considered a symbol of virility (Ng, Weinehall, & Öhman, 2007; Wulaningsih, Serrano, Utarini, Matsuguchi, & Watkins, 2016). Life in Indonesia as a woman and a smoker is a dilemma. Women who smoke in public will be underestimated and considered inappropriate, while men who smoke in public places are normal (Martini, 2014). The World Health Organization (WHO) reports that in 2016 the prevalence of smokers aged 15 years or older was 1.1 billion (WHO, 2018). The prevalence of smokers in adolescents continues to increase every year. Based on data from the Basic Health Research (Riskesdas) in 2018, they were stated that the prevalence of smokers at the age of more than ten years amounted to 28.8%. Based on data from the basic health research in 2013, the number of smokers was 7.2%, then it increased to 8.8% in 2016, and in 2018 that percentage increased to 9.1% (Kemenkes RI,

2018). Data from the 2016 Association of Indonesian Public Health Experts (IAKMI) says that 2.8 million children and adolescents in East Java have consumed cigarettes (Pertiwi, Sinuhaji, & Irawan, 2018).

Based on research from Topa and Mariano in 2010 explains that smoking behavior has a significant relationship with smoking intentions, and smoking intentions can be influenced by attitude toward the behavior, subjective norms, and perceived behavioral control (Sagitania, 2017). Previous research has shown that personal factors, family support, pocket money, and peer groups contribute to teenagers' intentions to smoke (Nurmaini & Sudaryati, 2019; Pandayu, Murti, & Pawito, 2017).

Factors from peer groups can directly or indirectly influence adolescent behavior, such as risk behavior such as smoking. The relationship between peer groups is stronger than family, so adolescent behavior is more influenced by peers than family (Murdiningsih, Rosnani, & Arifin, 2016; Purwaningsih, Has, & Ni'mah, 2017; Ukwayi, Eja, & Unwanede, 2012). In addition to these factors, perception is also one of the factors that can influence teens to accept or reject cigarettes. Teenagers perceive that smoking can make smokers more attractive than nonsmokers (Gana et al., 2018). Teenagers also assume that if a man smokes, it is cool and looks mature. Based on previous research that several factors influence adolescent behavior to start using cigarettes so that further research is needed that aims to analyze the relationship between peer groups and perceptions with the intention of smoking in junior high school boys.

MATERIALS AND METHODS

This study used a correlational research design with a *cross-sectional approach*. The population in this study

were all male students at junior high school Surabaya, consisting of 535 students. The sample in this study were male students in grades VII and VIII, consisting of 186 students. The sampling technique used in this study was random cluster sampling. The independent variables in this study were peer groups and perceptions, while the dependent variable in this study was smoking intention. The instruments used in this study included a questionnaire consisting of a demographic data questionnaire, a peer group questionnaire, a perception questionnaire, and a smoking intention questionnaire. The demographic data questionnaire consisted of age, class, smoking history, place of residence, father's occupation, mother's occupation, parents' income, father's education, and mother's education. The peer group questionnaire consisted of 13 questions, researchers used a peer group questionnaire taken from (Purnaningrum, Joebagio, & Murti 2017) and the perception questionnaire consisted of 10 questions use questionnaire of perceptions taken from (George & Thomas 2018). The smoking intention questionnaire consisted of 8 questions, and researchers used a questionnaire of intention to smoke taken from (Paek & Gunther 2007) and (Rusyanti 2014). The questionnaire in this study was tested for validity and reliability, and all statements on the questionnaire were declared valid and reliable.

Data collection was done by determining respondents according to criteria by cluster random sampling technique. Next, the researchers met with the respondents, namely junior high school students in Surabaya. Researchers met students in each class to explain the purpose and objectives of the study to respondents, then proceeded with giving an informed consent sheet to respondents to give to parents and signed. After the respondent's parents signed and approved their children to follow the study, then the next day, an informed consent sheet was collected to the researchers by the respondents. Respondents were gathered in several classrooms, where each classroom consisted of 35-40 students sitting separately to prevent activities such as cheating. After the informed consent was collected, researchers distributed questionnaire sheets to respondents. The researchers gave direction in filling out the questionnaire to the respondents, and the respondents filled in the questionnaire. After completing the questionnaire, the questionnaire was collected to the researcher. Researchers rechecked the completeness of filling out the questionnaire. If something was incomplete, then that will be clarified again to the respondents to complete.

Analysis of the data used in this research viz using the spearman's rho statistical test, which compares the p-value with $\alpha = 0.05$. The process of entering data in the form of answers from each respondent in the form of code into a computer program or software, which was SPSS. This research was conducted by research ethics, where before conducting research, researchers need to get approval from relevant parties. Procedures related to research ethics include informed consent, anonymity, confidentiality, benefit (non-maleficence), and justice. This research has conducted an ethics test to the Ethics Committee of the Faculty of Nursing, Airlangga University, and was later declared to have passed an ethical test with the number of ethics certificate 1377-KEPK.

RESULTS

Based on the characteristics of the respondents, of the 186 teenagers who became the research respondents showed that most age respondents were 13 years old, with a total of 85 (45.7%) respondents. Judging from the class, most respondents were in class 7 (59.6%) respondents. History of smoking, most respondents were smoking around 132 (71%) respondents. The highest number of places to stay is with parents of 175 (94.1%). Most respondents' occupation is private (89%), while most respondents' occupation is 111 (59.7%) respondents. Parents' income is highest, namely \geq Minimum Wage, which is 108 (58.1%) respondents. Most respondents' father's education is high school 97 (52.2%), while most maternal education is high school 86 (46.2%).

Table 1. Peer group, perceptions, and smoking intentions in young men

Variable	Category	n	%
Peer Group	Negative	99	53.2
	Positive	87	46.8
	Total	186	100
Perception	Negative	102	54.8
	Positive	84	45.2
	Total	186	100
Intention to smoke	Low	88	47.3
	High	98	52.7
	Total	186	100

Based on table 1 in the peer group variable, it was seen that the highest percentage of the peer group is the peer group which has a negative effect, that is, the peer group that can influence the teenager's intention to smoke with a percentage of 53.2% (99 respondents). In the perception variable, the highest percentage of perception is negative perception, namely adolescents who do not care about their health and do not know about the dangers of smoking with a percentage of 54.8% (102 respondents). In the smoking intention variable, the highest percentage of smoking intention is the high smoking intention, i.e., respondents. They have a high intention to use cigarettes with a percentage of 52.7% (98 respondents).

Table 2. Peer group relationship with smoking intentions in young men

Peer Group	Intention to smoke				Total	
	Low Intention		High Intention			
	n	%	n	%	Σ	%
Negative	24	12.9	75	40.3	99	53.2
Positive	64	34.4	23	12.4	87	46.8
Total	88	47.3	98	52.7	186	100

Spearman's Rho $p = 0.000$; $(r) = -0.493$

Based on table 2, it showed that respondents who were influenced by positive peer groups, the majority had a low intention to smoke, namely 64 (34.4%) respondents. However, there were also 23 (12.4%) respondents had high intentions. Respondents who were influenced by negative peer groups, the majority had high intentions, namely 75 (40.3%) respondents, and 24 (12.9%) respondents had low intentions. The results of data analysis using Spearman's Rho statistical test showed that there was a relationship between peer groups and smoking intentions ($p = 0.000$, $r = -0.493$).

Table 3. The Relationship of Perception with Smoking Intentions in Young Men

Perception	Intention to smoke				Total	
	Low Intention		High Intention			
	n	%	n	%	Σ	%
Negative	28	15.1	74	39.8	102	54.8
Positive	60	32.3	24	12.9	84	45.2
Total	88	47.3	98	52.7	186	100

Spearman's Rho $p = 0.000$; $(r) = -0.438$

Based on table 3, it showed that respondents who have positive perceptions, the majority have low intentions of 60 (32.3%) respondents, but there were also 24 (12.9%) respondents who have high intentions. Respondents who have negative perceptions, the majority have high intentions, namely 74 (39.8%) respondents, and 28 (15.1%) respondents have low intentions. The results of data analysis using Spearman's Rho statistical test showed a relationship between perception and smoking intentions ($p = 0.000$, $r = -0.438$).

DISCUSSION

Based on the results of the study showed that there was a significant relationship between peer groups and smoking intentions in junior high school boys. Positive peer groups tend to have low smoking intentions, while negative peer groups tend to have high smoking intentions. This study is in line with previous research, which states that the peer group is indeed a significant influence on adolescents' smoking intentions (Simons-Morton & Farhat, 2010). Other studies have found that peers are the variables that have the greatest influence on smoking intentions (Qodri, BM, & Riyanti, 2016).

A peer group is an important process towards growing maturity or a group of people who have the same age, status, and interests and feelings (Potter & Perry, 2005). Peer groups know more about the condition and condition of their friends than their parents. It is in a friendship that a teenager will feel found or needed through other people's responses (Sarjono, 2003). Therefore, the attitudes, interests, appearance, and behavior of peers influence adolescents more than on family. Peer group is one that influences adolescent behavior because the peer group is a model that is emulated by adolescents, especially in terms of behavior (Kelly & Hunsen, 2005). The Peer group is the first source of teenagers having the intention to smoke. Adolescents with peer group smokers tend to become smokers as well, and adolescents will experience external pressure to smoke if others smoke (Ng et al., 2007).

Based on the results of the study above, the researchers argue that positive peer groups tend to have low smoking intentions, while negative peer groups tend to have high smoking intentions. However, the results of research that have been done found that 24 respondents had negative peer groups with low smoking intentions. This is because some respondents know that smoking has a negative impact in the future. Knowledge of respondents about the effects and dangers of smoking makes respondents not want to smoke. Someone who has more knowledge about the dangers of smoking will be less likely to consume cigarettes. This is consistent with the results of previous studies, which state that there is a relationship regarding the level of knowledge with the behavior of using cigarettes (Munir, 2018).

Twenty-three respondents had positive peer groups, but their smoking intentions were high. This can be seen from

the majority of father's work, private, the intensity of parents' work time as private, from morning to evening, and can make parents tired and lack control over their children. Besides, the majority of work mothers are housewives. Less optimal role of mothers in the household can also trigger children to behave in smoking. This shows that parents' work also affects adolescents' smoking behavior, where the intensity of gathering with parents is less, and the lack of supervision makes teenagers free to do activities. The work of parents influences teenage smoking intentions (Kharie, Pondaag, & Lolong, 2015).

Based on the results of the study showed that there is a significant relationship between perception and smoking intentions in junior high school boys. Positive perceptions tend to have low smoking intentions, whereas negative perceptions tend to have high smoking intentions. This study is in line with previous research, which states that there is a significant relationship between perception with the intention to smoke, the more positive a person's perception then tends not to have the intention to smoke (Rusyanti, 2014). Perception can be a stimulus that will reflect behavior. Every person has their perception about smoking, which then arises an attitude that is a person's tendency to accept or reject, agree or disagree with something, in this case, that is smoking (Hidayati & Arikensiw, 2012). Perception can play a major role in determining attitudes towards smoking, refusing to smoke, or using cigarettes (Dillard, Magnan, Köblitz, & McCaul, 2013). Perceptions of the risks and benefits of smoking have been shown to increase the likelihood of teen smoking initiation between two and four times (Gana et al., 2018). However, adolescent perceptions are expected to change over time as a result of establishing new friendships and social interactions that affect their ability to make decisions (Morrell, Song, & Halpern-Felsher, 2013).

Based on the results of the study above, the researchers believe that positive perceptions tend to have low smoking intentions, while negative perceptions tend to have high smoking intentions. However, the results of research that has been done found that 28 respondents had negative perceptions with low smoking intentions. This is because some respondents believe that smoking can indeed relieve stress, but other factors make them not smoke, such as fear of being punished by the teacher and on the one hand for obeying school rules. Factors that influence students to obey school rules are due to self-awareness. There is support from making students follow the learning process well (Fiana, Daharnis, & Ridha, 2013).

Twenty-four respondents have positive perceptions, but their smoking intentions are high. From the results of demographic data, the majority of respondents have a history of smoking. Respondents understand that smoking is dangerous, but because they want to be accepted in the group so that they have the intention to smoke. Respondents who have a history of smoking know the harmful effects of cigarettes but can not do anything because they feel addicted. Some adolescents recognize perceptions of the gravity of illnesses due to smoking as being afraid of diseases caused by smoking after seeing examples and images of the disease. However, due to the limited ability to refrain from challenges, adolescents do risky behavior because of the urging of their friends (Cahyo, Wigati, & Shaluhiyah, 2012).

CONCLUSION

Peer groups and negative perceptions will increase smoking intentions in junior high school boys in Surabaya.

The more negative the peer group and perception, it will increase the intention to smoke. Researchers are expected to conduct further research among young women. In addition, it is necessary to modify a questionnaire that can cover all components but with a smaller number of questionnaires and provides nursing intervention to adolescents in a better direction.

REFERENCES

- Cahyo, K., Wigati, P. A., & Shaluhiah, Z. (2012). Rokok, Pola Pemasaran dan Perilaku Merokok Siswa SMA/Sederajat di Kota Semarang. *Media Kesehatan Masyarakat Indonesia*, 11(1), 75–84. <https://doi.org/10.14710/mkmi.11.1.75-85>
- Dillard, A. J., Magnan, R. E., Köblitz, A. R., & McCaul, K. D. (2013). Perceptions of smokers influence nonsmoker attitudes and preferences for interactions. *Journal of Applied Social Psychology*, 185(2), 974–981. <https://doi.org/10.1038/mp.2011.182>
- Fiana, F. J., Daharnis, D., & Ridha, M. (2013). Disiplin Siswa di Sekolah dan Implikasinya dalam Pelayanan Bimbingan dan Konseling. *Jurnal Ilmiah Konseling*, 2(3), 26–33. <https://doi.org/10.24036/02013231733-0-00>
- Gana, G. J., Idris, S. H., Sabitu, K., Oche, M. O., Abubakar, A. A., & Nguku, P. M. (2018). Prevalence and perception of cigarette smoking among out of school adolescents in Birnin Kebbi, North-Western Nigeria. *Pan African Medical Journal*, 30, 1–12. <https://doi.org/10.11604/pamj.2018.30.304.16641>
- George, R. M., & Thomas, T. (2018). Perceptions and Practice of Tobacco Use among Adolescents of Mangalore City. *Journal of Indian Association of Public Health Dentistry*. <https://doi.org/10.4103/jiaphd.jiaphd>
- Hidayati, T., & Arikensiwati, E. (2012). Persepsi dan Perilaku Merokok Siswa, Guru dan Karyawan Madrasah Mu' allimin Muhammadiyah Yogyakarta dan Faktor-faktor yang Berpengaruh. *Mutiara Medika*, 12(1), 31–40.
- Ikhsan, M., Siregar, M. F. G., & Muharam, R. (2017). The relationship between Ramadan fasting with menstrual cycle pattern changes in teenagers. *Middle East Fertility Society Journal*, 22(1), 43–47. <https://doi.org/10.1016/j.mefs.2016.08.004>
- Kelly, & Hunsen. (2005). Penyesuaian sosial remaja berbakat dalam menjalin hubungan persahabatan. *Jurnal Keberkatan & Kreativitas*, 1(1), 34–45.
- Kemendes RI. (2018). Hasil Utama RISKESDAS 2018. In *Badan Penelitian dan Pengembangan Kesehatan*.
- Kharie, R. R., Pondaag, N. L., & Lolong, J. (2015). Hubungan pola asuh orang tua dengan perilaku merokok pada anak laki-laki usia 15-17 tahun di Kelurahan Tanah raja kota Ternate. *Jurnal Keperawatan Sam Ratulangi*, 2. <https://doi.org/10.1017/CBO9781107415324.004>
- Latiang, I. L., Nasir, S., & Masni. (2019). Smoking behaviour and the role of teachers as role model in the implementation of smoking free area (Sfa) in schools: A case study at sma negeri 3 makaletanatoraja district. *Indian Journal of Public Health Research and Development*, 10(4), 1061–1065. <https://doi.org/10.5958/0976-5506.2019.00850.7>
- Martini, S. (2014). Makna Merokok pada Remaja Putri Perokok. *Psikologi Pendidikan Dan Perkembangan*, 3(2), 119–127.
- Morrell, H. E. R., Song, A. V., & Halpern-Felsher, B. L. (2013). Predicting Adolescent Perceptions of the Risks and Benefits of Cigarette Smoking: A Longitudinal Investigation. *Journal of Health Psychology*, 71(2), 233–236. <https://doi.org/10.1038/mp.2011.182>
- Munir, M. (2018). Pengetahuan Dan Sikap Remaja Tentang Risiko Merokok Pada Santri Mahasiswa Di Asrama Uin Sunan Ampel Surabaya. *Pengetahuan Dan Sikap Remaja Tentang Risiko Meroko Pada Santri Di Asrama Uin Sunan Ampel Surabaya*, 1(2), 93–104. <http://digilib.uinsby.ac.id/id/eprint/21715>
- Murdiningsih, M., Rosnani, R., & Arifin, H. (2016). Pornographic Media and Peer's Influence Towards Sexual Behavior among Teenagers. *Jurnal Ners*, 11(2), 210–212.
- Ng, N., Weinehall, L., & Öhman, A. (2007). "If I don't smoke, I'm not a real man" - Indonesian teenage boys' views about smoking. *Health Education Research*, 22(6), 794–804. <https://doi.org/10.1093/her/cyl104>
- Nurmaini, N., & Sudaryati, E. (2019). Relationship between sanitation hygiene and health care with healthy family security of the family of smokers at berastagi subdistrict. *Open Access Macedonian Journal of Medical Sciences*, 7(17), 2874–2878. <https://doi.org/10.3889/oamjms.2019.419>
- Paek, H. J., & Gunther, A. C. (2007). How peer proximity moderates indirect media influence on adolescent smoking. *Communication Research*, 34(4), 407–432. <https://doi.org/10.1177/0093650207302785>
- Palallo, U. D., Syafar, M., Amiruddin, R., Indar, & Yani, A. (2019). The effect of life skill education on cigarette control in adolescents. *Indian Journal of Public Health Research and Development*, 10(9), 842–845. <https://doi.org/10.5958/0976-5506.2019.02541.5>
- Pandayu, A., Murti, B., & Pawito. (2017). Effect of Personal Factors, Family Support, Pocket Money, and Peer Group, on Smoking Behavior in Adolescents in Surakarta, Central Java. *Journal of Health Promotion and Behavior*, 02(02), 98–111. <https://doi.org/10.26911/thejhp.2017.02.02.01>
- Paramitasari, R., & Alfian, I. N. (2012). Hubungan antara Kematangan Emosi dengan Kecenderungan Memaafkan pada Remaja Akhir. *Jurnal Psikologi Pendidikan Dan Perkembangan*, 1(02), 1–7.
- Pertiwi, E., Sinuhaji, B., & Irawan, A. (2018). Perilaku Konsumsi Rokok (Survei Pada Perokok Kategori Remaja Di Kecamatan Lowokwaru Kota Malang). *Jurnal Administrasi Bisnis*, 65(1), 102–110.
- Potter, & Perry. (2005). *Buku ajar fundamental keperawatan konsep, proses, dan praktik. Edisi 4*. Jakarta: EGC.
- Purnaningrum, W. D., Joebagio, H., & Murti, B. (2017). Association Between Cigarette Advertisement, Peer Group, Parental Education, Family Income, and Pocket Money with Smoking Behavior among Adolescents in Karanganyar District, Central Java. *Journal of Health Promotion and Behavior*, 02(02), 148–158. <https://doi.org/10.26911/thejhp.2017.02.02.05>
- Purwaningsih, P., Has, E. M. M., & Ni'mah, L. (2017). Peer Group Support Change Perception Of Homeless And Beggar. *Jurnal Ners*, 3(1), 77–80.
- Qodri, R. Al, BM, S., & Riyanti, E. (2016). Beberapa faktor yang berhubungan dengan niat merokok siswa smp di kota semarang. *Jurnal Kesehatan Masyarakat*, 4, 1067–1074.

27. Rusyanti, W. (2014). Hubungan Antara Rasa Percaya Diri Dan Persepsi Tentang Penggunaan Rokok Dengan Intensi Merokok Pada Remaja Di Smp "X" Kota. *Malang: Universitas Muhammadiyah Malang*.
28. Sagitania. (2017). Intensi merokok siswa smp. *Jurnal Psikologi Insight, 1*(1), 96-108.
<https://doi.org/10.5281/zenodo.579558>
29. Sarjono. (2003). *Memperkenalkan sosilogi*. Jakarta: Rajawali Press.
30. Simons-Morton, B. G., & Farhat, T. (2010). Recent findings on peer group influences on adolescent smoking. *Journal of Primary Prevention, 31*(4), 191-208.
<https://doi.org/10.1007/s10935-010-0220-x>
31. Ukwayi, J. K., Eja, O. F., & Unwanede, C. C. (2012). Peer Pressure and Tobacco Smoking among Undergraduate Students of the University of Calabar , Cross River State. *Canadian Center of Science and Education, 2*(3), 92-101.
<https://doi.org/10.5539/hes.v2n3p92>
32. WHO. (2018). Prevalence of Tobacco Smoking. *WHO*.
33. Wulaningsih, W., Serrano, F. E. C., Utarini, A., Matsuguchi, T., & Watkins, J. (2016). Smoking, second-hand smoke exposure and smoking cessation in relation to leukocyte telomere length and mortality. *Oncotarget, 7*(37), 60419.
34. Zhang, Q., Yu, B., Chen, X., Varma, D. S., Li, J., Zhao, J., ... Liu, Z. (2018). Patterns of smoking initiation during adolescence and young adulthood in South-West China: Findings of the National Nutrition and Health Survey (2010-2012). *BMJ Open, 8*(5), 1-8.
<https://doi.org/10.1136/bmjopen-2017-019424>