

## CBT INTERVENTION ON SMOKING CESSATION: A CASE STUDY ON TOBACCO ADDICTION CLIENT

*(Intervensi CBT Dalam Berhenti Merokok: Satu Kajian Kes Klient Ketagihan Tembakau)*

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### 1.0 INTRODUCTION

#### Client's Background

This case study is all about a client named Awi (not a real name) who lives in Raub, Pahang. He married and had 5 kids. He has poor knowledge of Islamic education because he always skipping school. He became addicted to cigarettes as early as 13 years old since school. His smoking activities were known to the family and had been scolded by his parents but ignored even though he had been beaten with a cane by his father. This stubbornness led to his reaching the age of 18 and only then did he recognize the heroine introduced by his friend, Usop. Almost over 15 years wallowing in drug addiction and 2 times he was arrested by AADK. The last time he was admitted to PUSPEN Besut and there this client repented after undergoing rehabilitation based on Islamic Spiritual. There, the client learned to pray, recite, and was finally released in 2017. After more than 5 years the client quit drug addiction and was seen to have the potential to be given responsibilities. Then in 2019, he was appointed as a Peer Staff or PRS to help fellow clients at AADK Raub. Efforts to quit drug addiction don't stop there. Even the client is present to meet the trainee counselor to undergo a smoking cessation counseling session. The client has provided good cooperation throughout the session with the trainee counselor and the desire to reduce cigarette addiction was also expressed at the beginning of the rapport session. Clients started getting involved with cigarettes at the age of 13 (form 1). He wanted to try and have fun because he was influenced by his peers.

#### Client's Problem Background

Now he has been a heavy smoker by takes 40 sticks of tobacco per day which are two boxes of cigarettes. He thinks that this approach can keep him maintaining abstinence from drugs used. Table 1 shows the frequency of clients smoking cigarettes per day.

Table 1: Frequency of Smoking / Tobacco

Time of Smoking	No. of Smoking (Tobacco)
6 – 9 am	5 sticks
12 – 3 pm	15 sticks
3 – 6 pm	10 sticks
8 – 11 pm	10 sticks
Total (per day)	40 sticks

Based on table 1, shows that the client smokes 40 cigarettes in a day starting in the year he was released from PUSPEN Besut. The client's determination to quit drugs has made the client choose only cigarettes for the client to use as a substitute for drugs. During the time the client worked between 12 noon and 3 pm, the client was seen smoked 15 sticks of cigarettes to focus while working. This is because at this time clients usually take ice/meth drugs during working hours. When this happens until 2020, the client begins to feel stuffy in his breathing and easily tired. As a result, the client begins to feel worried about the situation and begins to think about how to quit smoking.

#### Objectives

This case study is to see how the client can reduce smoking cigarettes per day, secondly is to explore more how the client himself reduce smoking when he gets bored by changing irrational thinking and behavior by himself, and lastly to help the client making his own decision in maintaining well-being without cigarettes and gain insight as a result.

## 2.0 LITERATURE REVIEW

Today's hardcore smokers have done something very harmful to almost all the organs of their body as well as those around them who have also inhaled their cigarette smoke called second smokers. This is because according to the Ministry of Health (MoH) based on a study, in a cigarette there are about 4,000 types of toxic substances that are inhaled into the body when a person smoke. Among the harmful contents of cigarette smoke are tar, Tobacco, and carbon monoxide. Therefore, prevention is better than cure is a method of prevention that can also prevent people from being affected by drug abuse in the future. This is because each drug addict is smoking but not each smoker is a drug addict. Still, the smoke has Tobacco a type of drug. The case study of this counseling intervention is hoped to guide AADK counselors in overcoming cigarette addiction among ex-drug addicts. Efforts to quit smoking among ex-drug addicts are strongly encouraged to clean up their image as drug addicts into someone clean from drug addiction indirectly in the eyes of the public.

The size of a cigarette is the circumference of a paper cylinder measuring between 70 to 120 mm (various types according to the country) with a diameter of about 10 mm which contains dried tobacco leaves that have been finely chopped. Cigarettes are burned at one end and burned until the smoke can be inhaled through the mouth at the other end. there are two types of cigarettes, namely refined and unfiltered cigarettes. Filtered cigarettes are made from synthetic fiber foam that serves to filter out Tobacco. Cigarettes are usually sold in box-shaped packaging or paper packaging that is easy to put in a bag. The Malaysian government's efforts to warn smokers are accompanied by health messages that warn smokers about the health dangers of smoking, such as lung cancer or heart attack. However, for hardcore addicts, it is just a decoration on the box (Bahagian Pendidikan Kesihatan, 2017).

The ingredients contained in cigarette smoke are 2 times more Tobacco, 5 times more carbon monoxide, 3 times more tar, and 50 times more chemicals that are harmful to health Nearly one-fourth of heart disease victims are the result of a smoking habit. According to studies and analysis by European health experts (Boyle P, 1997) pointed out that in every developed country in general, tobacco is responsible for being the cause of death with a percentage of 24% of all male deaths and 7% of all female deaths; this figure continues to show an increase of more than 40% in men in several countries in central and eastern Europe and to 17% in women in the United States. Research conducted in the context of frequency in the field of cigarette smoke composition and chemistry has declined in the last decade. Even so, there are many studies through official data showing that cigarette smoke is a very complex mixture containing about 4800 different compounds (Hoffmann, D., & Hoffmann, I., 1997). According to Hoffmann, D., & Hoffmann, I. (1997), about 100 of these compounds are also known as carcinogens, cocarcinogens, or mutagens. It is a very complex mixture also containing gases such as ozone, formaldehyde, ammonia, carbon monoxide, toluene, and benzene, and about 1010 particles with different sizes in each mL of mainstream smoke. According to Saha, et al, (2007) the leading causes of death especially in industrial society are cardiovascular disease, and atherosclerosis. It stems and starts from Coronary Artery Disease (CAD) which is atherogenesis, which can also cause aortic and peripheral atherosclerotic vascular disease. According to Powell JT (1998), it is currently quite difficult to understand the mechanisms by which smoking affects the development and progression of atherosclerosis, however recent studies have shown that tobacco smoke adverse effects of smoking on endothelial and smooth muscle cell function as well as thrombotic disorders.

In Malaysia, refer to Ministry of Health (MoH), heart disease is the leading cause of death while stroke is the fourth leading killer. Toxins from smoking also have a reaction effect to drugs. It is generally known that smoking can affect the function of several groups of enzymes in the liver and sometimes it can exacerbate the side effects of a drug. Smokers not only endanger their health but also affect the health of those around them. Those who inhale cigarette smoke without smoking from people who smoke are known as passive smokers. For example, children will be prone to lung and heart diseases such as asthma, impaired lung growth, hearing impairment, have low IQ, motor control problems, miscarriage, and death in the womb. Pregnant mothers will also experience adverse implications for the unborn baby such as giving birth to premature babies and underweight babies (Wikipedia, 2020). Tobacco is an addictive tobacco product, a chronic brain disorder. Prolonged use results in physiological dependence as well as a strong urge to use tobacco. This addiction is closely related to the rate at which

Tobacco is absorbed and reaches the brain (Prochaska, 2015). In addition, Tobacco can promote blood clotting (Schaller et al, 2013) and can absorb into the placenta of pregnant mothers whose it will interfere with the developmental process of the baby in the womb. Although, it is not easy to change the behavior of someone who is addicted. This is because behavior modification is a difficult and complex procedure. One of the reasons that behavior change attempts fail is that the person is not ready for change (Prochaska and DiClemente, 1982). Efforts to provide awareness to Malaysians need to continue, especially for those just starting as new smokers.

### 3.0 METHODOLOGY

Counselors conducted each session using Egan's Skilled Helper Model. According to Egan, Gerard. (1982), Egan's model consists of three stages: The Exploration stage- What is going on? The Understanding stage- What do I want instead? and The Action stage- How will I get it? This method requires the counselor to be an active and engaged observer of the session, by simply ensuring the direction of the best choice of action for the client. With a collaborative combination of the Egan Model Skilled Assistants formed from exploration, understanding, and action, counselors can develop appropriate frameworks for client well-being and therapeutic advancement (Serrao, Ferdie. 2019). This case study is based on individual counseling interventions periodically for 5 sessions and uses document analysis methods related to questionnaires and psychometric tests related to smoking habits and addictions. CBT or Cognitive Behavioral Therapy deals with situations that affect their reactions (emotions, behaviors, physiology) based on psychological constructs interpreted by individuals, more than that the situation itself. According to Judith S. Beck & Sarah Fleming (2021), the CBT perspective also sees people's interpretations may be inaccurate, distorted, or does not help, especially when psychopathology is present. This interpretation, called "Automatic thinking", involves the underlying belief that the individual better understands the will of themselves, others, the world, or the future. The CBT approach is a therapy that will validated using randomized controlled trials distributed in the form of such literature that others can learn, practice, and improve treatment (Beck, 2019).

Trainee counselors have also used the psychometric tools namely the Alcohol, Smoking, and Substance Intake Screening Test (ASSIST) and the Stage of Change (SOC). According to World Health Organization (WHO), the Alcohol, Smoking, and Substance Intake Screening Test (ASSIST) was developed for the World Health Organization (WHO) by a group of international researchers and doctors as a technical tool to help identify early health risks associated with substance use and substance use disorders in primary health care, treatment general medicine, and other conditions. The criteria of using ASSIST are that the condition is a significant problem affecting the health and well-being of the client. According to WHO (2020), three levels of risk readings can be obtained from this screening test, namely: (1) Lower risk; which is clients with an ASSIST risk score of 'three or less' for other substances ('10 or less' for alcohol) are at low-risk problems related to the use of its materials. They can sometimes use materials, did not experience any related problems its use, and low risk to develop problems related to the use of their materials in the future with their current usage patterns. (2) Simple risk; which is clients scored 'between 4 and 26' for other substances ('11 and 26' for alcohol) of moderate risk to health and other problems and maybe being experienced some of these problems now. Continued use of this way indicates the possibility of future health and other problems, including possibilities of dependence. The risk increases for those who have a history of the use of related materials problems and dependencies. And lastly, (3) High risk; which is clients who get a score of '27 or high is for any substance including alcohol indicates that high-risk clients depend on the substance and may experience health, social, financial, legal, and rapport problems as a result of the use of their materials. Moreover, the client is having injected medication in the last three months more than an average of 4 times a month may also be at high risk.

While the Stage of Change (SOC) Test is a test that needs to be implemented according to the phase and level of change in client behavior. The basis of the change assessment was measured through the University of Rhode Island Change Assessment Scale (URICA) Screening Test which had to be done during the first pre-session. there are 5 stages of change, namely pre-contemplation, contemplation, preparation, action, and maintenance (Fidancı, İzzet & Ozturk, Onur & Unal, Mustafa, 2017). According to Mohamad Isa et.al, (2018), counselors need to do this test at the initial session such as the first and second sessions to find out the scale of the client's level of change. Therefore, improvements to the use

of this SOC test should be done at least twice in the intervention at the beginning of the session and the end of the session to see the development of client progress in the scale of change. In this counseling intervention, the counselor used this test once in the 5th session only and the SoC test results showed that the client was in the action stage with a total score of 13.86. The result shows that he intended to practically change his behavior in term of smoking addiction problem solving.

**4.0 RESULTS AND DISCUSSION**

The findings of smoking frequency through the report of individual counseling intervention sessions and as a total of 5 sessions were conducted by the counselor on the client. In the first session, the client admitted to smoked 40 cigarettes every day. At the end of the year 2020, he feels pain in his chest and feeling tired easily. He was afraid if he will be admitted with lung cancer and so on and advised by a doctor who treats him at a clinic to try to stop smoking. Thus, the search for help, and finally, he met a counselor. Next in the second session, the client can reduce 10 sticks of cigarettes from 40 sticks a day but still not able to self-control in cigarette addiction. The counselor shows the client how bad being a heavy smoker that suffering from lung cancer, Tuberculosis (TB), nausea, and so on. In the third session, there was a reduction in smoking addiction by 30 cigarettes a day compared to 15 cigarettes a day. The fourth session also showed a decrease in smoking addiction from 15 cigarettes to 10 cigarettes a day. This shows a positive result because the client has successfully reduced the number of cigarettes. The counselor has also given an affirmation to the positive behavior of the client. In the fifth session, the client experienced a grateful moment after telling the counselor that he manages to smoke only 5 sticks of cigarettes. According to Hoffmann, D., & Hoffmann, I. (1997), various studies show that increasing the number of cigarettes smoked per day carries a high risk of developing CAD, number of years of smoking and age of onset of smoking, thus showing a dose -related response. On the other hand, it has been reported that a reduction in mortality and morbidity due to atherosclerotic vascular disease can be achieved if smoking is stopped.

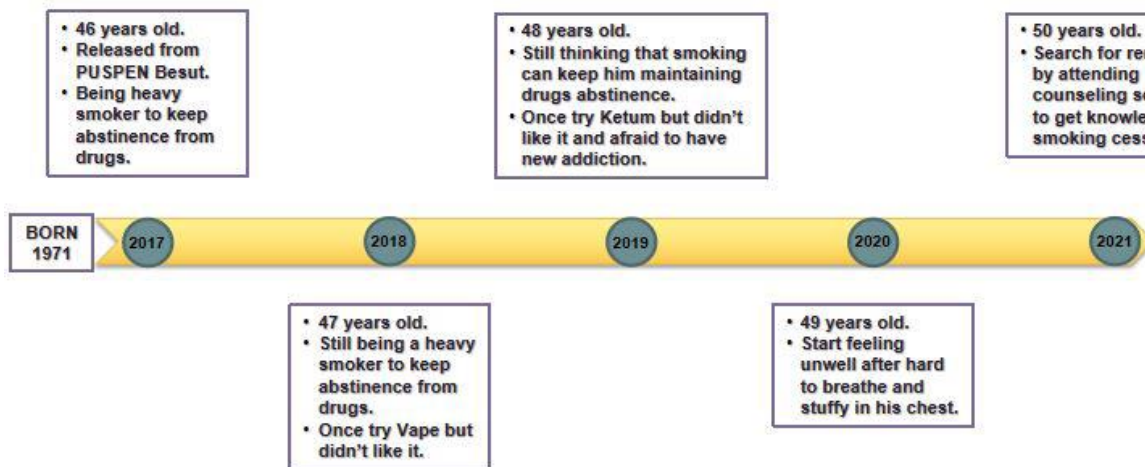


Figure 1. Chronology of client’s tobacco smoking frequency.

**5.0 CONCLUSION**

Strong determination with significant personal support with clients is crucial in curbing a relapse of smoking. Every drug addict needs to make wise choices in overcoming their cravings for the use of substances that can be self-destructive as well as their significant other. The results found that the client was able to quit smoking, but there were still situations where the client still experienced a situation of ambivalence. This situation tends to lead the client towards distorted thinking and continues to drift into a circle of recurring shadows. Carelessness and peer influence can also weaken a client's motivation to make changes. His action of staying away from friends who smoke is a positive action towards self-stability and the effort that clients need to continue. This is because the client is easily overwhelmed and swallowed by the persuasion of a friend if not restrained. The application of Islamic spiritual values to clients helps a lot in maintaining rational thinking and good behavior, especially in reducing the rate of cigarettes smoked daily. In maintaining that reduction, clients need an injection of encouragement from

friends and family to be able to deal with triggers and distorted thoughts to continue to abstain from smoking. Ongoing intervention and non-smoking moral support should be implemented by all parties, namely his spouse, family, friends, and AADK Daerah Raub management so that the client does not relapse with smoking and drugs. Therefore, all parties need to work together to realize the aspirations of the country to produce intellectually, spiritually, emotionally, and physically balanced citizens. Proposed in the future, this client is given other CBT techniques such as triggering and anchoring technique to maintain his recovery.