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CIGARETTE SMOKING, IS IT A SIMPLELEARNING HABIT OR SOMETHING ELSE?

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Abstract: Because of the rise in the number of deaths, the world is facing a challenge to reduce the number of smokers. To do so we need to know if smoking is just a simple habit with willpower alone smokers can quit or is it a learning habit controlled by subconscious programs? The high failure rate among those who tried to quit smoking using their willpower alone supports the idea that it is not just a simple bad habit but it is a bad habit controlled by one or more subconscious programs. Method: A cross-sectional survey was conducted in Riyadh in the period between November 2021 till January 2023 on 108 participants who were grouped into 3 groups according to the age of start smoking [group 1 (18 years or less), group 2 (19-29 years), group 3 (>30 years)], and the smoking habit was assessed in relation to the five gateways to the subconscious mind [repetition, authority(obey/rebel), desire for identity or ego, and emotion]. **Result:** Most of study participants whose age is 18 year or younger start smoking because they were looking for identity and like to be identify as smoker. On other hand, the majority use smoke as a stress cooping tool and reward tool as well. **Conclusion:** The study found that to help people quit smoking and increase the success rate, the program most includes a therapy which has the ability to detect and substitute or replace old SC mind program with a new healthy one, because smoking is a complex habit.

Keywords: Smoking, habit, subconscious programs. Willpower

Introduction: Smoking, a manmade epidemic, occurs all over the world and is associated with a host of diseases jeopardize the health and shorten the life of the smokers¹. The World Health Organization (WHO) estimates that, 47% of men and 12% of women smoke, with about 4.9 million people dying each year because of smoking². This figure is expected to increase to 10 million deaths by 2030 if the present trend continues².

Because of this rise in the number of deaths, the world is facing a challenge to reduce the number of

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smokers. To do so we need to know if smoking is just a simple habit with willpower alone smokers can quit or is it a learning habit controlled by subconscious programs? The high failure rate among those who tried to quit smoking using their willpower alone supports the idea that it is not just a simple bad habit but it is a bad habit controlled by one or more subconscious programs and those programs need to be accessed and converted or replaced in order to help smokers quit³.

To understand the above-mentioned point, we need to differentiate between simple and complex habit. Simple habit is the habit that is learned by repetition alone which means it is not anchored to any subconscious programs rather than repetition⁴. On other hand, Complex habit is the habit that is learned by repetition, anchored with other subconscious (SC) programs and activated by triggers to the programs they are anchored to⁵.



In relation to habit, human mind functions like a computer. A computer terminal takes input, and a computer always gives the same output until we change either the input or the program. This is also true of the subconscious mind. if we try to change a habit pattern or way of thinking by simply changing the input without changing the subconscious program, replaying the original program will trigger the old habit pattern⁶.

In order to understand the habit of cigarette smoking we conduct this study which aims to investigate the factors that influence smoking habit in order to use them to help smokers to quit.

We hypothesized that smoking starts as a result of mainly 4 subconscious programs and empowers by repetition (figure-1).

Method: This was a cross-sectional survey. The population studied consisted of smoker male Saudi resident aged between 15 and 50-year-old. The study was conducted in Riyadh in the period between November 2021 till January 2023.

Questionnaire was designed to answer the core questions about the aim. 171 responses were collected on the study period. 63 responses were excluded because they were incomplete and the study was conducted on 108.

The participants were grouped into 3 groups according to the age of start smoking, because adult smokers who started smoking regularly at age 18 years or younger were more likely to experience high levels of nicotine dependence and less likely to attempt or intend to quit in adulthood compared with those who started at older age⁷ [group 1 (18 years or less), group 2 (19-29 years), group 3 (>30 years)], and the smoking habit was assessed in relation to the five gateways to the subconscious mind [repetition, authority(obey/rebel), desire for identity or ego, and emotion]. Ethical approval was obtained from the ethics committee of the hospital. The data was analyzed using Microsoft excel 2020 and the result was expressed as percentage.



Figure-1: hypothesis of smoking as a complex habit



Result:

Smoking and rebellious personality: Our study showed that some of the participants started smoking to rebel one or more authority figures in their life. 63.6% of group 1 participants (teenagers) smoke out of rebellion against authority figures compared to 44.4% and 47.4% of group 2 and group3 respectively. When participants asked if their desire to smoke increases when someone tells them not to smoke, 68% of group 1 answer yes compared to 60% and 32% of group 2 and group3 respectively.

Smoking as a way to imitate an authority figure:

When study participants were asked if their authority figures or celebrities have motivated them start or continue smoking, the responses were; 31%, 22% and 34% for group 1, group 2 and group3 respectively. (figure-2).

Smoking as a stress copping tool: The majority of study participants from all groups use smoking as a stress coping tool, the responses were; 91%, 82.2% and 86.8% for group 1, group 2 and group3 respectively. (figure-2).

Smoking as a way to seek an identity: 72.7% of group 1 and 62.2% of group 2 start and continue smoking because they were looking for Identity and they identify themselves as smokers (%50% and 62% for group 1 and group 2 respectively). On other hand only 34.2% of group identify themselves as smokers. (figure-2).

Smoking as a reward: Our study showed that all groups used smoking as a way of reward when the want to motivate or encourage themselves (68.2%, 66.7% and 68.4% of study participants in group 1, group 2 and group3 respectively).

Influence of Health, Religion and doctor advice on the decision to quit smoking

our study showed that caring for health was the strongest factor that lead people to quit smoking (91%, 95.6% and 92.1% of study participants in group 1, group 2 and group3 respectively want to stop for their health). Religion was the second factor that influence their decision to stop followed by doctor advise. (figure-3)





Figure-3: Influence of Health, Religion and doctor advice in the decision to quit smoking

Discussion: Smoking a cigarette once does not turn all people into regular smokers but it is the repetition which makes smoking a habit⁸. When this smoking habit is anchored with two or more subconscious programs it becomes a complex one. Richmond in his study defined Habitual behaviors as the behavior which are driven by impulses that are triggered when a person encounters settings that they have learned to associate with specific behavioral responses, from having previously and



repeatedly enacted those behaviors in those settings⁹. Richmond definition is exactly what we mean by complex habit in this study.

To our knowledge, this study is the first study to address the issue of cigarette smoking as a complex habit and highlight the most common subconscious programs that play a significant role in start, continue and failed to quit smoking. The vast majority of the published studies about quit smoking deal with nicotine withdraw and focus to help smokers quitting by finding ways to decrease or eliminate the withdraw effects.

The participants in our study were grouped into 3 groups according to the age of start smoking to give us the opportunity to assess which SC program is more predominant for each age group and allow us to build a treatment plan, risk orientation and education programs.

For group 1, those who started smoking at age of 18 years old or less, our study showed that the most common SC programs that cause them to start smoking were their desire for identity followed by rebellious attitude. Juniors can do very illogical and dangerous things simply because they want to be accepted by their friends or as a prove of maturity. Moreover, youth with low self-image are especially vulnerable to this desire. When smoking becomes an identity, that's upgrades it from simply being a bad habit to become a complex habit which operated by SC program. our result is on agreement with Ogawa et al study on senior high school students which showed that most smokers started smoking while they were in junior high school, and that reason for taking up the habit was "encouraged by friends"¹⁰ which means peer pressure or looking for acceptance is the main drive.

Rebellious attitude is the second most common cause to start smoking among group 1 participants. Some teens smoke out of rebellion against authority figures, especially parents and school teachers; and some smokers find difficulty in quitting because they resent being told by anyone not to smoke. So, to help smokers with rebellious attitude to quit, their therapists have to convince them to rebel the idea of keep smoking. The second age group of our study (group 2) started smoking under the effect of the main two SC programs as in group 1, which is understandable as half of them in their early 20s and some are still looking for identity.

Most group 3, >30 years, participants started smoking out of rebellion which is strange for this group because if they have rebellious personality, they would start smoking at early age. When we dig deep to understand what makes people start smoking in advance age, we found that 90% of group 3 participants use smoking as a stress coping tool. Which made us conclude that they might have some Rebellious behavior but the main cause to start smoking is to cope with stress.

The majority of study participants use smoke as a tool to cope with stressful situations. This might explain the high failure rate $(95\%)^{11}$ when willpower alone is used to quit smoking because during stress willpower is weaken. So, to increase the success rate, a healthy stress coping technique should be learnt to replace smoking in SC mind in any stop smoking program.

Our study also highlighted on the importance of using cigarette as reward in smoker life, 66% or more of study participants reward themselves with cigarette when they accomplish anything. Therefore, to strength the treatment program and reduce the failure rate another reward tools should be included in the program. This new reward tools should be replaced the old one (Cigarette) in SC mind level using either hypnosis or guided meditation.

In order to improve the current education program about the health risk of smoking, we include questions in the study survey aiming to search for people or things that have authority on Smoker's mind, so we can employ them to strengthen the program and increase the number of Smokers who think of quit smoking. We found that health and religion are the most influencer followed by doctor. This result indicates that focusing in Health risk of smoking alone will not improve the education program but using Health representative like doctor



and religion representative at the same time will rocket the program.

Conclusion: our study found that to help people quit smoking and increase the success rate, the program most includes a therapy which has the ability to detect and substitute or replace old SC mind program with a new healthy one, because smoking is a complex habit.

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