

Adolescents' Perception of Parental Action on Smoking Prevention: A Qualitative Research in Aceh, Indonesia

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ABSTRACT

OBJECTIVE: This qualitative study aimed to explore adolescents' perspectives on parental actions in smoking prevention.

METHODOLOGY: This qualitative research was conducted with a content analysis method, and the data were collected through a focus group discussion of 24 junior high school students in Aceh Besar District, Aceh province, Indonesia. Participants were recruited using a purposive sampling method. They were required to meet the following inclusion criteria: being male students aged 12 to 18 years, having proficiency in Indonesian, and residing with their family. The focus group discussion was conducted in August 2025 using a face-to-face method and audio recordings guided by an interview. Inductive content analysis was used to analyze the results in accordance with the stages of qualitative data analysis.

RESULTS: Adolescents' perceptions were grouped into two themes: preventive actions and efforts to quit smoking. Preventive actions included three sub-themes, namely providing information about the dangers of smoking, supervising social interactions, and being a role model. The theme of smoking cessation efforts comprised punishment and provision of emotional support.

CONCLUSION: Parental actions on smoking prevention include smoking prevention action and smoking cessation action. Community and family nurses who interested in smoking prevention is recommended to encourage the parents to focus on these two actions, so the prevalence of smoking among adolescents can be decreased.

KEYWORDS: Smoking, prevention, adolescent, family, parent.

INTRODUCTION

The World Health Organization (WHO) in 2019 reported that smoking caused more than 8 million deaths worldwide each year ^{1,2}. Even though numerous studies have proven that this practice causes serious health problems, the number of smokers remains high. In 2019, 1 billion people used tobacco products, including 847 million men and 153 million women. Approximately 25 million tobacco users were adolescents aged 13 to 15 ³. Currently, the smoking phenomenon in Indonesia is very concerning. This country has the highest number of smokers in Southeast Asia and the Western Pacific region. Indonesia has the youngest smoking initiation age among the Association of Southeast Asian

Nations (ASEAN) countries. Adolescents aged 13 to 18 have a smoking prevalence of around 38.3%. This percentage is significantly higher than that of neighboring countries in Malaysia (20.6%), Thailand (17.2%), and Myanmar (17%). Smoking prevalence among the 10–19 age group increased from 7.2% in 2013 to 9.1% in 2018, nearly 20% higher than the prevalence five years earlier ⁴. Moreover, a survey among 10-18-year-old male adolescents in Indonesia found that 8,9% smoked every day and 5,4% smoked sometimes. Then, the survey in Aceh found that the prevalence of daily smoking among 10-18-year-old adolescents was 2,7%, and some time smoking was 3,2%⁵.

Several investigations have shown that smoking is common among adolescents in Aceh ^{6,7}. According to 2023 data from the Central Bureau of Statistics, the percentage of the population aged 15 years and older who smoked tobacco in 2021, 2022, and 2023 was 28.30%, 27.58%, and 28.66%, respectively ⁸. This data shows the importance of prevention efforts in reducing the number of smokers.

Parents are expected to have optimal knowledge regarding the dangers of smoking and be able to recognize risky situations. This practice is influenced by various factors, with family and peers being key influences among Acehnese adolescents ¹¹. The family must have sufficient knowledge and understanding to prevent the practice effectively from

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an early age. Therefore, this research aimed to explore adolescents' perceptions of parental action on smoking prevention. The prevention efforts of parents are identified from the perspective of adolescents. This will make the prevention program more applicable and sustainable. The results are expected to serve as a reference in developing comprehensive smoking prevention programs.

METHODOLOGY

Study Design

This qualitative research used a phenomenological study to understand the lived experience of adolescents regarding smoking phenomena. The study aimed to explore the perceptions of parental actions to prevent smoking. A focus group discussion (FGD) was used to explore adolescents' perspectives and expectations regarding parental prevention efforts.

Research Participants

In qualitative studies, sample size is determined based on informational needs, one guiding principle is data saturation, which means that no new information is obtained and redundancy is achieved¹². In this study, 24 students from two junior high schools in two sub-districts of the Greater Aceh Besar district, Aceh Province, Indonesia, participated. The schools have the same characteristics: both of them are government schools located in the village area and less than 20 km from the capital of Aceh Province. Participants were recruited using a purposive sampling method. They were required to meet the following inclusion criteria: being male students aged 12 to 18 years, having proficiency in Indonesian, and residing with their family. The students were approached through school management and were informed about the purpose of the research. The written consent to participate was obtained from the parents of the participants.

Data Collection Procedure

Before the FGD, the participants were approached to build trust. Detailed information about the research was provided, and the students were assured that their personal identities would remain confidential. Participants had an equal opportunity to express their opinions, and their comments were valued in developing a youth smoking prevention program. School officials and teachers did not participate in the FGD, and participants were free to explore their perceptions.

Data collection took place in August 2025 at two junior high schools. The FGD comprised twelve students and lasted 60–90 minutes. A total of 2 FGD cycles was sufficient to achieve data saturation; no new information emerged. The research also ensured trustworthiness throughout the study. Trustworthiness is significant in qualitative research because it provides it with an important place in the academic world¹³. Trustworthiness included credibility, transferability, dependability, and confirmability¹⁴. In

this study, the researcher ensured credibility by building trust and rapport with participants before the interview. Transferability was ensured by documenting each step of the research process. Then, the researcher also conducted peer debriefing and engaged with experts and colleagues to review interpretations and findings. This strategy was used to ensure confirmability and minimize research bias.

The principal investigator, a senior lecturer from the Faculty of Nursing at Syiah Kuala University, conducted the interviews. The discussion protocol was developed based on the reviewed literature and discussed in a group meeting with several qualitative research experts from the Faculty of Nursing, Universitas Syiah Kuala. Interviews were audio-recorded and transcribed verbatim by the research team. The field note is also taken by the researcher, including physical observations of participants and the environment.

Data analysis

The FGD data were manually analyzed using an inductive, systematic content analysis. This was based on the stages of qualitative data analysis and the various parties^{15,16}. Each piece of information from the two FGD groups was combined into a single unit of analysis and transcribed verbatim. Subsequently, the transcripts were read repeatedly by three qualitative experts, resulting in a comprehensive understanding. The data were broken down into meaningful units and assigned codes. These codes were compared sequentially for similarities and differences, and were formulated into subthemes and themes.

Ethical Statement

This research obtained ethical approval from the Research Ethics Committee of the Faculty of Nursing, Syiah Kuala University, Banda Aceh, Indonesia, with ERC letter No. 113001210725. Each participant had the right to refuse participation at any time. The purpose of the research was comprehended, and personal identity was kept confidential. Informed consent was obtained, and the parents signed the consent form.

RESULTS

Characteristics of Participants

The participants included two FGDs with a total of 24 male students aged 13-15. Approximately 13 (54.17%) participants were smokers, and 11 (45.83%) were non-smokers. Out of 11 non-smoking participants, 9 had tried smoking before. Based on parental smoking status, 23 parents (95.8%) of the participants were smokers. Moreover, adolescents' perceptions were grouped into parental actions in preventing and stopping smoking. Preventive actions included three sub-themes, namely providing information about the dangers of smoking, supervising social interactions, and being a role model. The theme of smoking cessation efforts included two sub-themes,

namely giving punishment and providing emotional support.

Adolescents' Perceptions of Parental Actions for Smoking Prevention

Providing Information about the Dangers of Smoking

An important sub-theme regarding smoking prevention efforts is the provision of information to adolescents about the dangers. This is consistent with the following participant statement.

"Parents must remind adolescents that smoking is dangerous." (P1, P15, P16).

Another participant's statement supports this.

"Parents must tell adolescents that smoking causes disease..." (P13, P24).

Therefore, participants perceived that parents' efforts to prevent smoking include the provision of information about the dangers.

Supervising social interactions

The second sub-theme regarding parents' efforts to prevent smoking was supervising the social interactions of adolescents. Supervision refers to the oversight parents exercise to remain informed about adolescents' activities. This is interpreted from the following participant's statement.

"...parents need to supervise and monitor adolescents from a distance...." (P13, P20).

Another participant's statement supports this:

"...to prevent adolescents from smoking, parents must supervise social interactions..." (P3, P4, P6).

Being a Role Model

The third sub-theme related to preventing smoking is being a role model. Adolescents tend to imitate the behaviour of their parents as a role model. An important way to prevent smoking is to be a role model. This is interpreted from the following participant's statement.

"Parents should not smoke when they do not want adolescents to smoke." (P4, P10).

The statement of another participant supports this result.

"Parents should not smoke... because when parents smoke, adolescents will also start smoking." (P19, P20, 22, P24).

Other participant statements support the sub-theme.

"...when they see their parents smoking, their adolescents think... if their parents smoke, that means we can smoke too..." (P10).

Adolescents' Perceptions of Parental Efforts to Stop Smoking in Adolescents

Giving Punishment

The results show that the first sub-theme related to smoking cessation efforts is punishment. In this context, punishment is a consequence given for committing a mistake. Adolescents perceive that parental punishment has a deterrent effect, as stated below.

"Parents should scold their adolescents if they are caught smoking... and if they are caught smoking,

they should be punished by not leaving the house...so they cannot hang out with friends" (P20).

Another participant's statement supports this.

"If adolescents are caught smoking... just hit them, give them physical punishment." (P1, P13, and P17).

Statements from several participants support the results:

"... do not give them pocket money if they are caught smoking." (P11, P24).

Providing Emotional Support

The second sub-theme regarding smoking cessation efforts is providing emotional support. Adolescents are in a transitional period that can lead to various psychological issues. Emotional support from parents will help mitigate the issues, and the sub-theme is obtained from the following statement.

"...parents should provide emotional support by telling adolescents not to smoke...if they smoke, it will be difficult to find work. Many workplaces do not accept smokers". (P10).

"...parents should be close to adolescents, advise them, tell them not to be naughty... don't follow their friends who smoke..." (P4)

DISCUSSION

Parental action is crucial for smoking prevention among adolescents. This qualitative study found that parental actions in adolescent smoking prevention included prevention and cessation actions. Preventive actions include the provision of information about the dangers of smoking, supervising social interactions, and being a role model. Meanwhile, the smoking cessation efforts include punishment and providing emotional support.

Parental Actions in Preventing Smoking

Providing information about the dangers of smoking
Based on the results, parents must provide health information regarding the dangers of smoking. The provision of information can increase knowledge of the dangers of smoking and promote the prevention of cigarette addiction. Health information about smoking is essential in raising awareness of the various deadly diseases caused by cigarette smoke, including cancer, heart disease, and lung disorders, for both active and passive smokers. This information also increases awareness of the dangers of smoking.

The results align with previous research on the importance of literacy in developing healthy behaviours. Health literacy includes knowledge, as well as a set of cognitive, social, and motivational skills that enable people to access, understand, and apply health information¹⁷. This variable is defined as the skills that enable individuals to obtain, understand, assess, and use information to make decisions and take actions. Low health literacy is a significant risk factor, influencing behaviors and outcomes, such as daily exercise¹⁸.

Health literacy related to the dangers of smoking benefits adolescents and parents. Previous research has identified parental literacy as a significant factor

influencing health disparities. This research reported a connection between low parental health literacy and an increased risk of exposure to secondhand smoke¹⁹. Other previous results found a significant direct relationship between knowledge and attitudes about the dangers of smoking²⁰. Therefore, parents must provide accurate information regarding the dangers of smoking.

Supervising social interactions

The second theme identified regarding smoking prevention is supervising social interactions. Parenting styles significantly influence behavioural characteristics, including smoking behaviour. The extent to which boys engage in smoking depends on the control and acceptance provided by parents at home. High levels of parental supervision limit the expression of a genetic predisposition to smoking²¹.

Smoking prevention is easier when parents implement firm rules, provide supervision, and are attentive and affectionate toward adolescents. These results support previous research where higher levels of parental behavioral control are associated with lower rates of smoking and alcohol consumption through increased self-efficacy²².

Parental supervision increases a sense of closeness to family, an important factor associated with behavioural and emotional problems. The family is a microsystem that directly influences emotional responses and behavioural changes. According to family systems theory, the healthy development of an individual depends on the well-being of the family. The parent-child relationship is an essential subsystem of the family system, where parenting style is a crucial component. Parenting style refers to the action strategies adopted in the child-rearing process and encompasses a series of psychological constructs, including emotional warmth, rejection, and overprotection²³. Well-supervised adolescents have a reduced tendency to associate with smokers, minimizing the likelihood of trying cigarettes.

Being a Role Model

The third sub-theme identified regarding parental efforts in smoking prevention is being a role model. Parents serve as role models, and smoking behavior significantly influences adolescents. Previous research has shown that parental smoking is a common risk factor associated with adolescents^{22,24,11}. Children learn to imitate their parents' behaviour, attitudes, and values from an early age. Parental smoking negatively impacts adolescents because parents are the primary role models whose behaviors are imitated. Therefore, parents are expected to abstain from or quit smoking. Setting a good example creates a smoke-free environment and reduces the likelihood of smoking. Previous research has shown that social and psychosocial factors are associated with smoking habits. In this context, parents' smoking habits play a significant role in cognition and behavior²⁴.

Parental Efforts in Smoking Cessation

Giving punishment

An important measure adopted to prevent smoking is the imposition of punishment, which is the most commonly used strategy for addressing substance abuse²⁵. Punishment for smoking aims to discourage adolescents from smoking. However, parents must be careful not to physically harm or embarrass the child.

Educational punishment for smokers should focus on education, open communication, and obtaining solutions. An effective method includes parents remaining calm, discussing the dangers of smoking, identifying the source of the problem, providing alternative activities, and developing a cessation plan with professional help. Good communication will make adolescents feel valued and make appropriate decisions about the desire to quit smoking.

Providing emotional support

The provision of emotional support is the primary function of the family, which serves as the central context for social relationships. Previous research has shown that adolescents with a strong sense of family often have better health-promoting decision-making skills. The interaction and influence of family members on health management can positively affect smokers²⁶.

The family is a fundamental unit of human life, providing material, psychological, and social support for the survival and development of members. This system must complete a series of tasks to perform basic functions. Emotional support from parents will help to solve problems, including smoking. Parents are expected to pay attention to adolescents and respond appropriately to their emotions. Furthermore, adolescents must be shown emotional availability, understanding, and responsiveness. These are important aspects of the parent-child relationship that make adolescents feel loved, cared for, and supported.^{24,27}

CONCLUSION

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AUTHOR CONTRIBUTION

Fithria F: Initiated and conducted the research and drafted the manuscript.

Sufriani: Conducted the research and contributed to revising the manuscript.

Aiyub A: Conducted the research and contributed to revising the manuscript.

Hidayati H: Participated in collecting data and revising the manuscript.

Nirwan N: Participated in drafting and revising the manuscript.

Jannah SR: Conducted the research and drafted the manuscript.

Husna C: Participated in revising the manuscript.

All authors reviewed and approved the manuscript.

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