

THE PHENOMENON OF EARLY-AGE SMOKING AMONG STUDENTS AT SMA NEGERI 7 GORONTALO

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ABSTRACT

Early-age smoking remains a significant social issue among high school students. This study examines smoking behavior among students of SMA Negeri 7 Gorontalo, the factors influencing its emergence, and the effectiveness of social control within the family, school, and community. Using a descriptive qualitative approach, data were collected through observations, in-depth interviews, and documentation involving student smokers, peers, teachers, parents, and community members. The findings reveal that smoking is often carried out secretly and is primarily driven by peer influence, followed by smoking habits within the family, curiosity, easy access to cigarettes, and emotional pressure. Social control in schools and the community remains weak, contributing to the normalization of adolescent smoking. These results support Hirschi's social control theory, which states that weakened social bonds increase the likelihood of deviant behavior. The study highlights the need to strengthen social control across all environments to reduce early-age smoking among students.

Keywords: Early smoking, high school students, peers, social control, deviant behavior..

1. INTRODUCTION

The phenomenon of early childhood smoking is a social behavior that is increasingly prominent among young adolescents, particularly high school students. Smoking at this age can be understood as a form of deviant behavior that arises from the interaction between the individual, the social environment, and the process of identity formation during adolescence. According to the World Health Organization (2023), most smokers start smoking before the age of 18, indicating that early age plays a significant role in this addictive behavior. The phenomenon of smoking among adolescents is a growing social problem, especially because adolescents are in a phase of searching for identity, are easily influenced by their environment, and have a high curiosity. Smoking is often seen as a symbol of maturity, courage, or style, so many adolescents begin to try it without understanding the long-term risks. For adolescents, smoking can be harmful because cigarette smoke contains toxic substances that damage the lungs, weaken breathing, and reduce organ function. The nicotine in it is addictive, making it difficult for someone to quit even though they are aware of the risks. Furthermore, smoking puts a burden on the heart and blood vessels, increasing the risk of heart disease, stroke, and other health problems, especially in adolescents whose bodies are still developing. The impacts of smoking can also be seen in decreased physical health, such as fatigue, coughing, and reduced stamina. Psychologically, nicotine dependence makes smokers anxious and makes it difficult to focus when not smoking. Socially, smoking can affect relationships,

create negative stigma, and encourage adolescents to form friendships with others who also smoke. This habit is also costly and can harm quality of life in the long term.

Cases such as students caught smoking after school, or smoking in groups in hidden places, indicate that this behavior has become ingrained in the daily lives of some students. Similar findings were recorded in another study in Sulawesi, where the school environment and peer groups were the biggest factors driving adolescent smoking behavior (Rahmat et al., 2020). In Gorontalo City, this phenomenon is also evident in the lives of students at State Senior High School 7, Gorontalo City. Local community reports indicate that several students are often found smoking in public areas around the school, such as small kiosks, hangout spots, and city parks. This situation reflects that students at State Senior High School 7 in Gorontalo City are also within a relatively strong circle of social influence and develop smoking habits as part of their group identity process.

The high level of tolerance in the surrounding environment towards teenage smoking also contributes to this recurring phenomenon. Social conditions such as lack of parental supervision, weak school controls, and permissive attitudes of some communities towards young smokers are issues that deserve attention. The Global Youth Tobacco Survey (GYTS) Indonesia shows an increase in the number of adolescents who try smoking for the first time between the ages of 11 and 15 (Ministry of Health of the Republic of Indonesia & WHO, 2022). This data confirms that the incident at State Senior High School 7 in Gorontalo City is not an isolated incident, but rather part of a broader phenomenon related to adolescent behavior in Indonesia.

However, research specifically addressing smoking behavior among students at State Senior High School 7 in Gorontalo City is still very limited. Most previous studies have focused solely on health impacts or family factors, while studies examining the social context of schools, patterns of interaction between students, and the construction of meanings of smoking within the local environment are rare. For example, local research in Gorontalo has focused more on general public health behaviors, rather than on adolescent dynamics in the school environment (Mahmud & Idris, 2021). This creates a research gap between the actual phenomena occurring in the field and available empirical studies. Therefore, research on the phenomenon of early smoking among students at SMA Negeri 7 in Gorontalo City is highly urgent.

At State Senior High School 7 Gorontalo, the tendency for adolescents to start smoking at an early age reflects complex social dynamics related to lifestyle, peer pressure, and weak supervision from the surrounding environment. Smoking behavior in adolescents is not merely a matter of nicotine consumption, but also a way to build social identity. Adolescents who smoke often want to demonstrate maturity, courage, or a desire to be accepted within a particular group. Factors such as peer support, easy access to cigarettes, and minimal social control from family and school contribute to this tendency. Furthermore, the impact of early smoking is not only felt in terms of health, such as decreased lung function and an increased risk of respiratory disorders, but also leaves significant social and psychological impacts.

Given these conditions, this study seeks to better understand how smoking behavior is formed among adolescents at State Senior High School 7 Gorontalo. This study also aims to uncover the factors that influence their initiation of smoking and the role of social control from school, family, and community in controlling this phenomenon. Furthermore, this study aims to examine the social and health impacts experienced by adolescents due to early involvement in smoking. By understanding all these aspects, research is expected to contribute to efforts to prevent and address smoking behavior in school environments.

The urgency of this research is further strengthened because smoking behavior in adolescents is not simply a health issue, but is also related to character formation, social behavior patterns, and the potential for adolescents to engage in other risky behaviors. This research is expected to provide a comprehensive picture of how smoking behavior is formed, how social interactions influence students' decisions to start smoking, and how the school and community environment play a role in reinforcing or inhibiting this behavior. By understanding this phenomenon more deeply, the research results can serve as a reference for schools, local governments, and the community in formulating more effective, data-driven prevention strategies.

2. RESEARCH METHOD

This study employed a qualitative research method with a descriptive approach. Qualitative methods were chosen because they produce descriptive data in the form of words, sentences, and visual images that reflect social phenomena in depth. According to Sugiyono (2018), qualitative research aims to understand social phenomena from the perspective of participants by describing conditions that occur naturally in the field. Meanwhile, Arikunto (2010) explains that qualitative research produces data in the form of written and spoken words from individuals, as well as directly observable behavior. The descriptive approach was used to describe the phenomenon of early childhood smoking factually and in-depth without manipulating variables. This study focused on data authenticity and attempted to capture the reality of smoking behavior as it exists in the environment surrounding SMA Negeri 7 Gorontalo. Through this approach, researchers hoped to gain a comprehensive understanding of the forms of smoking behavior, driving factors, and the surrounding social dynamics.

The research was conducted in the environment surrounding SMA Negeri 7 Gorontalo, encompassing the school area, surrounding residential areas, and areas frequently frequented by adolescents. The location was selected based on the widespread prevalence of smoking around schools and the lack of previous research examining this context in depth. The study lasted for one month from the time the assignment was given, encompassing initial observation, interviews, documentation, and data analysis. The informants in this study included smokers (students or adolescents who smoke around the school), friends of smokers, and members of the surrounding community (cafe owners, local residents, or other parties who frequently observe student activity). Informants were selected using purposive sampling, selecting informants deemed most knowledgeable and understanding of the phenomenon of smoking around schools. This study employed three main data collection techniques:

Field Observation: Researchers directly observed adolescent activities around SMA Negeri 7 Gorontalo to examine smoking patterns, common locations, and social interactions.

Interviews were conducted directly with 15 informants: 5 student smokers, 3 friends of smokers, 5 members of the surrounding community (cafe owners, local residents, and other parties), and 2 parents of student smokers. The interview process was supported by a voice recorder to capture complete conversations and a notebook to jot down key points. Photo documentation complemented visual data from the field. This interview focused on experiences, perspectives, and factors influencing smoking behavior among adolescents. Documentation, including field photographs, school environment conditions, and other supporting documents, was used to strengthen the observations and interviews.

This study utilized two types of data sources: primary and secondary data. Primary data was obtained from direct interviews, field observations, audio recordings, and photographic documentation conducted by the researcher. Secondary data came from books, journals, official reports, and literature related to adolescent smoking behavior and other supporting theories (Sugiyono, 2018).

3. RESULT AND DISCUSSION

Student Smoking Behavior Patterns

According to interviews with various sources, including students, peers, parents, and the community, it appears that smoking behavior among high school students has developed a relatively consistent pattern, both in terms of smoking location, intensity, and type of cigarette used. Most students reported that their most frequent smoking locations are areas away from teacher supervision. One student (MS) said,

"Usually, when we smoke, my friends and I go behind the school, because the teachers can't see us." MS (17-year-old student)

This statement was further reinforced by another student (RM), who stated,

"During recess or after school, we like to gather at the cafe next door. It's free to smoke because many adults smoke too." RM (16-year-old student)

Both students indicated that they choose locations that are socially acceptable for smoking and away from school authorities. Their peers also confirmed this. One of his friends (AZ) said,

"Kids usually look for safe places. At school, they have to hide, but near the food stalls, they're free because no one forbids them." AZ (15-year-old friend of MS)

This shows that smoking is not just an individual activity, but a communal activity supported by the surrounding environment. In terms of intensity, most students admitted to smoking one to three cigarettes per day. One student (DF) explained,

"I don't smoke often, usually only when I'm in a group or when I'm stressed, maybe one or two cigarettes a day." DF (15-year-old student)

Meanwhile, another student (RN) reported a higher intensity:

"I smoke almost every day, especially if I'm really used to it, sometimes up to five cigarettes." RN (15-year-old student)

This difference in intensity indicates varying psychological and social needs related to smoking, which, according to research by Mulyadi (2021), is often associated with coping and emotional stress relief. The types of cigarettes used are also relatively uniform. Most students use cheap kretek cigarettes, as revealed by RM, who said,

"I usually buy cigarettes that cost around a thousand rupiah for a small pack, as long as I can smoke them." RM (16-year-old student)

The same sentiment was confirmed by a local resident (SR) who observed the habits of students in the area:

"The kids usually buy cheap cigarettes at kiosks. I often see them buying small brands." SR (shop owner)

The consistency of answers across informants indicates that students' smoking behavior does not occur randomly, but rather forms a pattern driven by physical environmental factors (permissive locations), social factors (peers), and economic factors (affordable cigarette options). This pattern aligns with the findings of previous research by Ramadhani (2020), which stated that students tend to smoke in spaces with minimal controls, practicality, and affordability.

Factors Causing Student Smoking Behavior

Interview results identified several factors contributing to smoking behavior, primarily peer influence, curiosity, emotional stress, and family environment.

Several students admitted to starting smoking because of friends' invitations. One student (MS) said,

"I first tried it because my friends invited me, and then I did it to look cooler." MS (17-year-old student)

This was reinforced by the testimony of his friend (BM):

"Usually, when I smoke, everyone else also joins in. They smoke so their friends will accept them and the group." BM (16-year-old friend of RM)

This interaction indicates strong peer conformity, as explained in social psychology literature that adolescents often adjust their behavior to gain group acceptance (Santrock, 2019). In addition to social factors, some students smoke for emotional reasons. RN stated,

"I smoke when I'm stressed, for example, when I have a lot of homework or when I have family problems." RN (15-year-old student)

This statement indicates that smoking is used as a coping mechanism, something also evident in the statement of one of the parents (PL):

"Sometimes I see him smoking when he's having problems, maybe he thinks it can calm his mind." PL (parent of DF)

The family environment also has a significant influence. Several community members stated that most students who smoke come from families with parents who also smoke. TU said,

"Many children smoke because their fathers smoke at home, so they think it's normal."

A parent (PI) also acknowledged this:

"I smoke myself, maybe he sees me so he thinks it's not wrong." PI (parent of MS)

The correlation between parent and child behavior has been demonstrated in research by Dini & Fikrina (2022), who found that children are more likely to imitate smoking behavior when the behavior is seen as a family norm. This aligns with Bandura's social learning theory, which states that learning can occur through observation of models who are considered significant.

Social Normalization and Environmental Influence

Interviews with the community revealed that students' smoking behavior has become increasingly entrenched due to social normalization. One community member (SR) said,

"Smoking is common around here. Even elementary school kids smoke, let alone high school students." SR (cafe owner)

This statement indicates that smoking is not considered deviant, but rather a socially accepted activity. Lack of supervision was also cited as a factor reinforcing the habit. GL stated,

"No one really forbids it; parents are busy, and teachers don't know because kids smoke outside of school." GL (community member)

A peer (AK) added,

"No one forbids it in cafes or on the field; in fact, there are usually adults who smoke too." AK (17-year-old friend of RN)

One parent (PI) even considers smoking a "normal" behavior for teenage boys:

"I used to smoke when I was younger, so I don't get too upset when I see him smoking, as long as it's not a lot." PI (parent of MS)

This kind of normalization reduces the strength of informal social control, which, according to Hirschi (1969), can weaken a child's social ties to conventional values. Thus, interviews with the community, parents, and peers indicate that students' smoking behavior is driven not only by internal and interpersonal factors, but also by permissive social structures. Research by Herlina (2021) supports this finding by explaining that permissive social environments reinforce deviant behavior due to the lack of adequate sanctions or supervision.

Theoretical Analysis: Hirschi and Bandura's Perspective

The above findings can be analyzed through two main theories: Hirschi's Social Bond Theory and Bandura's Social Learning Theory. Hirschi explains that deviant behavior occurs when a child's social ties to family, school, and moral values weaken. This is evident in students who smoke. Some students stated that their parents don't supervise them, as expressed by FR,

"My parents don't know I smoke, and I'm not really afraid of getting scolded." FR (16-year-old student)

This permissive attitude reflects a weakness in the attachment and commitment components, which Hirschi believes are crucial elements in preventing deviant behavior. Meanwhile, Bandura's theory explains that behavior is learned through modeling or imitation. Statements from students, friends, parents, and the community indicate the presence of numerous models of smoking behavior in their social environment. When students see their parents, older siblings, or other adults smoking without negative consequences, they learn that such behavior is acceptable. This was confirmed by M5, who stated that children imitate their father's behavior. This finding aligns with research by Zhou et al. (2020) which found that adolescents are twice as likely to smoke if they live in an environment with a dominant smoking model.

Discussion

The phenomenon of smoking among students in this study demonstrates that this behavior does not emerge suddenly, but rather is formed through the interaction of individual factors, the social environment, and the dynamics of social control surrounding them. Field findings indicate that students' smoking behavior has formed a relatively stable pattern in terms of location, intensity of use, and type of cigarette consumed. This pattern is influenced by interconnected causal factors reinforced by normalization in their immediate social environment.

Behaviorally, students who engage in smoking exhibit a recognizable pattern. They tend to choose locations with low visibility and a low risk of reprimand, such as areas behind schools, small roads leading to residential areas, or gathering places away from the supervision of teachers and parents. Smoking intensity is largely situational, increasing especially when they are with peers, feeling pressured by schoolwork, or simply wanting to assert themselves within the group. The types of cigarettes chosen are generally affordable, both kretek and e-cigarettes, each of which has its own appeal depending on the lifestyle of their group. This pattern indicates that smoking for students is not merely an individual act, but has become part of a social practice that provides them with a sense of community and group identity.

Upon closer examination, the factors contributing to smoking behavior in students are inseparable from peer influence, the desire for acceptance, emotional pressure, and the intense curiosity that occurs during adolescence. The research results demonstrate consistency across various groups of informants students, friends, parents, and the community indicating that the initiation of smoking behavior often occurs due to encouragement or role models from peers. During adolescence, the need for affiliation and social acceptance becomes particularly dominant,

so the decision to try smoking can be understood as a form of social adjustment. Furthermore, some students acknowledged smoking as a way to reduce stress, whether related to academic tasks or family issues. This reasoning aligns with previous research findings showing that adolescents with high stress levels or low self-control are more susceptible to engaging in smoking behavior.

This phenomenon is reinforced by the social normalization that occurs within the students' living environments. The lack of supervision from parents and schools allows smoking behavior to flourish without significant obstacles. Many respondents from community groups and parents stated that smoking in their neighborhoods is considered commonplace, often even seen as normal behavior for boys entering adolescence. This normalization creates an environment where smoking is no longer viewed as deviant but rather as an acceptable social routine. Furthermore, the presence of small shops selling cigarettes at retail facilitates access for students, increasing their chances of continuing this behavior.

When analyzed from a theoretical perspective, the findings of this study align with Travis Hirschi's explanation of social control. In this theory, deviant behavior emerges when there are weak social bonds (attachment) and commitment to rules and authority figures. In the context of this study, students who smoke tend to exhibit weak relationships with their parents and school. Lack of emotional involvement with parents or weak supervision leaves students with greater room to engage in deviant behavior without significant consequences. Similarly, their commitment to academic achievement and school rules appears insufficient to resist the urge to follow peer pressure.

Furthermore, Albert Bandura's social learning theory further clarifies this phenomenon. According to Bandura, a person's behavior is formed through observational learning from models around them. In this study, most students recognized and imitated smoking behavior from friends, family members, and even adults in their environment who openly displayed smoking habits. This repeated observation process shaped the perception that smoking was an acceptable behavior and even considered a symbol of maturity or courage. When this behavior was reinforced by peers in the form of social acceptance, the smoking behavior became stronger and more frequent.

These findings collectively demonstrate that smoking behavior among students is a multidimensional phenomenon that cannot be understood solely from an individual perspective. The established behavioral patterns, interrelated causal factors, and normalization within the social environment indicate the existence of conditions that facilitate the development of this behavior. Theoretical analysis reinforces the understanding that weak social control and strong observational learning play a significant role in shaping smoking behavior in students.

Therefore, efforts to address this phenomenon require systematic support from families, schools, and the community, through increased supervision, strengthening emotional bonds, and restricting access to cigarettes. Changing the social environment that has traditionally provided tolerance for smoking is also a crucial prerequisite for creating a healthier environment for adolescents to grow and develop.

4. CONCLUSION

This research shows that smoking behavior among students is a phenomenon formed through a complex interaction between behavioral patterns, individual and social causal factors, and environmental conditions that normalize smoking. Students' smoking patterns are evident in their tendency to choose hidden locations such as backstreets, alleys, and gathering places away from the supervision of teachers and parents. Smoking intensity increases when they are in peer groups, while the type of cigarette consumed adapts to accessibility and trends within their social circle. The causal factors for smoking behavior are dominated by peer influence, curiosity, the need for social acceptance, and an escape from emotional pressures, both academic and family. These factors demonstrate that smoking behavior is not solely an individual decision, but rather a response to the social and psychological dynamics of adolescents.

The social environment also plays a significant role in the normalization of smoking behavior. Lack of parental and school supervision, local cultural acceptance of smoking, and easy access to cigarettes make this behavior increasingly difficult to prevent. The normalization of smoking in society means that the behavior is no longer considered deviant but rather part of an acceptable social routine.

Analysis of this phenomenon strengthens the relevance of Hirschi's social control theory and Bandura's social learning theory. Weak bonds between students and their parents and schools contribute to low self-control against deviant behavior. Meanwhile, smoking behavior is reinforced through observational learning from peers and adult figures in the surrounding environment.

Based on these overall findings, it can be concluded that smoking behavior in students is a multidimensional phenomenon that requires a comprehensive approach to prevention and management. Intervention efforts should include strengthening social bonds, increasing environmental control, and consistent education at school and within the family.

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