

# THE INFLUENCE OF SELF EMOTION FREEDOM TECHNIQUE (SEFT) THERAPY TOWARDS SMOKING BEHAVIOR AMONG ADOLESCENT

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## ABSTRACT

Approximately, 6 million people die each year because of smoking 80%, of whom live in developing countries, and the highest number belongs to adolescent. Smoking teenagers are 3 times more likely to use alcohol, 8x more to smoke marijuana and 22x more to use cocaine. The occurrence of smoking among adolescent is a big problem in Indonesia. Besides, it can cause the disease and damage the cognitive and affective aspects that will eventually corrupt future generation. This study is aimed to develop therapies that may affect adolescent smoking behavior. This research uses quasi experiment method with pre - posttest design with control group. Respondents in this study were students in 7 private Senior High School with sample selection using purposive sampling. Respondents consist of 50 treatment groups and 50 control groups. Treatment provided is Self Emotion Freedom Technique (SEFT) therapy and counseling conducted 4 times in 2 month. Meanwhile, the control group is given only counseling at the same time.

The results of this study show a significant decrease in the treatment group with an average value of 2.9 or 3 cigarettes per day. There is also a decrease in control group, which is 0.8 or 1 cigarettes per day. Statistically, the difference between the treatment group and control group indicates that SEFT therapy has an effect on adolescent' smoking behavior with  $t$  count  $>$   $t$  table of  $4.832 > 2.635$ . It can be concluded that, SEFT therapy can be applied and developed in order to reduce adolescent' smoking behaviour.

**Keywords:** *SEFT Therapy, Smoking Behavior, Adolescents*

## INTRODUCTION

Smoking tobacco is a physical and psychological addiction because the nicotine in cigarettes contains a highly addictive substance. Therefore, smoking can lead to health problems for the smokers and their environment. World Health Organization (WHO, 2017) reported that about 1.3 million people of adolescent have died in 2015 because of cigarettes. WHO also noted that 22% of the world population aged 15 years is an active smoker. Indonesia is among the top 3 countries with a big number population who consume cigarettes.

About 6 million people die every year caused by

smoking nearly 80% of whom live in developing countries (WHO, 2015). In Indonesia, the prevalence of smoking among adolescent is currently very high in number that is 53% and 40% in West Sumatra. From this 40%, 13.6% of those smokers are at the age of 13-15 years (RISKESDA, 2013). Adolescent who smoke are 3 times more likely to use alcohol than non-smokers, 8x more to smoke marijuana and 22x more to use cocaine (Rahmadhoni, 2014). If this is not solved immediately, the next generation that will support the development of Indonesia cannot be reliable. Based on data from the 2014 Global Youth Tobacco survey, 81.8% of adolescent have desire to try to quit smoking in the last 12 months,

but the proportion of adolescents who received support from the program / professionals to quit smoking is still small in number, 24%.

Tobacco/smoking is a major health problem priority. The first reason is that tobacco can cause a death of one among ten adults (about 5 million deaths per year). The (WHO) predicts that the use of tobacco will kill >3 million people/year worldwide. This number will increase to 10 million deaths/year by 2020. Second, smoking is the most important cause of "preventable" pain and early "death" in developed and developing countries. Third, tobacco has a risk factor for various cancers, especially lung cancer. Besides, it can be a risk factor for heart disease, stroke, emphysema, respiratory disorders, etc. Tobacco chewing habits also increase the risk of cancer of the lips, tongue and mouth.

As mentioned above, although the Indonesian government has done some ways to cope with this cigarette consumption, there are only few adolescents treated to help overcome cigarette addiction by professionals. Practically, Indonesia has tried to raise the price of cigarettes up in order to reduce the number of cigarette consumption due to economic problems faced by smokers. It does not seem to work. If this action is continuously done, the first thing will happen is that many cigarette companies will get problem and fall. The negative effect of these phenomena is the increasing number of unemployment in Indonesia. Second, this action will also cause more poverty because people who are addicted to cigarettes will not be able to stop smoking instantly.

In addition, to answer the above problem, there is a research designed to reduce the number of cigarette consumption in adolescents through SEFT (Spiritual Emotional Freedom Technique) therapy introduced by Zainuddin (2009). SEFT is a combination of techniques using psychological energy and spiritual strength and prayer to overcome negative emotions. SEFT directly deals with the "disturbance of the body's energy system" to eliminate negative emotions by re-aligning the body's energy system (Desmaniarti & Avianti, 2012). SEFT therapy is one of the variants of a new branch of energy psychology. SEFT therapy is applicable to overcome many addictions, one of them is cigarettes. This smoking problem can be solved through SEFT therapy because this behavior will generate negative energy within a person. SEFT basically deals with the

disruption of the body's energy system to eliminate the negative emotions that arise. Broadly, it is not necessary to dismantle the traumatic memories of the past but simply by short cut or cut the negative emotion chain that appears so that negative emotions will disappear by itself (Safaria & Saputra, 2009). Furthermore, SEFT therapy is a combination of psychology, physics and religion. According to Dossey "The power of prayer, consciousness and spiritual things is as vital and valid as medicine and surgery." Thus, the present treatment does not only depend on the scientific methods but is also aided by the spiritual aspect (Laventhal & Cleary, 2010). The study is generally aimed at developing SEFT therapy for adolescent smokers in Bukittinggi city against smoking behavior in adolescents. The specific targets in this study is to examine the effect of SEFT therapy treatments on smoking behavior in adolescents. Thus, the results of this study can be used as a short-term and long-term solution to reduce the number of smoking consumption and mortality rates, especially in adolescents who are endangered by cigarette. Finally, the results of this study can prevent the risk of using marijuana and cocaine in adolescents.

## **RESEARCH METHODOLOGY**

### **STUDY DESIGN AND SETTING**

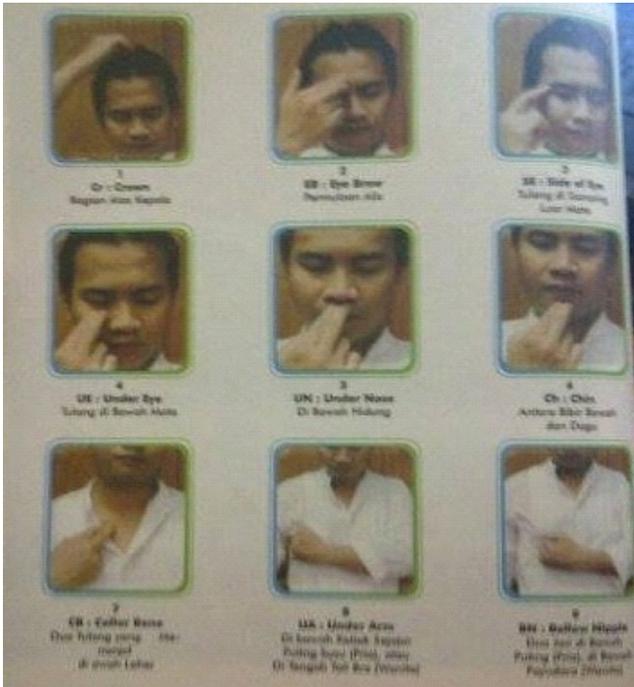
This research method is quasi-experiment with pre test - post test research design with control group. The study is located in the city of Bukittinggi in seven different non-government senior high schools.

### **POPULATION AND SAMPLE**

In each high school, 5% of the students who smoked from the total population of 1980 students were selected. In brief, the samples taken in this study were 100 students divided into two groups. 50 students belong to treatment group and another 50 belong to control group. Selection of respondents were using purposive sampling technique with the criteria that students who smoke 2 cigarettes in a day or more and the ones who do want to quit smoking.

### **EXPERIMENTAL DETAIL**

SEFT therapy is given in 3 stages: *Set-Up stage*, *Tune-In stage* and *Tapping stage*. *Step Set - Up* is a stage to get respondents to get closer to God. Second, *set - In stage* is instilling of negative values which cigarettes can cause. Finally, *tapping* is tapping in 9 parts of the body by using fingers.

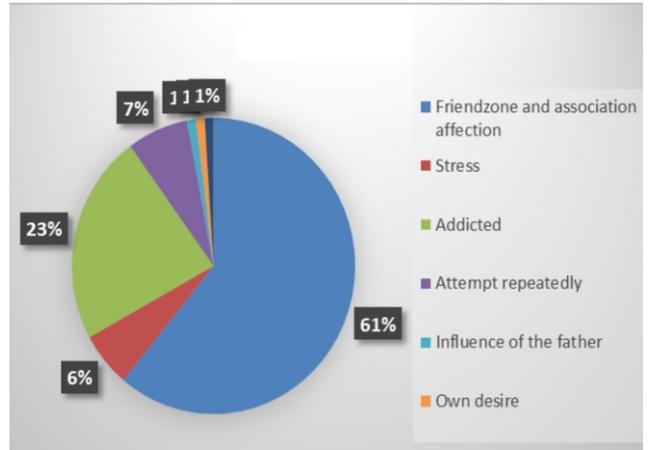


**Figure 1: Nine Spot of Tapping in Body**

During the treatment or therapy, respondents are also protected against resignation, sincerity and loyalty. The treatment group will be given SEFT therapy and counselling about the dangers of cigarettes for 4 times in 2 months. After following each therapy, students were asked to smoke a cigarette to know the effects of therapy directly on the taste. During the treatment, the student will be re-preserved of students' attitude towards the specificity, resignation and seriousness or precision of the movement undertaken. Meanwhile, the control group will only be given counselling for 4 times in a month. Finally, this research data will be processed by using paired *t*-test and independent *t*-test.

**RESULTS**

From the questionnaires distributed to the students, it can be concluded that most of the students start smoking on the grounds because of friendzone and association affection. Another reason, the students who already feel the pleasure of smoking are addicted. The average students have been smoking for more than one year. The detailed reasons will be presented in the following figure.



**Figure 2: Description of the smoking reasons of Senior High School students in Bukittinggi**

The following table illustrates the differences in smoking behaviors before and after SEFT therapy in the treatment and placebo groups in the control group. The data were processed using paired *t*-test.

**Table 1: Paired sample *t*-test (pre -post treatment therapy SEFT test and control group)**

	Mean	Std. Deviation	df	T test value	t table	Significance (2-tailed)
Pre – post Intervention	2.980	2.607	49	8.083	2.021	0.000
Pre – post control	0.880	1.902	49	3.271	2.021	0.002

From the table, it can be seen that differences in students' smoking attitude pre and post intervention were as much as 2-3 cigarettes per day. If we look at the results of *t* test statistics obtained *t* test value > *t* table (8.083 > 2.021) stated by SEFT, therapy can change the students' smoking behavior.

From the table also, it can be seen that although there are differences in the attitude of students smoking in the control group who are only given counseling as a placebo, but the difference is only slightly about 1 cigarette per day. If we see from the *t*-test, statistical results obtained *t* count > *t* table (3.271 > 2.021) which states that counseling can also change the students' smoking behavior.

**Table 2: Independent sample t-test (treatment group and control group)**

	Mean Difference	Std. Deviation	df	T test value	t table	Significance (2-tailed)
Equal variance assumed	2.240	0.464	98	4.832	1.984	0.000
Equal variance not assumed	2.240		88		2.021	0.000

From the table, it can be seen that there is a significant difference between the treatment group and the control group. It can be seen from the value of *t* test value > *t* table (4.832 > 1.984). Research results presented results only result and hypothesis examination result.

**DISCUSSION**

According to (Runtukahu, Sinologan & Opod, 2015) someone who consumes cigarettes will have difficulty in controlling himself as negative emotions will exist within that individual. Over time, these negative emotions can disturb their body's energy. There have been a lot of scientific evidences showing that the "energy of the body disturbance" has a major effect in causing human emotional or physical disturbances. Moreover, a treatment in the body system can change the brain's chemical conditions which will further change human emotional state (Coleman & Snarey, 2011; Sulifan, Suroso & Muhid, 2014; Blaise, Suriadi & Hafizah, 2016) Negative emotional exist within smokers is major issue that cause adolescent doing negative actions as well. According to Krasnegor (1979) smoking can lead to negative behavioral changes. Thus, SEFT is designed by researchers to eliminate the negative emotions resulting from the cigarette.

How SEFT works against smoking behavior change is through 3 steps. The steps are Set-Up, Tune In and Tapping. Set-Up step aims at ensuring the body's energy flow properly. This step is done to neutralize the psychological resistance in the body. Besides, the respondent is also asked to offer a prayer and submission to God so that everything that will happen and has happened is His power. This is consistent with the principle of therapy contained in the SEFT. This therapy has a basic principle of spiritual power such as convinced, sincere, surrender, gratitude and devout. When the respondent was convinced that everything happened on the power of God, they will lead to a resigned, calm and light attitude. Broadly, it will facilitate

the respondent into the next stage of therapy (Astuti, Yosep & Susanti, 2015).

Next step is the Tuning-in. In this step, a smoker will be told to think about the negative effects of smoking both on health and other criminal aspects or other aspects belonging to negative actions, and the effects of the cigarette on lives of others. Along with that they will think about their learning achievement and their family while uttering prayer of resignation. The Set-Up and the Tune-In will affect a person's brain and mind so that it will increase a smoker's desire to quit smoking. At this stage, a new perception wanted to emerge to respondents that smoking is a negative thing and a negative impact not only on himself but also others around. According to the theory of emotion it can be said that through the process of perception, a person will build emotions as well as behavior and expression and psychological response (Coleman & Snarey, 2011).

Next step is the Tapping stage which is done after the completion of the previous step. Tapping is done on the fingertips that will stimulate the nine points on the body. It can activate mechanoreceptor generation potential (*implus afferent*) and stimulate the nervous system autoimmune by increasing *vasodilation* and smooth muscle relaxation in order to reduce the activation of the sympathetic and increased parasympathetic activity. Moreover, it will affect the hypothalamus so that the chemical mediator is back in balance, normal blood pressure, normal heartbeat, and normal breath. Tapping is done in order to help the respondents remain in a state of relaxation. Thus, positive emotions or positive perceptions that have been invested by the time Set-Up would maintain. After doing the therapy respondents are told to smoke the usual cigarettes to know firsthand whether the 3 steps of therapy are done correctly and appropriately. In this study, approximately 80% of respondents said that at the time cigarettes smoke tasted bitter, and would feel like nausea when inhaling cigarette smoke. This is what causes a significant difference to the smoking behavior of respondents after being given SEFT therapy. Nevertheless, from the results of this study, it can also be seen that the control is only given counselling about the dangers of smoking also gives contribution towards one's smoking behavior even though only slightly. Counselling is only a provision of information. It is like an additional insight and knowledge of respondents who actually already know about the dangers of smoking. In addition,

knowledge that can change behavior is influenced by intelligence and experience. The same thing was revealed by Rahayu (2017), that knowledge of respondents about the dangers of smoking is generally affected by factors like intelligence and experience. A person can act appropriately, fast, and can take decision easily if they are supported by the high intelligence and vice versa. Knowledge can also be affected by their own experience or others that may give a deep impression (Rahayu, 2017). Discussion in the manuscript has been used to explain how the research results can be used to solve the problem, to show differentiation and similarity to the former research and the possibility of development.

## CONCLUSION

SEFT therapy can be effectively used to change smoking behavior of students who smoke in Bukittinggi high school. This therapy can be maintained and developed by various schools' parties in the school, police or even the

health community in the attempt to solve cigarette problems existed within adolescents. Subsequent research is suggested to modify the treatment in quitting smoking by considering environmental theory. It is known that environmental factors are also very influential in a person through action.

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## REFERENCES

- Astuti, R., Yosep, I. & Susanti, R.D. Pengaruh Intervensi SEFT (Spiritual Emotional Freedom Technique) terhadap Penurunan Tingkat Depresi Ibu Rumah Tangga dengan HIV, *Jurnal Keperawatan Padjadjaran*, 3(1), pp 44–56.
- Blaise, C. F., Suriadi & Hafizah, R. (2016). Efektifitas Terapi Seft (Spiritual Emotional Freedom Technique) Terhadap Penurunan Intensitas Merokok Di Klinik Berhenti Merokok Uptd Puskesmas Kecamatan Pontianak Kota. *Jurnal ProNers*, 3(1), pages 11.
- Coleman, A. & Snarey, J. (2011). James-Lange Theory of Emotions. In S. Goldstein & J. Naglieri (Eds.), *Encyclopedia of Child Behavior and Development* (Volume 2, 844-846). Springer-Verlag, New York.
- Desmanianti, Z. & Avianti, N. (2012). Spiritual Emotional Freedom Technique SEFT Menurunkan Stres Pasien Kanker Serviks (Spiritual Emotional Freedom Technique Decreasing Stress on Patiens with Cervical Cancer). *Jurnal Ners*, 9(1), pp 91–96.
- Krasnegor, N. A. (1979). Department of Health, Education, and Welfare, Public Health Service, Alcohol, Drug Abuse, and Mental Health Administration, National Institute on Drug Abuse, National Institute on Drug Abuse. Division of Research, 26(26), DHEW publication, USA.
- Laventhal, H. & Cleary, P. D. (2010). The smoking problem: A review of the research and theory in behavioral risk modification. *Psychological Buletin*, 88(2), pp 370-405.
- Rahayu, P. (2017). Hubungan Antara Pengetahuan Bahaya Merokok Dengan Perilaku Merokok Pada Mahasiswa Di Universitas Muhammadiyah Surakarta. Faculty of Health Sciences, Universitas Muhammadiyah Surakarta. Retrieved from: <http://eprints.ums.ac.id/55046/1/NASKAH%20PUBLIKASI.pdf>
- Rahmatdhoni, Z. S. (2014). Bahaya Merokok Pada Remaja Dan Bagaimana Cara Mengatasinya. Badan Narkotika Nasional Provinsi Kepulauan Riau. Retrieved from: <http://kepri.bnn.go.id/2014/10/bahaya-merokok-pada-remaja-dan-bagaimana-cara-mengatasinya/>

- RISKESDAS (2013). Basic Health Research. Indonesia Agency of Health Research and Development, Ministry of Health of Republic of Indonesia.
- Runtukahu, G. C., Sinologan, J. & Opod, H. (2015). Hubungan Kontrol Diri Dengan Perilaku Merokok Kalangan Remaja Di SMKN 1 Belitung. *Jurnal e-Biomedik*, 3(1), pp 84-92.
- Safaria, T. & Saputra, N. E. (2009). *Manajemen Emosi. Sebuah Panduan Cerdas Bagaimana Mengelola Emosi Positif Dalam Hidup Anda*. Bumi Aksara, Jakarta.
- Sulifan, Y., Suroso, S. & Muhid, A. (2014). Efektifitas Terapi SEFT ( Spiritual Emotional Freedom Technique) untuk Mengurangi Perilaku Merokok Remaja Madya. *Jurnal Psikologi Tabularasa*, 9(1), pp 86–95.
- World Health Organization (2015). Smoking, World Health Organization. Retrieved from: <http://library.who.edu.au/sthomas/papers/perseff.html>
- World Health Organization (2017). Tobacco. Fact sheet. Retrieved from: <http://www.who.int/mediacentre/factsheets/fs339/en/>
- Zainuddin, A. F. (2009). *Spiritual Emotional Freedom Technique (SEFT) Cara Tercepat Dan Termudah Mengatasi Berbagai Masalah Fisik Dan Emosi*. PT Arga Publishing, Jakarta.