



SELF IDENTITY IN WOMEN SMOKERS – A PHENOMENOLOGICAL STUDY IN YOUNG ADULT WOMEN

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Abstract:

The process of forming self-identity occurs from childhood to adulthood. The individual's ability to go through a crisis in his life will determine the achievement of identity and form a commitment to the next life. The main objective of this research is to understand the process of self-identity formation in female smokers ; the other objectives are to describe the influencing factors and to see how the subject sees himself in living his nature as a woman. Subjects amounted to 3 people with characteristics of young adult women (20-30 years) and active smokers for at least 3 years. The research method used is qualitative with a phenomenological approach and data analysis of DFI (Description of Individual Phenomena). The data collection method used was in-depth interviews. Based on the results of the study, the process of forming the identity of the three subjects began when they entered childhood, where parenting had a very big influence. During adolescence, personal and environmental factors have a significant effect and during adulthood, personal factors play the most important role in determining decisions. There are differences in the attainment of identity status experienced by the three subjects. Both subjects reached the identity achievement stage when they were adults. Meanwhile, one of the subjects was still completing the identity moratorium stage when he was an adult.

Keywords: self-identity, female smoker

1. Introduction

Smoking is an activity that is familiar to us in everyday people's life, especially by men. Based on Risesdas 2013 data, the number of active smokers in Indonesia continues to increase every year. The current average proportion of smokers in Indonesia is 29.3%.

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The increase in the number of cigarette consumption is not only dominated by men, but women also contribute to the increase in cigarette consumption.

Emancipation is a risk from the increasingly modern times. The facts show that today many women make smoking a trend. They feel that smoking is part of their lifestyle. It becomes less awkward when we see the sight of many women smoking in the open. This is really very worrying, but this is the reality that happens to women in this era (Sianipar, 2012). The number of female smokers in Indonesia in recent years has increased. In 2007, based on Risesdas data, the number of female smokers reached 5.2%, while in 2013 it increased to 6.7% (Herman, 2015).

Several female smokers indicated that 80% in general started from curiosity or want to experiment to become addicted to smoking, 10% due to the persuasion of close friends, 10% environmental and family factors (Beverly, 2013). The results of a survey conducted by KuIs (Coalition for Healthy Indonesia) explained that 88.78% of the 3040 female junior high school students to female students (13-25 years) in Indonesia smoke. They consume 1-10 sticks in their lifetime. Research reveals as many as 54.59% of adolescents and women smoke with the aim of reducing tension and stress. Others reasoned to relax by 29.36%, smoking as did men by 12.84%, friendship by 2.29%, and to be accepted into the group by 0.92%. Most of the young women saw cigarette advertisements on television at 92.86% and posters by 70.63%. As many as 70% of adolescents and women also admit to seeing cigarette promotions at music performances, sports and social activities. As many as 10.22% of women aged 13-15 years and 14.53% of women aged 15-16 years have been offered free cigarette samples (Karyadi, 2009).

In addition, based on the results of a study conducted by Brahmana (2009), there are several factors that influence young women to smoke. The influence of peer groups and the desire to be accepted into the group is the main reason young women smoke. The existence of a significant model to emulate, especially parents, is also quite large in influencing women's decisions to smoke. In addition, other factors are influenced by a strong sense of curiosity to experiment and see advertisements in the mass media.

From the results of research conducted by Inga Cecile Soerheim, M.D and his team from the Channing Laboratory, Brigham and Women's Hospital and the University of Bergen, Norway (Eka, 2012), it is indicated that female smokers have a greater risk of lung disease than male smokers. Anatomically, women have other risks due to smoking, including cervical cancer and osteoporosis. Scientists found a concentration of carcinogens (substances that have radiation properties) from cigarette smoke in the mucus in the cervix of women. It is estimated that this condition causes two things, namely damaging cervical cells so that they can develop into cancer and lowering the woman's immune system so that the papilloma virus can live and cause infection in this area. According to health experts, every cigarette smoked must contain nicotine and tar. The content of these substances triggers cancer cells to grow actively. For women who smoke, cigarette tar directly stimulates the growth of cervical cancer cells.

In addition, women who smoke are also very susceptible to breast cancer. Researchers from the National Cancer Center, Tokyo Japan (Norma, 2013) estimate that higher estrogen levels in the body of premenopausal women and outside cancer-causing

agents, such as tobacco, work together and fuel the development of breast cancer. The study was conducted on 22,000 women in Japan aged 40-59 years. 5.7% were smokers, 1.7% were former smokers, and 92.6% had never smoked. Of those who have never smoked, 69% live or frequently live in smoke-filled environments. It turns out that from observations it is known that compared to nonsmokers who are not frequently exposed to cigarette smoke, women who have smoked and are about to enter menopause are three times more likely to develop breast cancer. This increased risk of developing breast cancer in former smokers was not found in postmenopausal women. Meanwhile, premenopausal women, who had never smoked before but were frequently exposed to secondhand smoke, had a 2.6-fold risk of developing breast cancer.

Smoking among women has very dangerous effects, especially on the reproductive system because women are the successors of the offspring. Women's health is a matter that plays a role in every aspect of human life, starting from the smallest scope, namely when going into a family. The reproductive system is very susceptible to disease and problems; therefore, it needs special attention to maintain its health. Women who smoke are at risk of becoming infertile (sterile) and possibly menopausal earlier. In addition, women who smoke are also prone to cervical cancer, high blood pressure, heart disease, and the risk of giving birth to deformed babies (Riskesdas 2007, WHO 2008).

Cigarettes are very dangerous for women, especially for those who are pregnant (Subianto, 2011). The results showed that women who smoke during pregnancy are more likely to have children with behavioral disorders. Various harmful substances contained in cigarettes, such as nicotine, carbon monoxide, and other harmful chemicals will be inhaled into the bloodstream and directly distributed to the child in the womb so that they can interfere with the fertility of the womb. In addition, women who smoke while pregnant are threatened with miscarriage or the fetus is deprived of oxygen so that fetal growth becomes stunted. This is because nicotine and carbon monoxide found in cigarette smoke will cause abnormalities in the placenta, risk of sudden death in infants due to poor lung function, and more likely to experience premature birth, pregnancy complications, and infant death at birth. Babies have the potential to be born with a low weight, besides that their physical, emotional, intellectual development will be lower than normal babies, plus the baby's susceptibility to infections and other health problems. Female smokers will also produce 25% less breast milk than non-smoking women (Adzilah, 2013).

As a woman who will play the role of mother, it is very important to maintain the reproductive system as a form of awareness of her nature. This is related to the nature of a woman who basically has maternal instincts as a psychological, psychic, and social unity. This relationship begins when the fetus is in the mother's womb, the gestation period, the breastfeeding period, and takes care of the child when it is born (in Katono, 1992, p. 31). Motherhood encourages women to love, care for, protect, and sacrifice for their children. The strong reason that ties a mother's love to her child is because a woman prepares herself absolutely for the life of her child (in Ibrahim, 2002, pp. 116-117). Thus, the role of women becomes very important, especially being responsible for all the consequences that occur to children who will be born if they decide to conceive and have

children. A healthy mother will certainly be more reliable to fulfill her role when she has children.

The findings of the Global Adult Tobacco Survey (GATS) at the ministry of health 2012, stated that 86% of adults in Indonesia are aware of the dangers of smoking to health and can cause serious illness. In fact, as many as 73.7% of adults are aware that secondary cigarette smoke can cause serious illness in non-smokers (Harnowo, 2012). Based on the results of research conducted by Lestari and Demartoto (2013), the knowledge of female smokers about reproductive health is quite extensive, but their attitude in maintaining reproductive health is still lacking because they stop smoking only during pregnancy and breastfeeding. After that, they will smoke again. In addition, some respondents did not have the awareness to regularly check their reproductive health with a doctor.

The phenomenon of women who smoke can be studied in a psychological perspective based on the point of view of self-identity (self-identity). Self-Identity according to Erikson is an individual's awareness of who he is and what distinguishes him from other individuals (in Santrock, 2002b, p. 190). The search for identity begins when the individual is a teenager. Kroger (in Papalia, Old, & Feldman, 2009, p. 66) argues that adolescents form identities by combining their previous life experiences and understandings into new psychological structures. Individuals are faced with various roles ranging from individual roles (work) to roles in their social groups (building relationships with others). In the process of exploring and searching for their identity, individuals often experiment and try out various roles. Hurlock (1980, p. 209) states that the developmental task of adolescence demands major changes in attitudes and behavior patterns. Not all individuals can complete this stage well. In this case, the level of individual maturity affects attitudes and behavior in determining choices in life.

Individuals who are successful in coping with and accepting their roles well will accept and understand their new self, while those who are unsuccessful will experience confusion in their identity (Santrock, 2002a, p. 57). Individuals who are able to understand themselves well are less likely to display negative personality patterns. Conversely, individuals who are unable to understand themselves tend to display negative risk behavior patterns (Schultz, 1991, p. 28).

2. Definition of Self Identity

Erikson (in Papalia, Old, & Feldman, 2009, p. 65) explains self-identity as a picture of oneself which is formed by goals, values, and beliefs that bind strongly within the individual. Furthermore, Erikson (in Santrock, 2002b, p. 192) states that self-identity is a portrait composed of various types of identity, including career identity, political identity, religious identity, relational identity, intellectual identity, sexual identity, cultural identity, interest identity, personality identity, and physical identity.

According to Rumini and Sundari (2004, p. 75), identity is a unity formed from principles, ways of life, and views that determine the next way of life. Identity is formed from previous times and determines the social role it plays.

Meanwhile, Turner, Hogg, and Chen et al (in Myers, 2012b, p. 30) state that identity is an awareness of individual attributes and attitudes. In personal identity, individuals will define themselves based on the attributes that differentiate themselves from others and their interpersonal relationships (Vaughan & Hogg, in Sarwono & Meinarno, 2009, pp. 55-56).

Marcia (in Dacey, Travers, & Fiore, 2009, p. 296) states that the process of forming an identity does not happen directly or suddenly but is a process of combining experiences, beliefs and understandings that individuals have throughout life starting from childhood to this time.

Based on the above definitions, it can be concluded that identity is an individual's awareness of who he is, which is formed from goals, values, beliefs, experiences and ways of life that bind strongly from childhood to the present so as to determine the next life.

2.1 Identity Establishment

The period of identity formation begins when individuals enter their teens. Adolescents are faced with the main developmental task, namely finding and finding their identity. In the process of finding their identity, teenagers often experiment and experiment with new things supported by a high sense of curiosity. Therefore, it is not uncommon for them to try to do adult activities to prove that they are capable of being like adults (Ali & Asrori, 2008, p. 17-18).

Hurlock (1980, p. 209) reveals that developmental tasks in adolescence demand major changes in attitudes and behavior patterns. Not all individuals can complete this stage well, especially if individuals experience delays in reaching the maturity level in their personality which is the basis for the formation of attitudes and behavior patterns. The formation of self-identity is a long process and cannot be separated from the development task that has been successfully passed. In this case, the level of maturity in individuals affects attitudes and behavior patterns in determining choices in life. Maturity is also inseparable from the learning process which is important in development.

Individuals with mature personalities have a positive view of themselves, as well as other people's views of themselves (Hurlock, 1980, p. 238). This is also supported by the individual's ability to self-evaluate, recognize and accept his own strengths and weaknesses so that a positive self-concept emerges. A good self-concept will affect an individual's ability to adapt to his environment (Dariyo, 2004a, p. 80). According to Thorne and Michaelieu's view, self-confidence will increase along with the high self-esteem of women when they are able to build good relationships with other people (in Papalia, Old, & Feldman, 2009, p. 71). High self-esteem and self-confidence affect individuals in choosing and making meaningful choices for themselves to form their own identity.

2.2 Characteristics of Identity Owned by Individuals

Self-identity according to Dariyo (2004a, pp. 80-83) has the following characteristics:

- a) self concept;

- b) self evaluation;
- c) pride;
- d) self-efficacy;
- e) confidence;
- f) responsible;
- g) commitment;
- h) perseverance;
- i) independence.

Based on the explanation above, it can be concluded that individuals who have self-identity are characterized by several characteristics, namely self-concept, self-evaluation, self-esteem, self-efficacy, self-confidence, responsibility, commitment, persistence, and independence.

2.3 Identity Status

Marcia (in Papalia, Old, & Feldman, 2009, p. 589) describes four identity statuses as follows:

1. Identity diffusion: refers to the condition of an individual who has never explored various alternative meaningful life choices and made a commitment to something he has chosen.
2. Identity foreclosure: refers to the condition of an individual who has made a commitment but has never explored his own options. This status usually occurs when parents apply authoritarian parenting that does not give individuals the opportunity to express their opinions and make their own choices.
3. Identity moratorium: refers to the condition of an individual who is exploring various choices in his life but does not yet have certainty and commitment to something he chooses.
4. Identity achievement: refers to the condition of an individual who has explored the choices in his life and is committed to doing them.

According to Marcia (in Dacey, Travers, & Fiore, 2009, p. 296), two important factors in achieving adult identity, namely first, individuals must undergo several crises in choosing various life alternatives. Second, the individual must have a commitment and be responsible for his choice.

Based on the explanation above, it can be concluded that there are four stages of identity status that individuals go through, namely identity diffusion (no crisis and commitment), identity foreclosure (commitment without a crisis), identity moratorium (a crisis that leads to commitment) and identity achievement (already get through the crisis and have a commitment).

3. Conclusion

Based on the results of the research that has been done, it can be concluded that the process of forming the identity of the three subjects starts from childhood. The family is an important key to the formation of identity during childhood because the family is the

main and first place for learning since individuals are born. The parenting style had a huge influence on the lives of the three subjects when they were children. Parents of subject F who apply permissive parenting make the subject do not have a handle on life because there is no guidance and direction given since childhood. Permissive parenting was also applied by subject M's parents, but in a different way, which tended to indulge in giving everything the subject wanted. While the parents of subject S apply authoritarian parenting by setting rules that must be met.

Entering the stage of adolescence, personal and environmental factors have a significant influence on the formation of the identity of the three subjects. The experiences experienced by the three subjects during childhood influenced the formation of the subject's self-character during adolescence. The two subjects, namely F and S, tend to be closed individuals. Both subjects tend to harbor feelings they experience because they feel that no one can understand. In contrast to subject M who can still tell his mother when he is having problems. In addition, the attitude of subject F's parents who are indifferent and indifferent makes the subject of learning become an independent, tough, and firm person in his own life choices. The attitude of subject M's parents who pampered since childhood was accustomed to making the subject's wishes must always be fulfilled. The differences in parental attitudes felt by the subject when adolescents tended to be violent made the subject rebel when their wishes were opposed. This is not much different experienced by subject S who cannot accept parental treatment when he is a teenager. The subject grows up to be a tough person and doesn't want to obey the words of his parents. The conditions experienced by the three subjects when they were teenagers made them feel depressed, so they were uncomfortable in the family. This made the three subjects prefer activities outside the home. The environment in which the three subjects developed was dominated by smokers. Often observing smoking behavior displayed by their peers managed to provide a positive outlook so that the three subjects were carried away to actively smoke.

3.1 Suggestions

Based on the research that has been done, suggestions are made to several parties, namely:

A. For research subjects:

- a) For the subject #F: The subject is expected to be able to maintain a personal commitment that has been made and made to reduce cigarette consumption. The subject can also develop other positive activities as an effort to realize his desire to be able to completely quit smoking.
- b) For the subject #M: The subject is expected to increase the consistency of behavior as an effort to carry out the commitments that have been made, such as limiting interactions with smokers and building personal principles so that they are not easily swayed by others. This is also useful to do in order to improve the self-concept of the subject.
- c) For the subject #S: The subject is expected to build awareness of the importance of women's health. In addition, the subject is suggested to be able to carry out

activities that are positive, such as participating in certain useful communities or doing activities related to hobbies as an effort to distract themselves, especially when faced with stressful conditions.

B. For further researches:

- a) Researchers can further categorize the characteristics of the subject more specifically, namely individuals who are regular smokers or are already classified as having an addiction.
- b) The next researcher should be able to triangulate the data so that the information obtained is not only single from the research subject, but also from those closest to the subject to strengthen the information obtained.
- c) The next researcher should compile a comprehensive list of questions tailored to the life span, namely childhood, adolescence and adulthood so that the information obtained is more detailed and in-depth.

The next researcher can support the results obtained in the field by including observational notes arranged based on specific observation criteria.

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