Intention to Quit Smoking in Active Smoking Health Students: What is the Role of Self-Efficacy?

Dwi Anggraini Puspitasari[1)], Dewi Rokhmah✉[1)], Iken Nafikadini[1)]
[1] Faculty of Public Health, University of Jember, Jember, East Java, Indonesia
✉Email: dewirokhmah@unej.ac.id

ABSTRACT

***Background**: Students were agents of change, meaning they were movers, pioneers, and initiators in driving positive change. Specifically, health students were considered to have high abilities, skills, and knowledge regarding health issues and the dangers of smoking. Each student had different levels of self-efficacy. **Objective**: This study aimed to analyze the relationship between self-efficacy and the intention to quit smoking among active smoker health students by involving the dimensions of self-efficacy. Additionally, the researcher described the aspects of self-efficacy dimensions possessed by active smoker health students. **Methods**: This research was a type of analytical survey research using a quantitative method approach. The population of this study consisted of 60 active smoker health students with the criteria of active S1 health students from the 2016-2018 cohorts. The independent variable in this study was the dimension of self-efficacy, which consisted of the level, strength, and generality dimensions. Meanwhile, the dependent variable was the intention to quit smoking. The research data were collected through interviews and data acquisition tools using questionnaires. Data analysis used univariate and bivariate analysis with the Spearman test. **Results**: The analysis results of the relationship between respondent characteristics and the intention to quit smoking showed no relationship between respondent characteristics (faculty p=0.609, cohort p=0.928, gender p= -0.925, and age p= -0.673) and the intention to quit smoking. Additionally, the analysis results of the relationship between self-efficacy dimensions (level dimension p=0.000, strength p=0.000, and generality p=0.009) and the intention to quit smoking showed that there was an interrelated relationship affecting the intention to quit smoking. **Conclusion**: From this research, it can be concluded that there was a relationship between self-efficacy and the intention to quit smoking among health students who are active smokers at the University of Jember.*

***Keywords**: Quit, Students, Intention, Self-efficacy, Smokers.*

INTRODUCTION

The WHO (World Health Organization) stated that 10 types of diseases were the leading causes of death worldwide (WHO, 2018:42). Five of these 10 types of diseases were primarily caused by smoking. The 2016 Global Health Report recorded that 21.6 million people worldwide died due to smoking (WHO, 2018:42). According to the WHO (in Putri, 2017:206), it was estimated that by 2030, deaths due to smoking would increase, with 8 million people expected to die from smoking habits. This increase in death rates was considered dangerous for global conditions, as 80% of these deaths were projected to occur in developing countries. Indonesia was one of the developing countries ranked third as the largest cigarette consumer after China and India (Munir, 2019:113).

According to BPPK (2018:327), the prevalence of smoking habits in the 15-19 age group in Indonesia was 12.7%, and in the 20-24 age group, it was 27.3%. A study by the School of Strategic and Global Studies of the National Security Study Center of the University of Indonesia mentioned that 33.03% of individuals aged 18-24 were active smokers (Ayuwuragil, 2018). The average number of smokers among the population aged ≥10 years in Indonesia was 24.3% (BPPK, 2018:326). According to the definition of adolescence by the Population and Family Planning Board (BKKBN), adolescents are those aged 10-24 years and not married. Thus,

Received: 01-06-2024, Accepted: 03-07-2024, Published Online: 01-08-2024

the above age category could be concluded as the adolescent age group. The BPPK (2018:327) results showed that the 15-19 and 20-24 age groups were daily active smokers, so students could be considered an at-risk group for smoking.

Adolescents in Indonesia were among the highest users of cigarettes and experienced a continuous increase. Adolescence is a transition period from childhood to adulthood. During this period, adolescents experienced both physiological and psychological growth. The psychological changes experienced by adolescents confused, resulting in emotional turmoil and psychological pressure, making them prone to deviating from social norms and rules (Nopianto et al., 2017:26). The phenomenon often associated with adolescents, particularly male adolescents, was smoking. Smoking during early adolescence had dangerous risks because this period was crucial for growth. The risks of smoking in early adolescence were far worse compared to adults who started smoking later (Nugraha, 2015:4).

Early smoking posed negative health impacts on individuals. Smoking behavior in adolescence could result in earlier disease onset. Smoking has high health risks and could lead to various disease complications. While smoking was not a direct cause of diseases, it triggered and exacerbated conditions that could lead to death (Nasution, 2007:17). Some diseases triggered by smoking included cancer, heart attacks, impotence, pregnancy and fetal complications, stroke, cataracts, dental damage, osteoporosis, and sperm abnormalities (Aula, 2010:30).

Students were agents of change, driving better societal shifts. Their health status influenced the quality of human resources. Optimal student health led to healthy adolescents, whereas poor health status had the opposite effect. The smoking trend among students became a symbol of socialization in their environment. Students smoked to appear free and mature among their peers. Reasons for smoking included relaxation, peer pressure, self-presentation, curiosity, stress, anxiety, and a desire for challenges (Rahayu, 2017:2).

The University of Jember, a public university in Jember Regency, had 15 faculties with 31,545 active students from the 2011-2018 cohorts as of October 18, 2018. Research by Abdul Latif (2015:72) on University of Jember students found that they had moderate knowledge (73.40%) about health promotion media on cigarette packaging, moderate attention (55.32%) to health promotion media on cigarette packaging, and a negative attitude towards smoking and its dangers.

The University of Jember has 5 health faculties and 1 health study program: the Faculty of Medicine, Faculty of Dentistry, Faculty of Nursing, Faculty of Pharmacy, Faculty of Public Health, and the Nutrition Science Study Program. Health students were considered to have high abilities, skills, and knowledge about health issues and the dangers of smoking. As future health professionals, they should participate in smoking prevention actions (Meilani, 2017:3). Research by Trisnowati on the smoking behavior model of adolescents aimed at health students found that 9 out of 34 health students admitted to smoking. Although health students were expected to set a good example, this was not always the case (Trisnowati et al., 2017:114). Based on this information, health students at the University of Jember were also at risk of smoking. This explanation justified the choice of health students at the University of Jember as the subject of this study.

The preliminary study was conducted by the researcher at the University of Jember, particularly among students pursuing education in the Faculty of Health Sciences. The researcher identified smoking health students by utilizing social networks. The researcher contacted several friends studying in each health faculty at the University of Jember to gather information about smoking health students. The researcher collected data on the number of active smokers among health students three times: on July 1, 2019, August 29, 2019, and December 17, 2019. The data collection method used by the researcher involved distributing questionnaires via Google Forms, which were disseminated through social media (WhatsApp). The questionnaire consisted of five questions. The reason for using Google Forms was to facilitate reaching health students and to shorten the data collection time. The questionnaire was distributed to 234

Received: 01-06-2024, Accepted: 03-07-2024, Published Online: 01-08-2024

health students from the 2016-2018 cohorts, including 105 male and 129 female students. Based on the data collection results, it was found that 35 health students were active smokers, representing 15%, while 199 health students did not smoke, representing 85%.

In addition to distributing questionnaires, the researcher also conducted unstructured interviews with active smoker health students. These interviews were conducted over five days, from June 27 to July 1, 2019. The interviews involved five respondents from each health faculty at the University of Jember. The purpose of these unstructured interviews was to gather information on the reasons behind why health students continued to smoke despite their background as future health professionals. The interview results revealed that health students smoked for reasons such as stress relief, easing unpleasant feelings or thoughts, and experiencing pleasure when smoking. The effects of smoking were the main reasons for health students to continue smoking. Additionally, the students smoked an average of 1-4 cigarettes per day. They were aware that as health students, they were expected to be dedicated to health, but this awareness did not influence their smoking behavior.

Individual behavior varies significantly due to various influencing factors. According to Skinner (in Mahyarni, 2013:13), behavior is an individual's response or reaction to external stimuli. However, the received stimuli do not always result in behavior. Several other factors can trigger behavior, one of which is intention. Intention will not form if there are no influencing factors (Mahyarni, 2013:13). The development of individual behavior has led to theories used to measure how behavior emerges. One such theory is the Theory of Planned Behavior (TPB), which predicts individual behavior when they do not have full self-control. According to this theory, the variable perceived behavioral control is added, which is similar to self-efficacy, as an individual's control perception is determined by their belief in achieving a particular behavior (Ramdhani, 2011:59). This describes the confidence individuals have in deciding to smoke or not.

The decision to smoke or not may be stimulated by the development of self-efficacy (self-belief). According to Haryati et al. (2015:104), adolescent smoking behavior is believed to be influenced by self-efficacy. Self-efficacy is an individual's belief in their ability to achieve specific goals. It means believing in one's capability to face problems or tasks. Haryati et al. (2015:104) found a significant relationship between self-efficacy and adolescent smoking behavior. High self-efficacy in adolescents leads to not smoking, while low self-efficacy leads to smoking. Another study by Shuck, Otten, Kleinjan, Bricker & Engels (2014) (in Haryanti et al., 2015:101) on 2,888 respondents in a High School in Eastern Texas found that self-efficacy is related to the intention and belief in smoking behavior, based on an individual's belief in smoking.

According to Bandura (in Ghufron, 2017:80), self-efficacy varies among individuals based on its dimensions. Self-efficacy has three dimensions: level, generality, and strength. Bandura (in Simanjuntak, 2019:3) stated that measuring an individual's self-efficacy refers to these dimensions. The aspects of self-efficacy dimensions are interrelated and influence an individual's confidence in determining behavior (Antasari, 2016:5). Antasari et al. (2016:6) found that most guidance and counseling teachers had low self-efficacy, illustrated by the dimensions of level, strength, and generality.

Etter et al. (in Nurjanah et al., 2018:119) revealed that self-efficacy could predict the success of smoking cessation programs. It also plays a role in building an individual's confidence in their ability to quit smoking (Rokhmah, Rahman, and Rif'ah 2023). Besides self-efficacy, the success of an individual in their effort to quit smoking is determined by their intention. A strong intention to quit smoking strengthens the smoker's control over their behavior in any condition while smoking (Rosita et al., 2012:7).

Based on the above explanation, the dimensions of self-efficacy are part of the elements used to describe the self-efficacy of active smoker health students and their intention to quit smoking. Self-efficacy and intention can predict the success of smoking cessation programs.

Received: 01-06-2024, Accepted: 03-07-2024, Published Online: 01-08-2024

Therefore, the researcher aimed to analyze the relationship between self-efficacy and the intention to quit smoking among active smoker health students, involving the aspects of self-efficacy dimensions. The theory used in this research is the Theory of Planned Behavior (TPB) by Icek Ajzen.

METHODS

This study employed an analytic survey research design using a quantitative method approach. It was also a cross-sectional study aimed at analyzing the relationship between the self-efficacy of active smoker health students and their intention to quit smoking, involving the dimensions of self-efficacy. The research was conducted within the University of Jember, specifically at the respondents' respective faculties and the CDAST (Center for Development of Advanced Science and Technology) building from February 24, 2020, to March 1, 2020. The population of this study consisted of active smoker health students registered at the University of Jember. The sample size was 60 active smoker health students, selected using the Accidental Sampling method.

The independent variable in this study was the dimensions of self-efficacy, which include the level, generality, and strength dimensions. The dependent variable was the intention to quit smoking among active smoker health students at the University of Jember. Primary data were obtained through interviews using questionnaires, and secondary data were sourced from BAAK University of Jember, Riskesdas data, and BPS data. Data analysis was conducted univariately and bivariately using the Spearman Test.

RESULTS AND DISCUSSION

Data collection for this study was carried out from February 24, 2020, to March 1, 2020. The respondents were 60 active smoker health students at the University of Jember. The number of respondents per faculty was determined according to a proportional allocation formula. The researcher selected three cohorts (2016-2018) that met the inclusion criteria for the study sample.

Relationship Between Respondent Characteristics (Faculty, Cohort, Gender, and Age) and Intention to Quit Smoking Among Active Smoker Health Students

a. The relationship between faculty and intention to quit smoking among active smoker health students

The faculty represents the respondents' chosen field of study pursued during their academic tenure. The characteristics of respondents based on faculty are presented in the following table:

Table 1. Distribution of Respondents Based on Faculty

Faculty	Frequency	Percentage (%)
Faculty of Pharmacy	12	20
Public Health Faculty	15	25
Nursing Faculty	18	30
Faculty of Medicine	7	11
Faculty of Dentistry	8	13
Total	**60**	**100**

Based on Table 1, it was found that the Faculty of Nursing had the highest number of smoking students, accounting for 30% or 18 respondents. Meanwhile, the Nutrition Science Program was the health faculty with no smoking students, accounting for 0% or 0 respondents. The distribution of the relationship between faculties and the intention to quit smoking is presented in the following table:

Table 2. Frequency Distribution of the Relationship Between Faculties and the Intention to Quit Smoking Among Active Smoking Health Students

No.	Faculty	Intention to Quit Smoking						*p-value*
		Positive		Negative		Total		
		N	%	N	%	N	%	
1.	Faculty of Pharmacy	8	13.3	4	6.7	12	20	0.609
2.	Public Health Faculty	6	10	12	19.9	18	29.9	
3.	Nursing Faculty	7	11.7	8	13.3	15	25	
4.	Faculty of Medicine	3	5	4	6.7	7	11.7	
5.	Faculty of Dentistry	4	6.7	4	6.7	8	13.4	
6.	Nutritional Science Study Program	0	0	0	0	0	0	

Received: 01-06-2024, Accepted: 03-07-2024, Published Online: 01-08-2024

Total	**28**	**46.7**	**32**	**53.3**	**60**	**100**

The results in Table 2 provide information about the relationship between respondents' characteristics based on their faculties and their intention to quit smoking among health students who smoke. It was found that the Faculty of Nursing had the highest percentage of students with a low intention to quit smoking, at 19.9% or 12 respondents. The analysis of the relationship using Spearman's rho test showed that the relationship between faculties and the intention to quit smoking among health students who smoke had a p-value of 0.609 (p>α). This indicates that there is no significant relationship between the faculty and the intention to quit smoking among health students who smoke (Rokhmah, Ode, and Savitri, 2020).

The analysis of the relationship between respondents' faculties and their intention to quit smoking yielded a p-value of 0.609 (p>α), indicating no significant relationship between the faculty of the respondents and their intention to quit smoking. A study by Salawati (2010:179) that explored smoking behavior among students from health and non-health faculties at Universitas Muhammadiyah Semarang revealed that most informants from both health and non-health faculties were aware of the general dangers of smoking, the chemicals contained in cigarettes, and the health impacts of smoking on themselves and others. These informants believed that smoking was enjoyable and beneficial, particularly in relieving stress or pressure. All informants in the study had the intention to quit smoking, but most found it challenging to do so.

The results of the above study did not differentiate between health and non-health faculties in terms of smoking behavior. Therefore, the faculty did not instill confidence in individuals to develop an intention to quit smoking. Health students, who are expected to possess higher abilities, skills, and knowledge about health issues and the dangers of smoking, should serve as examples and inspirations for non-health faculties. However, this expectation contradicts the existing facts. There is no significant difference in smoking behavior between health and non-health students.

b. The Relationship Between Year of Enrollment and the Intention to Quit Smoking Among Active Smoking Health Students

Year of enrollment refers to the academic year in which the respondents began their studies and were registered as active students. The characteristics of respondents based on their year of enrollment are presented in the following table:

Table 3. Distribution of Respondents Based on Year of Enrollment

Year of Enrollment	Frequency	Percentage (%)
2016	35	58.3
2017	14	23.3
2018	11	18.3
Total	**60**	**100**

Based on Table 3, it was found that the majority of respondents were from the 2016 cohort, accounting for 58.3% or 35 respondents. The cohort refers to the academic year during which the respondents began their studies and were registered as active students. The majority of smoking respondents in this study were from the 2016 cohort, while the fewest respondents were from the 2018 cohort. Therefore, it can be concluded that the higher the cohort, the greater the number of smoking students.

The distribution of the frequency regarding the relationship between cohort and the intention to quit smoking is presented in the following table:

Table 4. Frequency Distribution of the Relationship Between Year of Enrollment and the Intention to Quit Smoking Among Active Smoking Health Students

No.	Year of Enrollment	Intention to Quit Smoking						*p-value*
		Positive		Negative		Total		
		N	%	N	%	N	%	
1.	2016	17	28.35	18	29.98	35	58.33	0.928
2.	2017	5	8.35	9	15	14	23.35	

Received: 01-06-2024, Accepted: 03-07-2024, Published Online: 01-08-2024

3.	2018	6	10	5	8.32	11	18.32
Total		**28**	**46.7**	**32**	**53.3**	**60**	**100**

The results in Table 4 provide information related to the relationship between the characteristics of respondents based on the year of enrollment and the intention to quit smoking among health students who smoke. It was found that most of the respondents in this study were from the 2016 enrollment year. Table 4 shows that 29.98% or 18 respondents from the 2016 enrollment year had a poor intention to quit smoking. The analysis of the relationship showed that the relationship between the year of enrollment and the intention to quit smoking among smoking health students had a p-value of 0.928 (p>α), indicating that there was no relationship between the year of enrollment and the intention to quit smoking among smoking health students.

The year of enrollment refers to the academic year that respondents started their studies until they were declared active students. Based on the research results, most smoking respondents were from the 2016 enrollment year and had a poor intention to quit smoking. A study conducted by Wahyudi (2019:15) found that most students from the Civil Engineering Department at Muhammadiyah University of Makassar, enrolled in 2016, fell into the heavy smoker category, amounting to 59.3% or 35 respondents. Spearman's rho analysis showed that there was no relationship between the year of enrollment and the intention to quit smoking.

The higher the enrollment year, the greater the use of cigarettes. This is due to the increasing workload or pressure faced by respondents, leading them to seek solutions to relax or relieve stress through smoking. The more cigarettes consumed, the smaller the intention to quit smoking. However, smoking was also found among lower enrollment years, even though the number of respondents was not as many as in the 2016 enrollment year. Therefore, higher or lower enrollment years do not provide confidence in building the intention to quit smoking. Thus, there is no relationship between the year of enrollment and the intention to quit smoking.

c. The Relationship Between Gender and the Intention to Quit Smoking Among Active Smoking Health Students

Gender refers to the biological physical characteristics of respondents as stated on valid identification cards. The characteristics of respondents based on gender are presented in the following table:

Table 5. Distribution of Respondents Based on Gender

Gender	Frequency	Percentage (%)
Man	60	100
Total	**60**	**100**

The results in Table 5 indicated that the majority of smoking respondents in this study were male, accounting for 100% or 60 respondents, with no female respondents. This condition occurs because female students in the health faculty were some of them who were smokers but were not in the active smoker category. Apart from that, in the health faculty environment, female smokers were still rare compared to male smokers.

The distribution of the relationship between class and intention to quit smoking is presented in the table below:

Table 6. Distribution of Frequency of the Relationship Between Gender and Intention to Quit Smoking in Active Smoking Health Students

No.	Gender	Intention to Quit Smoking						*p-value*
		Positive		Negative		Total		
		N	%	N	%	N	%	
1.	Man	28	46.7	32	53.3	60	100	0.925
2.	Woman	0	0	0	0	0	0	
Total		**28**	**46.7**	**32**	**53.3**	**60**	**100**	

Received: 01-06-2024, Accepted: 03-07-2024, Published Online: 01-08-2024

The results in Table 6 provide information regarding the relationship between respondents' characteristics based on gender and their intention to quit smoking among active smoking health students. It was found that the majority of smoking respondents in this study were male. Table 6 provides information that 53.3% or 32 male respondents had a poor intention to quit smoking. The analysis of the relationship indicated that the p-value for the relationship between gender and intention to quit smoking among smoking health students was 0.925 (p>α), meaning that the null hypothesis was rejected, indicating no relationship between gender and intention to quit smoking among smoking health students.

Based on the research findings, it was found that all respondents in this study were males. This aligns with the study by Andika (2018:47) on active smoking students at the University of Jember, where all respondents were males. The analysis of the relationship using Spearman's rho test indicated that the relationship between gender and intention to quit smoking among active smoking health students obtained a value of 0.925 (p>α). This implies that there is no relationship between gender and intention to quit smoking among active smoking health students.

The analysis results are consistent with the study conducted by Akmal et al. (2017:86), which showed that the majority of respondents were males, totaling 306 respondents or 93.9%, while females accounted for 20 respondents or 6.1%, with less intention to quit smoking. The statistical test result for the relationship between gender and intention to quit smoking was 0.453 (p>α), indicating no relationship between gender and intention to quit smoking.

d. Relationship between age and intention to quit smoking in active smoking health students

Age represents the lifespan of respondents from birth to the time of the study. Characteristics of respondents based on age are presented in the table below:

Table 7. Distribution of Respondents Based on Age

Age	Frequency	Percentage (%)
19 years old	5	8.3
20 years old	17	28.3
21 years old	22	36.7
22 years old	16	26.7
Total	**60**	**100**

Based on Table 7, it is known that the majority of smoking respondents were 21 years old, accounting for 36.7% or 22 respondents. Smoking respondents in this study fall into the late adolescence category especially, 19-24 years old.

The distribution of the relationship between class and intention to quit smoking is presented in the table below:

Table 8. Distribution of Frequency of the Relationship Between Age and Intention to Quit Smoking in Active Smoking Health Students

No.	Age	Intention to Quit Smoking						*p-value*
		Positive		Negative		Total		
		N	%	N	%	N	%	
1.	19 years old	3	5	2	3.31	5	8.31	0.673
2.	20 years old	6	10	11	18.32	17	28.32	
3.	21 years old	11	18.34	11	18.32	22	36.66	
4.	22 years old	8	13.35	8	13.35	16	26.7	
Total		**28**	**46.7**	**32**	**53.3**	**60**	**100**	

The results in Table 8 presented information regarding the relationship between respondents' characteristics based on age and their intention to quit smoking among active smoking health students. It was found that 18.32% or 11 respondents aged 20 and 21 had a poor intention to quit smoking among smoking health students. The analysis of the relationship indicated that the p-value for the relationship between respondents' age and intention to quit smoking among smoking health students was 0.673 (p>α), meaning that the null hypothesis was rejected, indicating no relationship between respondents' age and intention to quit smoking among smoking health students.

In this study, the age category revealed that the majority of respondents

Received: 01-06-2024, Accepted: 03-07-2024, Published Online: 01-08-2024

fell into the late adolescence category, which is 19-22 years old. Based on the research data obtained, it was found that most smoking respondents had a poor intention to quit smoking, especially among those aged 21. The analysis result of the relationship between age and intention to quit smoking showed a value of 0.673 (p>α). This implies that there is no relationship between age and intention to quit smoking among active smoking health students. The analysis results align with the findings of Akmal et al. (2017:1069), which showed an analysis value of 0.686 (p>α), indicating no relationship between respondents' age and intention to quit smoking.

While older age usually strengthens the intention to quit smoking, not everyone follows this pattern due to various factors influencing individuals' intention to quit smoking (Akmal et al. 2017:87). This statement contradicts the research findings, as even though older age does not necessarily indicate a stronger intention to quit smoking. This difficulty arises because respondents find it challenging to quit smoking due to addiction and the pleasure derived from smoking in relieving stress or pressure experienced by the respondents.

The Relationship between Self-Efficacy, which Includes Level, Strength, and Generality Dimensions, and Intention to Quit Smoking among Active Smoking Health Students

a. Relationship between level dimension and intention to quit smoking among active smoking health students

The Level Dimension refers to the degree of difficulty of tasks, work, and problems faced by respondents. This dimension describes the level of difficulty, tasks, and problems faced by respondents in their intention to quit smoking. Categories in the level dimension are divided into three categories: low, moderate, and high. The level dimension is considered low if it scores 4-8, moderate if it scores 9-13, and high if it scores 14-16. The distribution of frequency in the level dimension is presented in tabular form as follows:

Table 9. Distribution of Frequency Based on Level Dimension

Level Dimension	Frequency	Percentage (%)
Low	7	11.7
Currently	47	78.3
High	6	10
Total	60	100

The results in Table 9 provide information regarding the distribution of the level dimension among smoking respondents. It was found that 78.3% or 47 respondents had a moderate level dimension. Meanwhile, 11.7% or 7 respondents had a low level dimension, and 10% or 6 respondents had a high level dimension. Most respondents still doubted their ability to quit smoking.

Table 10. Distribution of Frequency of the Relationship Between Level Dimension and Intention to Quit Smoking among Active Smoking Health Students

No.	Level Dimension	Intention to Quit Smoking						*p-value*
		Positive		Negative		Total		
		N	%	N	%	N	%	
1.	Low	1	1.67	6	10	7	11.67	
2.	Currently	22	36.7	25	41.6	47	78.3	0.000
3.	High	5	8.33	1	1.7	6	10.03	
Total		**28**	**46.7**	**32**	**53.3**	**60**	**100**	

The results in Table 10 present information regarding the distribution of the relationship between the level dimension and the intention to quit smoking among active smoking health students. It was found that 41.6% or 25 smoking respondents with a moderate level dimension had a poor intention to quit smoking. The analysis of the relationship indicated that the p-value for the relationship between the level dimension and the intention to quit smoking among active smoking health students was 0.000 (p<α), meaning that the null hypothesis was accepted, indicating a relationship between the level dimension and the intention to quit smoking among active smoking health students.

Received: 01-06-2024, Accepted: 03-07-2024, Published Online: 01-08-2024

The relationship between the level dimension and the intention to quit smoking showed that most respondents with a moderate level dimension had a negative relationship with the intention to quit smoking. The analysis using Spearman's rho test showed a relationship between the level dimension and the intention to quit smoking with a value of p=0.000. This is because respondents' abilities can determine a behavior to build confidence in their intention to quit smoking.

According to Gwaltney et al. (cited in Shadel et al. 2017:01), self-efficacy can be used as smokers' belief in abstaining from smoking, belief in quitting smoking, and maintaining individual beliefs to quit smoking. The results of an experimental study conducted by Shadel et al. (2017:05) on the influence of self-efficacy on smoking cessation with 103 samples of adult smokers aged 18-63 years showed that 57 respondents had high self-efficacy, indicating a greater chance of quitting smoking compared to 46 respondents who still had a low chance of quitting smoking. A study conducted by Istifaizah (2017:87) showed a relationship between self-efficacy and intention to quit smoking in adolescent boys at SMK PGRI Sukodadi with a value of p=0.000.

The research results illustrate that adolescent boys with good self-efficacy tend to have a good intention to quit smoking, those with sufficient self-efficacy have an intention to quit smoking in the moderate category, while adolescents with low self-efficacy have an intention to quit smoking in the low category. According to Bandura (cited in Istifaizah, 2017:88), self-efficacy refers to an individual's belief in their ability to perform and organize a series of tasks in their life. Individuals need self-efficacy to remain competent and effective in facing various situations or events full of pressure.

b. Relationship between strength dimension and intention to quit smoking among active smoking health students

The Strength Dimension refers to the level of strength of individuals' beliefs or expectations about their ability (Ghufron, 2017:80). This dimension in the study describes the level of strength of respondents' beliefs in their intention to quit smoking. The strength dimension has three categories: low, moderate, and high. The strength dimension is considered low if it scores 4-8, moderate if it scores 9-13, and high if it scores 14-16. The distribution of frequency in the strength dimension is presented in tabular form as follows:

Table 11. Distribution of Frequency Based on Strength Dimension

Strength Dimension	Frequency	Percentage (%)
Low	3	5
Currently	48	80
High	9	15
Total	**60**	**100**

The results in Table 11 presented information regarding the distribution frequency of the strength dimension among smoking respondents. It showed that 80% or 48 respondents had a moderate strength dimension. Meanwhile, 5% or 3 respondents had a low strength dimension, and 15%, or 9 respondents had a high strength dimension. The determination of respondents regarding their belief to quit smoking mostly fell into the moderate category or were indecisive.

Table 12. Distribution of Frequency of the Relationship Between Strength Dimension and Intention to Quit Smoking among Active Smoking Health Students

No.	Strength Dimension	Intention to Quit Smoking						*p-value*
		Positive		Negative		Total		
		N	%	N	%	N	%	
1.	Low	0	0	3	5	3	5	
2.	Currently	20	33.35	28	46.63	48	79.98	0.000
3.	High	8	13.35	1	1.67	9	15.02	
Total		**28**	**46.7**	**32**	**53.3**	**60**	**100**	

The results in Table 12 presented information regarding the distribution frequency of the relationship between the strength dimension and the intention to quit smoking among active smoking health students. It was found that 46.63% or 28

Received: 01-06-2024, Accepted: 03-07-2024, Published Online: 01-08-2024

smoking respondents with a moderate strength dimension had a poor intention to quit smoking. The analysis of the relationship indicated that the p-value for the relationship between the strength dimension and the intention to quit smoking among active smoking health students was 0.000 (p<α), meaning that the null hypothesis was accepted, indicating a relationship between the strength dimension and the intention to quit smoking among active smoking health students.

This study indicated that most respondents with a moderate strength dimension had a negative relationship with the intention to quit smoking. The analysis using Spearman's rho test showed a relationship between the strength dimension and the intention to quit smoking with a value of p=0.000. According to Bandura, the strength dimension is related to the degree of individual ability to their belief (Jumari et al. 2013:4).

Borreli & Mermelstein (cited in Ham et al. 2009:16) stated that self-efficacy was one of the predictors to explore in smoking cessation behavior. The research results of Ham et al (2009:21) showed that self-efficacy played a role in smoking cessation programs. According to Amaliah et al. (2018:140), there was a strong positive correlation between the willingness to quit smoking in terms of self-efficacy and smoking cessation efforts. The higher the self-efficacy of individuals to quit smoking, the greater the likelihood of someone successfully quitting smoking. Meanwhile, individuals with low self-efficacy would return to smoking or become addicted again. The study conducted by Amalia et al. (2018:146) discussed the analysis of the self-efficacy formation stage in smoking cessation efforts among smoking cessation clinic clients, providing information that informants still found it difficult to quit smoking because it required a long process. The informants already felt addicted, making it difficult to change their behavior.

c. Relationship between generality dimension and intention to quit smoking among active smoking health students

The Generality Dimension refers to the breadth of behavioral domains in which individuals felt confident about their abilities. Simply put, this dimension described individuals' confidence in their ability to face various situations and events they encountered. This dimension in this study described smoking respondents' confidence in facing the intention to quit smoking. The generality dimension had three categories: low, moderate, and high. The generality dimension was considered low if it scored 3-6, moderate if it scored 7-10, and high if it scored 11-12. The distribution of frequency in the generality dimension was presented in tabular form as follows:

Table 13. Distribution of Frequency Based on Generality Dimension

Generality Dimension	Frequency	Percentage (%)
Low	3	5
Currently	36	60
High	21	35
Total	**60**	**100**

The results in Table 13 presented information regarding the distribution frequency of the generality dimension among smoking respondents. It showed that 36% or 60 respondents had a moderate generality dimension. Meanwhile, 5% or 3 respondents had a low generality dimension, and 35% or 21 respondents had a high generality dimension. Most respondents' confidence levels were still indecisive in their efforts to quit smoking.

Table 14. Distribution of Frequency of the Relationship Between Generality Dimension and Intention to Quit Smoking among Active Smoking Health Students

No.	Generality Dimension	Intention to Quit Smoking						*p-value*
		Positive		Negative		Total		
		N	%	N	%	N	%	
1.	Low	1	1.67	2	3.8	3	5.47	
2.	Currently	14	23.35	22	36.6	36	59.95	0.009
3.	High	13	21.68	8	13.3	21	34.98	
Total		**28**	**46.7**	**32**	**53.3**	**60**	**100**	

Received: 01-06-2024, Accepted: 03-07-2024, Published Online: 01-08-2024

The results in Table 14 presented information regarding the distribution frequency of the relationship between the generality dimension and the intention to quit smoking among active smoking health students. It was found that 36.6% or 22 smoking respondents with a moderate generality dimension had a poor intention to quit smoking. The analysis of the relationship indicated that the p-value for the relationship between the generality dimension and the intention to quit smoking among active smoking health students was 0.009 ($p<\alpha$), meaning that the null hypothesis was accepted, indicating a relationship between the generality dimension and the intention to quit smoking among active smoking health students.

There were three (3) aspects of the self-efficacy dimension, one of which was the generality dimension. The research results of the relationship between the generality dimension and the intention to quit smoking indicated that the moderate generality dimension was negatively related to the intention to quit smoking. The analysis using Spearman's rho test showed a relationship between the generality dimension and the intention to quit smoking with a value of p=0.009.

Bandura (cited in Shadel et al. 2017:02) stated that self-efficacy played a central role in human behavior. The analysis conducted by Ham et al (2009:18) on the process of behavior change had a significant relationship with self-efficacy. The process of individual behavior change would affect individuals in making decisions. King et al. (cited in Ham et al. 2009:21) stated that the impact of decision-making balance in the stage of the behavior change process could be mediated through self-efficacy.

Self-efficacy could affect an individual's success in controlling their health (Nurjanah et al. 2017:119). Individuals with high self-efficacy would be more capable of controlling their health. They would be more able to control their health and trust more in their ability to maintain control of their behavior. According to Etter et al. (cited in Nurjanah et al. 2017:119), self-efficacy could be used as a predictor of success in smoking cessation programs. The higher the self-efficacy of individuals to quit smoking, the greater the likelihood of individuals successfully quitting smoking. Additionally, self-efficacy could play a role in building individuals' beliefs in their ability to quit smoking, manifested through a series of behaviors through several sources of self-efficacy formation (Nurjanah et al. 2017:120).

Intention to Quit Smoking

Intention is an indication of an individual's readiness to engage in a particular behavior. In this study, intention describes the indication that arises within smoking respondents to make efforts to quit smoking. Intention has two categories: good and bad. Intention is considered positive if it scores > 3 and negative if it scores ≤ 3. The distribution frequency results of intentions are presented in tabular form as follows:

Table 15. Distribution of Frequency of Intention to Quit Smoking

Intention	Frequency	Percentage (%)
Positive	28	46.7
Negative	32	53.3
Total	**60**	**100**

The results of Table 15 presented information regarding the distribution frequency of intentions to quit smoking among smoking respondents. There were 53.3% or 32 respondents who had a negative intention to quit smoking, while 46.7% or 28 respondents had a positive intention to quit smoking.

The intention was an indication of an individual's readiness to engage in a particular behavior, based on attitudes toward the behavior, subjective norms, and perceived behavioral control (Kholid, 2014:42). Quitting smoking intention was interpreted as a strong individual desire to stop smoking habit consciously (Akmal et al. 2017:81). The research results found that 32 respondents (53.3%) had a negative intention. This result was not far from the previous study by Andika (2018:50) on active smoking university students at Jember University, where 64.1% or 41 respondents had a bad intention to quit smoking.

An individual's success in their efforts to not smoke was determined by the extent of their intention to quit smoking. A firm intention to quit smoking entirely strengthened smokers to control

Received: 01-06-2024, Accepted: 03-07-2024, Published Online: 01-08-2024

their behavior in any situation while engaging in smoking activities (Rosita, 2012:8). Several components of the Theory of Planned Behavior (TPB) had a significant relationship with the intention to quit smoking, namely attitudes and subjective norms (Droomers et al. 2004:197). Generally, more favorable attitudes toward smoking cessation were associated with quitting smoking. This statement contradicted the existing facts; most respondents still found it difficult to control their behavior in any condition or situation while engaging in smoking activities.

CONCLUSION

Most of the smoking health students at Jember University originated from the Faculty of Nursing at 30%, the majority of smoking student cohorts came from the 2016 cohort at 58.3%, all smoking students were male at 100%, and the age of smoking students was mostly found at the age of 21 at 36.7%. The frequency distribution results of the level dimension found that most smoking health students had a moderate level dimension at 78.3%. The frequency distribution results of the strength dimension found that most smoking students had a moderate strength dimension at 80%. The frequency distribution results of the generality dimension found that most respondents had a moderate generality dimension at 60%. The frequency distribution results of the intention to quit smoking found that most smoking students had a negative intention to quit smoking at 53.3%.

The characteristic variables of smoking health students based on faculty, cohort, gender, and age had no significant relationship with the intention to quit smoking among smoking health students. The level dimension variable had a significant relationship with the intention to quit smoking among smoking health students. The strength dimension variable had a significant relationship with the intention to quit smoking among smoking health students. The generality dimension variable had a significant relationship with the intention to quit smoking among smoking health students.

REFERENCES

Aditama, T. Y. 2013. *Generasi Muda Sehat, Generasi Tanpa Rokok*. Jakarta: Pusat Komunikasi Publik Seketariat Jenderal Kementerian Kesehatan RI. [Serial Online] http://www.depkes.go.id/index.php?vw=2&id=2316 [16Juli 2019].

Aditomo, A., & Sofia, R. 2004. Perfeksionisme, Harga Diri, Dan Kecenderungan Depresi Pada Remaja Akhir. *Jurnal Psikologi Universitas Gajah Mada*. Volume 31, No. 1. Hal : 1-14 [Serial Online] https://jurnal.ugm.ac.id/jpsi/article/view/7033 [7 Oktober 2019].

Ajzen, I. 2005. *Attitudes, Personality, and Behavior (2nd edition)*. UK: Open University Press-McGraw Hill Education.

Akmal, D., Bagoes, W., Priyadi, N. 2017. Sikap Mempengaruhi Nat Berhenti Merokok Pada Remaja SMA di Kota Bima. *Jurnal Promosi Kesehatan Indonesia*. Volume 12, No.1 Hal 78-91[Serial Online] https://ejournal.undip.ac.id/index.php/jpki/article/viewFile/18032/12732 [16 Juli 2019].

Amalia, R., Bagoes, W., Sutopo, N.J. 2018. Studi Analisis Tahap Pembentuka Efikasi Diri Dalam Upaya Berhenti Merokok Pada Klinik Berhenti Merokok Di Balkesmas Wilayah Semarang. Jurnal Al-Sihah: *Public Health Science Journal*. Volume 10 No. 2. Hal 137-147. [Serial Online] http://journal.uin-alauddin.ac.id/index.php/Al-Sihah/article/view/6052 [6 Maret 2020].

Ambarwati., Ayu, K.U., Fifit, K., Tika, D.K., & Saroh, D. 2014. Media Leaflet, Video dan Pengetahuan Siswa SD Tentang Bahaya Merokok (Studi Pada Siswa SDN 78 Sabrang Lor Mojosongo Surakarta). *Jurnal KEMAS*. Volume 10. Hal 7-13. [Serial Online] http://journal.unnes.ac.id/nju/index.php/kemas [19 Juli 2019].

Andika, A.R. 2018. Peran Peer Group Dengan Niat Untuk Berhenti Merokok Pada Mahasiswa Perokok (Studi Kuantitatif Pada Mahasiswa Universitas Jember). *Skripsi*. Jember: Fakultas Kesehatan Masyarakat Universitas Jember.

Antasari, R., Husni, A.G & Ni'mal, B. 2016. *Self Efficacy* Guru Bimbingan dan

Received: 01-06-2024, Accepted: 03-07-2024, Published Online: 01-08-2024

Konseling Dalam Upaya Pencegahan HIV&AIDS di Tingkat SMA Sederajat Kabupaten Jember. *Artikel Ilmiah Hasil Penelitian Mahasiswa*. Hal 1-7. [Serial Online]. https://repository.unej.ac.id/handle/123456789/79006 [20 Desember 2019.

Ardelia, V., & Dewi, T. K. 2018. Intensi Berhenti Merokok pada Wanita Emerging Adult Ditinjau dari Prediktor *Theory of Planned Behavior*. *INSAN Jurnal Psikologi dan Kesehatan Mental*. Volume 2 No.2. Hal 111-119. [Serial Online] https://e-journal.unair.ac.id/JPKM/article/view/6351 [15 Maret 2020].

Aula, L.E. 2010. *Stop Merokok! Sekarang atau Tidak Sama Sekali*. Bandung: Garailmu.

Ayuwuragil, K. 2018. *Jumlah Perokok Muda Masih Tinggi*. [Serial Online] https://www.cnnindonesia.com/gaya-hidup/20180905184752-255-327955/jumlah-perokok-muda-masih-tinggi [23 Juli 2019]

Badan Litbangkes Kementerian Kesehatan RI. 2015. *Perilaku Beresiko Kesehatan Pada Pelajar SMP dan SMA di Indonesia*. Puslitbang Upaya Kesehatan Masyarakat : Jakarta. [Serial Online] https://www.who.int/ncds/surveillance/gshs/GSHS_2015_Indonesia_Report_Bahasa.pdf [5 Oktober 2019].

Badan Penelitian dan Pengembangan Kesehatan. 2018. *Riset Kesehatan Dasar 2018*. Jakarta: Badan Penelitian dan Pengembangan Kementerian KesehatanRepublik Indonesia.

Badan Penelitian dan Pengembangan Kesehatan. 2013. *Riset Kesehatan Dasar 2013*. Jakarta: Badan Penelitian dan Pengembangan Kementerian Kesehatan Republik Indonesia. [Serial Online] http://www.depkes.go.id/resources/download/general/Hasil%20Riskesdas%202013.pdf

Badan Pusat Statistik. 2018. *Statistik Indonesia 2018*. Jakarta: Badan Pusat Statistik Indonesia. [Serial Online] https://www.bps.go.id/publication/2018/07/03/5a963c1ea9b0fed6497d0845/statistik-indonesia-2018.

Badan Pusat Statistik. 2017. *Statistik Indonesia 2017*. Jakarta: Badan Pusat Statistik Indonesia. [Serial Online] https://www.bps.go.id/publication/2017/07/26/b598fa587f5112432533a656/statistik-indonesia-2017.html.

Droomers, M., Schrijvers, C. T., & Mackenbach, J. P. (2004). Educational differences in the intention to stop smoking: explanations based on the Theory of Planned Behaviour. *The European Journal of Public Health*, *14*(2), 194-198. [Serial Online] https://academic.oup.com/eurpub/article-pdf/14/2/194/8201788/140194.pdf [23 Maret 2020].

Effendi, J. 2014 Faktor-Faktor Psikologis Yang Mempengaruhi Intensi Membeli Produk Fashion Tiruan. *Skripsi*. Jakarta: Fakultas Psikologi Universitas Islam Negeri Syarif Hidayatullah.

Fikriyah, S., & Febrijanto, Y. 2012. Faktor-Faktor Yang Mempengaruhi PerilakuMerokok Pada Mahasiswa Laki-Laki Di Asrama Putra. *Jurnal STIKES*. Volume 5 No.1. Hal 99-109. [SerialOnline] http://puslit2.petra.ac.id/ejournal/index.php/stikes/article/download/18472/1 8286 [20 Juli 2019].

Fitria., R.I.N.K Retno, T., Jubhar C.M., Ferry F.K. 2013. Merokok dan Oksidasi DNA. *Jurnal Sains Medika*. Volume 5 No. 2. Hal 113-120. [Serial Online] http://jurnal.unissula.ac.id/index.php/sainsmedika/article/view/352 [24 Juli 2019].

Ghufron, M. N., & Rini, R.S. 2017. *Teori-Teori Psikologi*. Yogyakarta: AR- RUZZ MEDIA.

Ham, O. K., & Yoo, J. B. (2009). Mediating effects of self-efficacy in the transtheoretical model among adolescent male smokers in Korea. *Asian nursing research*. *3*(1), 15-23.[Serial Online] https://www.sciencedirect.com/science/article/pii/S1976131709600128/pdf?md5=dc10784119de130a3690ca1f2e48d53e&pid=1-s2.0-S1976131709600128-main.pdf&_valck=1 [22 Maret 2020].

Haryati, W., Asnawi A., Bakhtiar. 2015. *Self Efficacy* dan Perilaku Merokok Remaja. *Jurnal Ilmu Keperawatan*. [Serial Online] http://www.jurnal.unsyiah.ac.id/JIK/article/view/5309 [24 Juli 2019]. ISN:2338-6371.

Irianto, K. 2014. *Seksologi Kesehatan*. Bandung: Alfabeta.

Istifaizah, N. 2017. Hubungan Antara

Received: 01-06-2024, Accepted: 03-07-2024, Published Online: 01-08-2024

Sikap, Norma Subyektif, Persepsi dan Self Efficacy Dengan Intensi Berhenti Merokok Pada Remaja Putra Di SMK PGRI SUKODADI. *Skripsi*. Surabaya: Fakultas Keperawatan Universitas Airlangga.

Janatin, M. 2015. Hubungan Antara Self Efficacy dengan Prestasi Belajar Siswa Kelas IV SD Se-Gugus II Kecamatan Bantul Tahun Ajaran 2014/2015. *Skripsi*. Yogyakarta : Pendidikan Pra Sekolah dan Sekolah Dasar Fakultas Ilmu Pendidikan Universitas Negeri Yogyakarta.

Jumari, Md., Yudana, IGK., A. Sunu. 2013. Pengaruh Budaya Organisasi, Efikasi Diri dan Kepuasan Kerja terhadap Kinerja Mengajar Guru SMK Negeri Kecamatan Denpasar Selatan. Jurnal Administrasi Pendidikan Indonesia. Volume 4 No. 1. Hal 1-13. [Serial Online] http://oldpasca.undiksha.ac.id/e-journal/index.php/jurnal_ap/article/view/633 [6 Maret 2020]

Kementerian Kesehatan Republik Indonesia. 2015. *Iniliah 4 Bahaya Merokok Bagi Kesehatan Tubuh*. Jakarta: Biro Komunikasi dan Pelayanan MasyarakatKementerian RI. [Serial Online] https://www.depkes.go.id/development/site/depkes/pdf.php?id=115112500015

Kementerian Kesehatan Republik Indonesia. 2017. *Hidup Sehat Tanpa Rokok*. Jakarta: Direktorat Pencegahan dan Pengendalian Penyakit Tidak Menular. [Serial Online] http://p2ptm.kemkes.go.id/uploads/VHcrbkVobjRzUDN3UCs4eUJ0dVBndz09/2017/11/Hidup_Sehat_Tanpa_Rokok.pdf

Kholid, A. 2014. *Promosi Kesehatan Dengan Pendekatan Teori Perilaku, Media dan Aplikasinya untuk Mahasiswa dan Praktisi Kesehatan*. Jakarta:Rajawali Press.

Komasari, D., & Avin, F. H. 2000. Faktor-Faktor Penyebab Perilaku Merokok Pada Remaja. *Jurnal Psikologi*. Volume 27, No. 1. Hal 37-47. [Serial Online] https://jurnal.ugm.ac.id/jpsi/article/view/7008/5460 [7 Oktober 2019].

Latif, A. 2015. Gambaran Pengetahuan, Perhatian, dan Sikap Mahasiswa Terhadap Media Promosi Kesehatan Berupa Gambar Di Kemasan Rokok Pada Perokok (Studi Kuantitatif Pada Mahasiswa Universitas Jember). *Skripsi*. Jember: Fakultas Kesehatan Masyarakat Universitas Jember.

Mahyarni. 2013. Theory of Reasoned Action Dan Theory of Planned Behaviour (Sebuah Kajian Historis Tentang Perilaku). *Jurnal EL-RIYASAH*. Volume 4 No. 1. Hal 13-23. [Serial Online] http://ejournal.uin-suska.ac.id/index.php/elriyasah/article/view/17 [1 Agustus 2019].

Martinez, E., Tatum, K. L., Glass, M., Bernath, A., Ferris, D., Reynolds, P., & Schnoll, R. A. (2010). Correlates of smoking cessation self-efficacy in a community sample of smokers. *Addictive behaviors*, *35*(2), 175-178. [Serial Online] https://www.ncbi.nlm.nih.gov/pmc/articles/PMC2783543/ [20 Maret 2020].

Meilani, P. 2017. Merokok Di Kalangan Mahasiswa (Studi Kasus Fakultas Kedokteran Universitas Riau). *Jurnal JOM FISIP*. Volume 4 No. 2.[Serial Online] https://jom.unri.ac.id/index.php/JOMFSIP/article/view/14544 [25 Juli 2019].

Meilinda, E. 2013. Hubungan antara Penerimaan Diri dan Konformitas terhadap Intensi Merokok pada Remaja di SMK Istiqomah Muhammadiyah 4 Samarinda. *Jurnal Psikologi*. Volume 1 No. 1 Hal 9-22. [Serial Online] http://ejournal.psikologi.fisip-unmul.ac.id/site/wp content/uploads/2013/03/JURNAL%20SKRIPSI%20(03-04-13-09-41-16).pdf [16 Maret 2020].

Munir, M, 2019. Gambaran Perilaku Merokok Pada Remaja Laki-Laki. *Jurnal Kesehatan*. Volume 12 No. 2. Hal: 112-119. [Serial Online] http://journal.uinalauddin.ac.id/index.php/kesehatan/article/download/10553/7403 [20 Desember 2019].

Nasution, I.K. 2007. Perilaku Merokok Pada Remaja. *Skripsi*. Medan: Program Studi Psikologi Fakultas Kedokteran Universitas Sumatra Utara.

Nopianto, & Agus, A. 2017. Determinan Perilaku Merokok Pada Remaja. *JournalEndurance*. Volume 2 No.1. Hal 25-30. [Serial Online] https://ejournal.kopertis10.or.id/index.php/endurance/article/view/1372 [26 Juli 2019].

Notoatmodjo, S. 2018. *Metodologi*

Received: 01-06-2024, Accepted: 03-07-2024, Published Online: 01-08-2024

Penelitian Kesehatan. Jakarta: Rineka Cipta. Nugraha, Mimbar Adi. 2015. *Bahaya Merokok Untuk Usia Remaja*. [Serial Online] http://www.stikes-bth.ac.id/berita-185_bahaya-merokok-untuk-usia-remaja.html [14 Juni 2017].

Nur'artavia, M., R. 2017. Karakteristik Pelajar Penyalahgunaan NAPZA Dan Jenis NAPZA Yang Digunakan Di Kota Surabaya. *The Indonesian Journal of Public Health*. Volume 12, No.1. Hal : 1-12. [Serial Online] https://e-journal.unair.ac.id/IJPH/article/view/7110 [7 Oktober 2019].

Nurjanah, N., & Rina, R. 2018. Hubungan Antara Health Locus of Control dan Self-Efficacy Pada Mahasiswa Keperawatan. *Schema (Journal of Psychological Research)*. Hal 116-117. [Serial Online] https://ejournal.unisba.ac.id/index.php/schema/article/view/3388 [25 Juli 2019].

Presiden Republik Indonesia. 2012. *Peraturan Pemerintah Republik Indonesia Nomor 109 Tahun 2012 Tentang Pengamanan Bahan yang Mengandung Zat Adiktif Berupa Produk Tembakau bagi Kesehatan*. https://peraturan.bpk.go.id/Home/Details/5324/pp-no-109-tahun-2012 [29 Juli 2019].

Putri, N.P.U. 2017. Persepsi Perokok Surabaya Terhadap Pesan Iklan Layanan Masyarakat Mengenai Bahaya Merokok. *Jurnal Promkes*. Volume 5, No. 2. Hal: 205-216. [Serial Online] https://e-journal.unair.ac.id/PROMKES/article/view/7741/4585

Putro, K.Z. 2017. Memahami Ciri dan Tugas Perkembangan Masa Remaja. *APLIKASIA: Jurnal Aplikasi Ilmu-Ilmu Agama*. Volume 17 No. 1. Hal 25-32. [Serial Online] http://ejournal.uin-suka.ac.id/pusat/aplikasia/article/view/1362 [27 Juli 2019].

Rachmat, M., Ridwan, M.T., Muhammad, S. 2013. Perilaku Merokok Remaja Sekolah Menengah Pertama. *Jurnal Kesehatan Masyarakat Nasional*. Volume 7 No. 11. Hal 502-508. [Serial Online] http://journal.fkm.ui.ac.id/index.php/kesmas/article/view/363 [24 Juli 2019].

Rahayu, P. 2017. Hubungan Antara Pengetahuan Bahaya Merokok Dengan Perilaku Merokok Pada Mahasiswa Di Universitas Muhammadiyah Surakarta. *Skripsi*. Surakarta : Fakultas Ilmu Kesehatan Universitas Muhammadiyah Surakarta.

Ramdhani, N. 2011. Penyusunan Alat Pengukur Berbasis Theory of Planned Behaviour. *Buletin Psikologi*. Volume 19 No. 2. Hal 55-69. [Serial Online] https://jurnal.ugm.ac.id/buletinpsikologi/article/view/11557 [1 Agustus 2019].

Ramopoly, I. H., Astuti, K., & Fatmah, S. N. 2015. Latihan Kontrol Diri Untuk Penurunan Perilaku Merokok Pada Perokok Ringan. *Insight: Jurnal Ilmiah Psikologi*. Volume 17 No.2. Hal 109-117. [Serial Online] http://ejurnal.mercubuanayogya.ac.id/index.php/psikologi/article/view/689/ 466 [16 Maret 2020]

Rokhmah, D., Nafikadini, I. & Istiaji, E., 2014. Metode Penelitian Kualitatif. Jember: Jember University Press.

Rokhmah, D., Rahman, M., A., and Rif'ah, E.N. 2023. "Santri Smoking Behavior Determinant At 'X'Islamic Boarding School in Jember Regency." Jurnal Promkes: The Indonesian Journal of Health Promotion and Health Education 1-10: 5-24. https://ejournal.unair.ac.id/PROMKES/article/view/32438

Rokhmah, D., Ode, T., A., andSavitri, L., I. 2020. "Hubungan Antara Jumlah Anak Lahir Hidup, Keguguran, Aborsi, Ims, Narkoba, Dan Seks Bebas Dengan Perilaku Merokok Pada Wanita Usia Subur (Berdasarkan Data SDKI 2017)". Prosiding Forum Ilmiah Tahunan (FIT) Ikatan Ahli Kesehatan Masyarakat Indonesia (IAKMI). http://jurnal.iakmi.id/index.php/FITIAKMI

Rosita, R., Dwi Linna, S., Zaenal, A. 2012. Penentu Keberhasilan Berhenti Merokok Pada Mahasiswa. *Jurnal KEMAS*. Volume 8. Hal 1-8. [Serial Online] https://journal.unnes.ac.id/nju/index.php/kemas/article/view/2252 [28 Juli 2019].

Salawati, T., & Rizki, A, 2010. Perilaku Merokok di Kalangan Mahasiswa Universitas Muhammadiyah Semarang. Prosiding Seminar Nasional Unimus. Hal 172-180. ISBN: 978.979.704.883.9.[SerialOnline] https://jurnal.unimus.ac.id/index.php/psn12012010/article/view/70 [7

Received: 01-06-2024, Accepted: 03-07-2024, Published Online: 01-08-2024

Maret 2020].

Shadel, W. G., Martino, S. C., Setodji, C., Cervone, D., & Witkiewitz, K. (2017). Does self-efficacy causally influence initial smoking cessation? An experimental study. *Addictive behaviors*. Volume 73. Hal 199-203. [Serial Online] https://www.ncbi.nlm.nih.gov/pmc/articles/PMC5523406/ [21 Maret 2020].

Setiyani, E. 2011. Rokok Menyebabkan Gangguan Kehamilan dan Kegagalan Janin ?. https://www.ibudanbalita.com/forum/diskusi/Rokok-Menyebabkan-Gangguan-Kehamilan-dan-Kegagalan-Janin. [28 Juli 2019].

Simanjuntak, C.E., Rahel, M.S., & Aditya, P.H. 2019. Gambaran Self Efficacy Pada Mahasiswa Psikologi Universitas HKBP Nommensen Medan. Jurnal Psikologi Universitas HKBP Nommensen. [Serial Online] https://jurnal.uhn.ac.id/index.php/psikologi/article/view/99 [25 Desember 2019].

Sinuhaji, E. P., Pangestuti, E., & Irawan, A. 2018. Pengaruh Lingkungan Keluarga Dan *Peer Group* Terhadap Perilaku Konsumsi Rokok (Survei Pada Perokok Kategori Remaja Di Kecamatan Lowokwaru Kota Malang). *Jurnal Administrasi Bisnis*. Volume 65 No.1 Hal 102-110. [Serial Online]http://administrasibisnis.studentjournal.ub.ac.id/index.php/jab/article/viewFile/2767/3157 [16 Maret 2020].

Sugiyono. 2016. *Metode Penelitian Kuantitatif Kualitatif dan R&D*. Bandung: Alfabeta.

Sugiyono. 2014. *Statistik untuk Penelitian*. Bandung: Alfabeta.

Suyasa, I Nyoman G., & Santhi, Desak G.D.H, 2018. Efektifitas Tulisan dan Gambar Peringatan Kesehatan Pada Produk Rokok Terhadap Kesadaran Merokok di Kabupaten Badung, Bali 2015. Intisari Sains Medis. Volume 9 Nomor: 1 Hal 19-24. [Serial Online] https://isainsmedis.id/index.php/ism/article/viewFile/148/164 [30 Mei 2020].

Tondang, Y. 2018. INFOGRAFIS : Faktor Seputar Konsumsi Rokok & Tembakau di Dunia. [Serial Online] https://www.rappler.com/indonesia/gaya-hidup/203786-infografis-fakta-seputar-konsumsi-rokok-dan-tembakau-di-dunia.

Trisnowati, H., Susianti., Siti, N. 2017. Gambaran Pemodelan Perilaku Merokok Remaja (Studi Pada Mahasiswa Kesehatan di Yogyakarta). *Jurnal Media Respati*. Volume 12.Hal 113-120. [Serial Online] https://www.researchgate.net/publication/316738345_Gambaran_Pemodelan_Perilaku_Merokok_Remaja_Studi_Pada_Mahasiswa_Kesehatan_di_Yogyakarta [01 Oktober 2019].

Tristanti, I. 2016. Remaja Dan Perilaku Merokok. *Publikasi Ilmiah UMS*. Hal 328-342. [Serial Online] https://publikasiilmiah.ums.ac.id/handle/11617/6772?show=full [25 Juli 2019].

Yusuf, M. 2014. *Metode Penelitian Kuantitatif, Kualitatif & Penelitian Gabungan*. Jakarta: PRENADA MEDIA GROUP.

Wahyudi., Risna, A. 2019. Hubungan Antara Perilaku Merokok Terhadap Prestasi Belajar Mahaiswa Fakultas Teknik Sipil Muhammadiyah Makassar Angkatan 2016. Jurnal Ilmiah Kesehatan Iqra. Volume 7 No. 1. Hal 1-15. [Serial Online] https://stikesmu-sidrap.e-journal.id/JIKI/article/view/116 [7 Maret 2020].

World Health Organization. 2018. *World Health Statistics 2018 Monitoring Health For The SDGs*. Geneva : Wolrd Health Organization. [Serial Online] https://www.who.int/data/gho/data/themes/topics/topic-details/GHO/world- health-statistics

Wulan, D. K. 2012. Faktor psikologis yang mempengaruhi perilaku merokok pada remaja. *Jurnal Humaniora*. Volume *3* No.2. Hal 504-511. [Serial Online] http://202.58.182.161/index.php/Humaniora/article/view/3355 [16 Maret 2020].

Received: 01-06-2024, Accepted: 03-07-2024, Published Online: 01-08-2024