THE COUNSELING OF MENTAL HEALTH FOR OVERCOMING SMOKING HABIT IN TEENAGER

PAPER

This paper is composed in International Guidance and Counseling Conference 2011
Under the theme “Enhancing Mental Health Through Counselling”
In Bumi Siliwangi, December 7th-8th, 2011
UPI in cooperation with ABKIN and PERKAMA

By:
Budi Astuti
Lecturer of Guidance and Counseling Study Program, Department of PPB,
FIP UNY

PERSATUAN KONSELING MALAYSIA (PERKAMA)
ASOSIASI BIMBINGAN DAN KONSELING INDONESIA (ABKIN)
UNIVERSITAS PENDIDIKAN INDONESIA (UPI)

BANDUNG, 2011
THE COUNSELING OF MENTAL HEALTH FOR OVERCOMING
SMOKING HABIT IN TEENAGER

By:
Budi Astuti
Lecturer of Guidance and Counseling Study Program, Department of PPB,
FIP UNY

Abstract

Smoking habit among the teenagers is a common phenomenon that troubles the world of education, the family, and the community. Data shows that the numbers of smokers is increasing, instead of decreasing, and the age of the smokers is younger than before. The increase of smoking habit in the teenagers causes certain negative impacts toward their physiological and psychological health. The counseling of mental health becomes an alternative of solution for overcoming the smoking habit among the teenagers. The collaborative approach and the application of curative, preventive, and developmental function become the reference within the implementation of counseling of mental health in order to overcome the smoking habit among the teenagers. The attempts to overcome the smoking habit among the teenagers are conducted in the family, school, friends, and religion life in the community.

Keywords: counseling of mental health, smoking habit among the teenagers.

Introduction

Adolescence is one of the phases in the life span development. Adolescence is a transitional period from childhood to adulthood that is followed by the development of physic, cognitive, and emotion toward personal mature and independence (Santrock, 2007). According to Hurlock (1996) the age limitation of adolescence is divided into early adolescence (approximately 13 years old until 16 years old) and late adolescence (approximately 17 years old until 18 years old), which is an adult period according to the law.

In relation to the developmental ages of adolescence, recently the researcher finds that there has been so many problems around the teenagers namely in the form of smoking habit. Smoking habit, seen from any point of view, is disadvantageous both for one’s self and for the others. For one’s self, smoking cause the occurrence of many dangerous diseases such as the stimulation of can, heart attack, hypertension, acute bronchitis, and alike. These diseases are caused
by the impacts of certain chemical content contained in the cigarettes namely nicotine and carbon monoxide (CO). On the other hand, the impact of smoking for the others is more dangerous because the resistance of these people, entitled as passive smokers, toward those substances is very low (Komalasari and Helmi, 2000). From the health point of view, in the long run the smokers, especially the active ones, have death rate three times higher than those of the non-smokers.

According to the report of Kepala Balitbang Depdiknas (Gatra, 2001 in Nasution, 2007) around 13,2% of Indonesian teenagers have been smoking since 15 – 19 years old; if the number is not anticipated, then there is likely that the young smokers will increase. This report is in line with the data provided by Sulistiawan (2010); the data reported that Indonesia now has settled in the fourth place of countries with the biggest numbers of smokers after United States of America, Republic of Chinese, and Japan. Not less than 70% of Indonesia people have become active smokers and, ironically, around 13,2% of these people are teenagers ranging from 15 – 19 years old; whereas, since 1987 Depdiknas has issued the prohibition of smoking in the school environment and it has applied for elementary schools until universities so that students, teachers, and employees are not allowed to smoke around the environment.

In addition, around 20-60% men and 10%-50% women in the world are smokers. In Indonesia, it is predicted that 50-59% men and 10% women are smokers. Within the teenagers, smoking habit has been very dangerous: 30-60% of the teenagers (30% for boys and 60% for girls) has been smoking. It should be noted as well that around 100 million people has been death due to smoking (Nasution, 2007).

The smoking habit in teenagers is clearly seen in the students of senior high school and it has been some sort of trend or of a common situation. The results of observation toward the students of senior high school during th break and the afterschool report that most of these students are smoking either in the stalls nearby the schools, in the supermarkets, or in their hanging-out spots. The same result also reports that cigarettes are one of the most purchase items where
there are about 30-40 cigarettes sold in each and most of the customers are the students under uniforms.

The students with the smoking habits surely needs attention from the schools in order to anticipate the negative impacts. Guidance and counseling as an integral part of education in the school has substantial role in providing the appropriate service through the counseling of mental health in order to overcome the smoking habit. Curative or remedial, preventive, and developmental functions within the counseling of mental health service are considered to be able to provide ultimate solution for the problems of smoking habit among the teenagers. Based on the explanation above, the researcher will discuss more about the role and the contribution of counseling service in overcoming the smoking habit within the teenagers.

Discussion
1. The Identity and Characteristics of Counseling of Mental Health

Counseling of mental health is one of brand new service professions. Counseling of health mental has been designed by The Community Mental Health Centers Act since 1963. The action is carried out in order to develop community-based mental health service programs with interdisciplinary teams. Within the process, in July 1978 the professionals started a movement by establishing The American Mental Health Counselor (AMHCA) in order to place the professional identity and organization (Pistole, 1995).

Since the beginning, AMHCA aims to gain recognition, to develop accountability standars, and to attain professional status. At the end, the exponent of the profession founder is able to go toward the well-established identity of mental health counselor because the counselor has gain a reputation in the counseling institution and it is shown by the existence of activities, roles, and unique characters as a profesional. This is the one that differentiates the mental health counselor and the other service professionals.
In relation to the explanation of characters or characteristics, the counseling of mental health is comprehended as a cluster of knowledge that involves specific and scientific education and that provides professional contributions toward the discipline of education, psychology, and counseling field. From the beginning, the mental health counselors have described their assignments as a multi-stage interdisciplinary one and the holistic process covers: (1) the progress of healthy life style, (2) the identification of individual stressors and of personal level functions, and (3) the recovery or the maintenance of mental health.

The next character or identity is that counseling of mental health is a profession in which individual is conceptualized holistically and in which the counselor refers more to the development of the related individual by paying attention to contextual influence within the life of an individual. The approach involves individual and systemic perspectives. From the systemic perspective, counseling is affected by family, community, history, culture and socioeconomical context, which means that human resources and interdisciplinary approach can be beneficial within the treatment. Meanwhile, from the individual perspective, it is explained that an individual can be viewed as a gestalt from many domains namely emotional, physical, social, vocational, and spiritual, that goes toward a healthy life style. As part of the service, counselor concentrates more on the philosophy of mental health holistically and and less on the issues of clinical disease and treatment of several mental illness.

The following is a quotation about the definition of counseling of mental health illness according to AMHCA (1999 in Pistole, 1995).

*The National Standards for the Clinical Practice of Mental Health Counseling (1999), developed by AMHCA, describe the practice of clinical mental health as follows:*

"Clinical mental health counseling is the provision of professional counseling services including the application of the principles of psychotherapy, human development, learning theory, group dynamics, and the etiology of mental illness and dysfunctional behavior to individuals, couples, families, and groups for the purposes of promoting optimal mental health, dealing with normal problems of living, and treating psychopathology. This document describes mental health counseling as including, but not being limited to, diagnosis and treatment of
mental disorders, psychoeducation designed to prevent emotional problems, consultation, and research into more effective psychotherapeutic treatment modalities.

[Definition of Mental Health Counseling developed by the American Mental Health Counselors Association (AMHCA), 1999, pp. 1-2]

Based on the quotation above, it can be explained that counseling of clinical mental health is a professional counseling service in which there is an application of psychoterpapy principles, a human development, a learning theory, a group dynamic, and a mental-illness etiology, toward the problems of normal life and the psychopathological treatment. The document elaborates the limitations of counseling of mental health not on the results of diagnosis and of treatment toward the mental disorders; instead, the document is designed psycho-educationally in order to prevent problems emotionally through consultation and research within a more effective psychoterpetic treatment.

The existence of counseling of mental health service has a peculiar uniqueness due to the pressures to balance between the psycho-education and the prevention in the development approach by using clinical capabilities for psychopathological treatment. The approach in counseling of mental health is a holistic one, which tests the influence of one’s social and external environment as well as monitors the emotional health in depth, in physic, and in behavior (Florida Health Careers, Wikipedia, 2005).

The counseling of mental health service is an expansion of range for answering the demand of counseling in field. The phenomenon that happens is that approximately 25% people in North America suffer from disease that is diagnosed as mental health problems. By improving that awareness linked with the influence of social, politic, and economic toward the related problems, there will be a big demand to attain the service of a mental health counselor (Department of Educational Leadership, Counseling, and Postsecondary Education, University of Northern Iowa Wikipedia, 2007).

Mental health counselor is a trained professional in terms of providing counseling towards individuals, couples, families and groups in order to promote an optimal health/welfare. The objective a mental health counselor is to help the
community in its relation to the problems of marriage, to the stress management, to the substantial abuse, to the addiction, to the parental problems, to the family problems, to the attempts of suicide, and to the self esteem. Mental health counselor facilitates counseling for decision making from any selected alternatives and for providing in-depth comprehension in order to attain positive changes in the counselee’s self.

The counseling can take place in the developmental functions, in the preventive functions, or even in the curative and remedial functions. Developmental functions are attempts to develop a healthy mental or personality so that the individual is able to avoid psychological difficulties that occurs in his or her life.

In the preventive functions, guidance and counseling actively takes part in prevent and decrease the cases of mental disorders in the community by means of explanation, guidance, group training, and crisis intervention. The preventive programs can be established for families, pre-school children, school-period children, teenagers, adults and elders (Maramis, 1998). The other preventive actions are explained by Ketterer (1981) namely by conducting the following steps: (a) improving and maintaining individual and group mental health, (b) educating and promoting the mental health problems, (c) early detecting and preventing the occurrence of the mental health problems. In addition, Lachance (1984) states that there are some available steps for preventing behavioral deviation namely: choosing activity alternatives toward healthy and conducive lifestyle, minimalizing the negative impacts of media, developing social skills, clarifying the values of community’s norms and cultures, and understanding social-psychological field.

2. Smoking Habit in the Teenagers

Smoking habit in teenagers is comprehended by all parties as a disadvantageous and dangerous behavior for their physiology and psychology. According to studies of developmental psychology, as explained by Erickson (Gatchel, 1989 in Komalasari and Helmi, 2000), teenagers’ smoking habit has something to do the crisis of psychosocial aspects experienced during their
developmental age namely in the adolescence when they are looking for their spirit and identity. The adolescence period is often described as storm and stress period due to the inappropriateness between the psychic and social development. The attempts to find their spirit for most of the times has a crash with the community’s expectation. Smoking, then, is usually turned to be a compensation for them.

Smoking habit in the teenagers is believed to be a symbolization, namely the symbolization of matureness, power, leadership, and appeal toward the opposite sex (Brigham, 1991). Smoking habit in the teenagers is closely connected to their friendship; in general, teenagers are very willing to be accepted by their peers and they don’t want to feel any inappropriateness. Some provided reasons are smoking is something done by a man, so by smoking we can be a man. Then, smoking is a trend. Next, smoking adult represents ‘authority’ so the teenagers consider that smoking is a means for expressing challenge and independence. The teenagers feel that smoking can generate feeling of relax, decrease tension, generate enjoyable experience, and overcome the stress.

Some of the causes for smoking in teenagers are namely: (1) parental influence, one of the findings about smoking teenagers is that the young teenagers who come from unhappy family, where the parents do not pay attention to the their children and where the parents always provide physical penalties, tend to easily be smokers compared to that of the happy ones; (2) peer influence, a number of facts show that the more the teenagers are smoking, the bigger the possibility of their friends to be smokers as well and vice versa; (3) personality factor, one of the predictive factors in the drug users (including smokers) is the social conformity; people who attain high scores in any social conformity test compared to those of the lower one; and (4) media or advertisement influence, watching any advertisement that shows that smoker is a symbol of manhood or of glamour in the mass media and electronic trigger the teenagers to do the similar thing (Anonymous, 2010).
3. Counseling of Mental Health Service for Overcoming the Smoking Habit in the Teenagers

The application of counseling of mental health service in any life setting becomes an important matter with an objective to improve the service toward community. This matter becomes ultimately important due to the increasing numbers of cases related to mental health, one of them is the smoking habit within teenagers. The prevention of smoking habit within teenagers also involves the role of family, school, peer, and community. In relation to the prevention, there are some settings in the counseling of mental health that is considered as being able to be conducted optimally and effectively, namely: family, school, peer, religion communal life neighborhood.

The followings are the explanation of each settings along with the assigned role:

a. Family; smoking is merely not a child’s perception toward the parents as smokers. On the other hand, a positive recognition from the family is reflected in the permissive attitude from the parents to the children by allowing them to smoke and enjoy the habit. Therefore, the family role in preventing the smoking habit of teenagers is conducted by not giving any chance, opportunity, and positive recognition for the teenagers whenever they smoke both inside the house and outside the house.

b. School; the development of individual mental health is affected by the quality of socio-emotional climate in the school. Guidance and counseling teachers in collaboration with the other school personnels can monitor the teenagers, in this case the students, as early as possible toward the symptoms of smoking habit. The steps that can be taken are, namely, by making written regulations such as smoking prohibitions in each room easily accessed by the students, doing anti-smoking campaign altogether with the teachers and the students, providing basic services in the forms of smoking risk and danger comprehension (done by counselors), and alike. The school comprehension toward the students’ psychology can reduce the occurence of student’s deviating behavior that can cause disorders in their mental health.
In relation to the multidisciplinary counseling of mental health service, the attempts to prevent smoking habit can be done by counselors altogether with the psychologists, the psychiaters, the social workers, and the governing free-lance institutions.

c. Peer; the collaboration between the school and the family should take a part in providing monitoring toward the students in order to establish conducive peer neighborhood. Peer culture established by the teenager groups should be directed to positive and constructive cultures or behaviors, namely to avoid smoking behavior and to develop healthy life style. Meanwhile, negative peer cultures should be avoided by the teenagers. The role of media or of smoking advertisement being easily adopted by peers can be minimalized by means of brainstorming and discussion.

d. Religion life in community; the more complex the life is, the more important the application of counseling of mental health is, especially the one that comes from religion in order to develop and to improve community’s health, mainly the role of theapeutic treatment for spiritual recovery. Stresses due to complex problems should not be ended by smoking cigarettes for the sake of attaining comfort and convenience. There are many other alternatives that the teenagers can use for solving psychological problems by using spiritual approach, living the life with positive thinking, and getting closer to Allah Swt. (Yusuf, 2004)

Some of the settings that take part in preventing smoking habit within teenagers should be added with preventive and developmental functions during the counseling of mental health service as a part of guidance and counseling basic service. A comprehension about teenager’s healthy personality that should developed under healthy mental should be provide to the teenagers, namely as follows: (1) having sense of security, (2) having self evaluation and rational self knowledge, (3) having proper emotionality and spontanity, (4) having efficient contact with reality, (5) having healthy physical urge and passion, (6) having sufficient self-knowledge, (7) having right objective of life, (8) having the ability to learn from his or her own life, (9) having readiness to fulfill any given demand
and needs provided by the group, since the teenagers feel comfortable with their peers, (10) having healthy emancipation attitude toward the group and the culture, but still having peculiar originality and individuality, and (11) having integrity in the personality, specifically physical and spiritual determination (Maslow and Mittelmann in Kartono, 2000).

Conclusion

The tendency of increasing life problems in a rapid and complex community influence heavily the mental and personality development n the community itself. Therefore, there should be attempts to prevent and reduce these problems, specifically the smoking habit in teenagers. One of the attempts is by providing counseling of mental health service under the field of guidance and counseling. The counseling can also take place in the developmental, preventive, and even curative or remedial functions. The neighborhood settings that play a vital role in preventing smoking habit in teenagers namely, family, school, peer, and religion life in community. The collaboration of all related parties for preventing the smoking habit in teenagers can be done under the assistance of the other professions.

List of References


****