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THE EFFECT OF DBT THERAPY AND TAZKIYAH AL NAFS ON IMPULSIVE SMOKING BEHAVIOR IN STUDENTS

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ABSTRACT

Research on impulsivity and smoking shows that smokers are generally more impulsive than non-smokers and that impulsivity is associated with smoking initiation, maintenance, quitting, and nicotine dependence. Therefore, this study aims to determine the effect of BDT (dialectical behavior therapy) and Tazkiyah al-Nafs therapy on reducing impulsivity in active smokers among UIN Raden Fattah Palembang students. The type of research used in this study is qualitative research, and the participants in this study are active smoking students who have successfully quit smoking for at least 24 hours (one day). Two men were randomly selected as participants. This study used observation and interview techniques and consisted of five sessions, each session lasting 30-45 minutes. None of the two participants only quit smoking for 1-3 days (0%), but there was one participant each who managed not to smoke in 4-7 days (50%) and more than 7 days (50%). This result also indicates more success than the previous study where only 86% (6 out of 7 people) quit smoking for at least 24 hours. Despite the limitations, this study was successful in integrating the two types of therapy, and applying them well to help participants in their quit attempts.

Introduction

Based on the percentage of smokers in 2015, Indonesia ranked 6th with a figure of 39.8% (WHO, 2016). *The Global Youth Tobacco Survey* (GYTS) in 2014 reported that Indonesia has the highest rate of adolescent smokers in the world. The WHO estimates smoking deaths will reach 10 million annually by 2030, 70% of which occur in developing countries. In Indonesia, the average proportion of daily smokers aged 20-24 years did not decrease from 2007 to 2013, but increased to 27.2% in 2013 (Resikdas, 2013).

Smoking is the behavior of burning tobacco to be smoked and/or inhaled. These include clove tobacco, kretek tobacco, white cigarettes, cigars or other forms derived from tobacco plants (Nicotiana *tabacum*), *Nicotiana rustica* and other synthetic species or types whose smoke contains nicotine and tar or without other additives (Ministry of Health, 2013). Many factors influence smoking behavior among adolescents, but one of them is psychological factors. Current research shows that the psychological well-being of

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adolescent smokers is lower than that of adolescent nonsmokers (Fithria et al., 2018). Smoking is driven by curiosity and curiosity towards cigarettes (Case et al., 2017). In addition, smoking is driven by the assumption that they want to think of themselves as men or true adults, and smoking is seen as a means to relieve stress, boredom and boredom (Directorate General of Disease & Infectious Disease Prevention and Control, 2017).

The act of smoking is one of the problems that requires attention from various parties, especially health workers, because a smoker is at risk of heart disease, stroke, cancer and many other diseases (Duncan, Pearson, Madison, 2018).

According to Mueller (2001), impulsivity is the tendency to react quickly and unexpectedly to external and internal stimuli, regardless of the negative consequences of the action. According to Daruna and Barnes (1993), impulsivity manifests itself in a variety of behaviors that are maladaptive, disproportionate to the situation, and have dangerous or undesirable consequences if manifested unexpectedly or prematurely.

Studies on impulsivity and smoking show that smokers generally have higher impulsivity than nonsmokers and that impulsivity is related to initiation, maintenance, cessation, and nicotine dependence (e.g., Mitchell, 1999; Reynolds et al., 2007; Doran et al., 2009; Perkins et al., 2008).

Dialectica Behavior Therapy, commonly called DBT, is a treatment whose main strategy is cognitive modification based on dialectical beliefs (Agus, 2021). DBT is a comprehensive principles-based innovative treatment derived from cognitive behavioral therapy that integrates sensitivity practices and dialectical principles (Jin Wen Huang et al., 2020). In DBT, the term dialectic refers to the integration of individual thought. In contrast, the advantages and disadvantages of this way of thinking, including the involvement of logic. Dialectics integrates two opposing ideas, creates acceptance and change, and provides better results (Firda, 2019). This therapy involves changing perceptions with talk to understand the experience of conflict between clients or between individuals.

According to Imam al-Ghazali, the understanding of *tazkiyatun nafs with* takhliyatun nafs *is to* empty oneself of bad morals and fill oneself with good morals, then the soul will be free from bad morals and filled with good morals, by learning good morals will make it easier to get closer to Allah SWT (Masyhuri, 2012). This therapy involves changing perceptions with talk to understand the experience of conflict between clients or between individuals. *Tazkiyah An-Nafs'* efforts are based on individual efforts to integrate themselves and foster good relationships with themselves and others, souls and other creatures of God, such as animals and plants (Mutholingah, 2021).

This study aims to determine the effect of BDT (*Dialectical Behavior Therapy*) and *Tazkiyah Al nafs* therapy on reducing the impulsivity rate of active smokers in students at UIN Raden Fatah Palembang.

Method

The type of research used in this study is qualitative research, namely research used to describe and analyze phenomena, events, social activities, attitudes, beliefs, perceptions, or thoughts of individuals and groups. This research is based on the number of UIN Raden Fatah Palembang students who are active smokers, and not infrequently among them want and try to quit smoking. Participants in this study were active smoking students who had succeeded in not smoking for at least 24 hours (1 day), there were two men as randomly selected participants.

This study was carried out within 4 weeks with one session each week, except for the first week which was directly carried out in two sessions, and both participants went through the entire series without missing anything. In contrast to previous studies that only had female participants and the percentage of attendance was only 86% (Nina, Shireen, Christopher, &; Jill, 2019).

The implementation of this activity in this study used observation and interview techniques consisting of five sessions and each session was carried out for 30-45 minutes. The description of the time for each session will be explained as follows:

Session 1: Building closeness with counsellors (building report card), gift informed consent.

Session 2: Know the beginning of cigarette use, how long during cigarette use

Session 3: Identify how many cigarettes are consumed per day, what effects are felt during smoking, the purpose of smoking

Session 4: DBT therapy and concepts Tazkiyah al Nafs against the subject

Session 5: Commitment and preventing relapse.

The variables in this study are impulsive smoking behavior which will then be given *treatment* in the form of DBT and also Islamic therapy with the *Takziyah al Nafs* approach as a goal to reduce impulsive behavior and avoid triggers of smoking habits by helping to overcome the emotions experienced in counseling by experiencing, recognizing, and accepting them and developing self-control over negative impulses and desires. Individuals trying to quit smoking should start by recognizing their impulsive urge to smoke. It involves a deep self-awareness (*muraqabah*) of the times when they feel like smoking.

Results and Discussion

The method of implementing therapy is the result of the integration of general therapy, namely *Dialectical Behavior Therapy* (DBT) and also Islamic therapy using the *Takziyah al Nafs approach*. Based on the last research session, it was found that the integration of this therapy is acceptable, and the effect of the intervention on the success of smoking cessation efforts. Of the two participants, none only quit smoking for 1-3 days (0%), but there was one participant each who managed not to smoke in 4-7 days (50%) and more than 7 days (50%). This result also indicates more success than previous studies where only 86% (6 out of 7 people) quit smoking at least 24 hours (Nina, Shireen, Christopher, &; Jill, 2019).

There are some limitations to this study. First, the implementation time is relatively very short, especially when compared to research on therapy in general. Second, participants who participated in the study were still very few considering the limited time of existing research. Finally, the integration used may not be effective for non-Muslim students, because this study focuses on students at Islamic universities that allow to integrate both types of therapy.

Conclusion

Despite the existing limitations, this study is considered successful in integrating two types of therapy, and its application is good so that it can help participants in their efforts to quit smoking. Further research is needed to see the effectiveness of integration between these two types of therapy, especially if carried out on non-Muslim participants, can be further increased the time span and number of participants to be used.

References

- Agus Santoso. (2021). *Mengenal Pendekatan Dialectikal Behavior Therapy*. Surabaya: CV. Global Aksara Pers.
- Barratt, E. S., Dougherty, D. M., Schmitz, J. M., and Swann, A. C, M., F. G. (2001). *Psychiatric aspects of impulsivity. Am. J. Psychiatry 158, 1783–1793*.
- Cooperman, N. A., Rizvi, S. L., Hughes, C. D., & Williams, J. M. (2019). Field test of a dialectical behavior therapy skills training—based intervention for smoking cessation and opioid relapse prevention in methadone treatment. Journal of Dual Diagnosis, 15(1), 67–73. https://doi.org/10.1080/15504263.2018.1548719
- Daruna J.H., Barnes P.A. (1993). *A neurodevelopmental view of impulsivity*. In: McCown W.G., Johnson J.L., Shure M.B., Editors, The impulsive client: Theory, research and treatment.
- Direktorat Jenderal Pencegahan dan Pengendalian Penyakit, & Menular. (2017). Hidup Sehat Tanpa Rokok. Kementrian Kesehatan Indonesia.
- Firda Amalia. (2019). Penurunan Maladaptif Coping Melalui Dialectical Behavior Therapy Untuk Meningkatkan Psychological Well-Being Pada Remaja Broken Home. Tesis. Malang: PPS UM Malang.
- Harrell, M. B., Pérez, A., Loukas, A., Wilkinson, A. V, Springer, A. E., ... Perry, C. L, C., K. R. (2017). Addictive Behaviors The relationships between sensation seeking and aspectrum of e-cigarette use behaviors: Cross-sectional and longitudinal analyses specific to Texas adolescents. Addictive Behaviors, 73(May), 151–157. https://doi.org/10.1016/j.addbeh.2017.05.007
- Kemenkes. (2013). Peraturan Menteri Kesehatan Republik Indonesia Nomor 28 Tahun 2013 tentang Pencantuman peringatan Kesehatan dan Informasi Kesehatan pada kemasan produk tembakau. Jakarta: Kemenkes RI.

- Lerman, C., Coddington, S.B., Jetton, C., Karelitz, J.L., Scott, J.A, P., K. A. (2008). *Initial nicotine sensitivity in humans as a function of impulsivity. Psychopharmacol.* 200, 529-544.
- Masyhuri. (2012). Prinsip-Prinsip Tazkiyatun Nafs dalam Islam dan hubunganya Dengan Kesehatan Mental. Pemikiran Islam, Vol 37, No 2.
- Mitchell, H.S. (1999). Measures of impulsivity in cigarette smokers and non-smokers. Psychopharmacol. 146, 455-464.
- Patak, M., Shroff, P., Penfold, R.B., Melanko, S., and Duhig, A.M, R., B. (2007). *Laboratory and self-report assessments of impulsive behavior in adolescent daily smokers and nonsmokers*. *Exp. Clin.* Psychopharmacol. 15, 264–271.
- Pearson, E. S., & Maddison, R., D., L. R. (2018). Smoking prevention in children and adolescents: A systematic review of individualized interventions. Patient Education and Counseling, 101(3), 375–388. https://doi.org/10.1016/j.pec.2017.09.011
- Riset Kesehatan Dasar. (2013). Jakarta: Departemen Kesehatan RI, 2013.
- Siti Mutholingah. (2021). *Metode Penyucian Jiwa (Tazkiyah Al-Nafs) dan Implikasinya bagi pendidikan Islam*. Jurnal Ta'limuna 10(01).
- Tahlil, T., Adlim, Jannah, S. R., Darmawati, & Dirna, C, F. (2018). *PSYCHOLOGICAL WELL-BEING AMONG ADOLESCENT SMOKERS*. Syiah Kuala University, Proceeding of The 8th AIC: Health and Life Sciences 2018.
- World Health Organization. (2016). *World Health Statistic Data Visualizations Dashboard: Tobacco Smoking*. http://apps.who.int/gho/data/node.sdg.3-a-viz?lang=en.
- Zhou, X. Y., Lu, S. J., Xu, Y., Hu, J. B., Huang, M. L., ... & Wei, N, H., J. W. (2020). Dialectical behavior therapy-based psychological intervention for woman in late pregnancy and early postpartum suffering from COVID-19: A case report. Journal of Zhejiang University-SCIENCE B, 21(5), 394–399.